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SENATE

{ REPORT  
105-58

DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES,  
AND EDUCATION AND RELATED AGENCIES AP-  
PROPRIATION BILL, 1998

\_\_\_\_\_  
JULY 24, 1997.—Ordered to be printed  
\_\_\_\_\_

Mr. SPECTER, from the Committee on Appropriations,  
submitted the following

**REPORT**

[To accompany S. 1061]

The Committee on Appropriations reports the bill (S. 1061) making appropriations for Departments of Labor, Health and Human Services, and Education and related agencies for the fiscal year ending September 30, 1998, and for other purposes, reports favorably thereon and recommends that the bill do pass.

*Amount of budget authority*

Total bill as reported to Senate .....	\$269,050,387,000
Amount of adjusted appropriations, 1997 .....	279,398,355,000
Budget estimates, 1998 .....	268,405,783,000
The bill as reported to the Senate:	
Under the adjusted appropriations for 1997 ...	10,347,968,000
Over the budget estimates for 1998 .....	644,604,000

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## SUMMARY OF BUDGET ESTIMATES AND COMMITTEE RECOMMENDATIONS

For fiscal year 1998, the Committee recommends total budget authority of \$269,050,387,000 for the Department of Labor, Health and Human Services, and Education, and Related Agencies. Of this amount, which includes subsequent year advances, \$79,702,000,000 is current year discretionary funding.

### ALLOCATION CEILING

Consistent with Congressional Budget Office scorekeeping, the recommendations result in full use of the \$79,457,000 in general purpose discretionary budget authority pursuant to section 602(b) of the Congressional Budget Act of 1974, as amended. In addition, the recommendations include \$245,000,000 in budget authority for the Social Security Administration to conduct continuing disability reviews provided consistent with Public Law 104–124 and Public Law 104–193.

### HIGHLIGHTS OF THE BILL

*Drug abuse.*—A total of \$2,698,786,000 is included for drug abuse prevention treatment, and research activities, including \$555,978,000 for safe and drug free schools and communities.

*Crime activities.*—The bill recommends \$144,000,000 for violent crime reduction activities, more than double the 1997 enacted level; included is \$76,800,000 for battered women's shelters.

*Juvenile justice.*—The Committee bill includes \$50,000,000 for new programs to assist communities in preventing juvenile crime. Funds include \$25,000,000 for youth offender demonstration training grants, \$15,000,000 for youth offender education grants, and \$10,000,000 for at-risk youth substance abuse prevention grants.

*Pell grants.*—The Committee bill includes \$6,910,334,000 for the Federal Pell Grant Program. The amount provided will allow the increase in the maximum Pell grant to be raised to \$3,000, an increase of \$300 over the 1997 amount.

*Education for individuals with disabilities.*—The Committee bill provides \$4,958,073,000 to ensure that all children have access to a free appropriate education and that all infants and toddlers with disabilities have access to early intervention services.

*Rehabilitation services.*—The Committee bill provides \$2,591,286,000 for rehabilitation programs, an increase of \$81,858,000 above the amount provided in 1997. These funds are essential for individuals with disabilities seeking employment.

*Family planning.*—The Committee bill recommends \$208,452,000, for the family planning program, an increase of \$10,000,000 over last years appropriation. These funds support primary health care services at over 4,000 clinics nationwide.

*National Institutes of Health.*—The Committee bill includes \$13,692,844,000 for the National Institutes of Health, an increase of \$952,001,000 above the amount provided in 1997.

*Grants for disadvantaged children.*—The Committee bill provides \$7,295,732,000 for grants to disadvantaged children, \$500,000 more than the 1997 level.

*Services for older Americans.*—The Committee recommendation includes \$1,466,314,000 for programs authorized under the Older Americans Act, including \$478,780,000 for nutrition services and \$453,000,000 for employment programs.

*Head Start.*—The Committee recommendation of \$4,305,000,000 for the Head Start Program represents an increase of \$324,454,000 over the 1997 enacted level.

*Womens health.*—The Committee bill provides \$18,500,000 for programs focused on prevention and education and the advancement of women's health initiatives.

*Breast cancer screening.*—The Committee bill provides \$141,897,000, an increase of \$2,238,000 over the 1997 level.

*AIDS.*—The Committee bill provides \$3,264,000,000 for AIDS research prevention and services. The bill also includes \$1,077,252,000 for Ryan White programs, an increase of \$81,000, and \$646,790,000 for AIDS prevention programs at the Centers for Disease Control and Prevention.

*Rape prevention.*—The bill provides \$45,000,000 for rape prevention programs at the Centers for Disease Control and Prevention, an increase of \$10,000,000 over 1997.

*Low-income home energy assistance.*—The Committee recommendation includes \$1,000,000,000 for heating and cooling assistance for this coming year. The Committee has also recommended \$1,200,000,000 for the fiscal year 1999 advance appropriation. Also included is bill language permitting up to \$300,000,000 in additional funding to meet emergencies.

*Community services block grant.*—The Committee bill includes \$492,600,000 for the community services block grant program.

*Child care and development block grant.*—The Committee recommendation provides \$963,120,000 for child care services, compared to \$953,762,000 in the 1997 appropriation. This is in addition to the \$2,075,000,000 appropriated in recently enacted welfare reform legislation for child care.

*Infectious disease.*—The Committee bill recommends \$112,428,000 within the Centers for Disease Control and Prevention to combat the growing threat of infectious disease. The amount recommended is an increase of \$24,708,000 over the fiscal year 1997 amount.

*Older Americans.*—For programs serving older Americans, the Senate recommendation includes a 9-percent increase totaling \$3,500,000,000, an increase of \$250,000,000 over the President's request and \$290,000,000 over the fiscal year 1997 level. Within this amount, \$1,500,000,000 is for programs authorized under the Older Americans Act, including \$453,000,000 for Community Service Employment for Older Americans, \$305,000,000 for supportive services and centers, and \$479,000,000 for senior nutrition programs. Another \$1,200,000,000 is for the 1998–99 winter advance appropriation for the Low Income Home Energy Assistance Program which

assists a high proportion of the low-income elderly with winter heating bills. An additional \$300,000,000 is set aside in an emergency fund, for use in weather emergencies. For the medical research activities of the National Institute on Aging, the recommendation includes \$520,000,000, an increase of 7.1 percent. In addition, funding also is included to continue geriatric education centers, the Medicare insurance counseling program, and the Alzheimer's demonstration grants program.

*Social Security Administration.*—The Committee bill recommends \$6,417,708,000, an increase of nearly \$11,131,000 over the 1997 level, which expands both the automation and disability initiatives at the Social Security Administration.

*Job Corps.*—The Committee bill provides \$1,246,217,000 for the Job Corps, an increase of \$92,708,000 over the 1997 level.

*School-to-work.*—The bill includes \$400,000,000 for school-to-work programs, an increase of \$27,000 over the 1997 level; funding is equally divided between the Departments of Labor and Education for this jointly administered program.

#### REPROGRAMMING AND INITIATION OF NEW PROGRAMS

Reprogramming is the utilization of funds for purposes other than those contemplated at the time of appropriation enactment. Reprogramming actions do not represent requests for additional funds from the Congress, rather, the reapplication of resources already available.

The Committee has a particular interest in approving reprogrammings which, although they may not change either the total amount available in an account or, any of the purposes for which the appropriation is legally available, represent a significant departure from budget plans presented to the Committee in an agency's budget justification.

Consequently, the Committee directs that the Departments and agencies funded through this bill make a written request to the chairman of the Committee prior to reprogramming of funds in excess of 10 percent, or \$250,000, whichever is less, between programs, activities, or elements. The Committee desires to have the requests for reprogramming actions which involve less than the above-mentioned amounts if such actions would have the effect of changing an agency's funding requirements in future years, if programs or projects specifically cited in the Committee's reports are affected or if the action can be considered to be the initiation of a new program.

The Committee directs that it be notified regarding reorganization of offices, programs, or activities prior to the planned implementation of such reorganizations.

The Committee further directs that each agency under its jurisdiction submit to the Committee statements on the effect of this appropriation act within 60 days of final enactment of this act.

#### TRANSFER AUTHORITY

The Committee has included bill language permitting transfers up to 1 percent between discretionary appropriations accounts, as long as no such appropriation is increased by more than 3 percent by such transfer; however, the Appropriations Committees of both

Houses of Congress must be notified at least 15 days in advance of any transfer. Similar bill language was carried in last year's bill for the Department of Labor, and has been included in both House and Senate versions of this year's Labor-HHS-Education bill for all three Departments.

Prior Committee notification is also required for actions requiring the use of general transfer authority unless otherwise provided for in this act. Such transfers specifically include taps, or other assessments made between agencies, or between offices within agencies. Funds have been appropriated for each office funded by this Committee; it is not the intention of this Committee to augment those funding levels through the use of special assessments. This directive does not apply to working capital funds or other fee-for-service activities.

#### GOVERNMENT PERFORMANCE AND RESULTS ACT

The Government Performance and Results Act of 1993, commonly called GPRA, was enacted to improve management of Federal agencies by requiring an emphasis on planning and results. According to the requirements of GPRA, draft strategic plans must be submitted to the Office of Management and Budget by August 15, 1997, and final strategic plans are to be presented to Congress by September 30, 1997. As the strategic plans are developed, agencies are required to consult with Congress and other stakeholders on their draft strategic plans and incorporate suggestions or concerns in the plan submitted to OMB.

The Committee is encouraged that Federal agencies are making an effort to fulfill the requirements of GPRA. The agencies within the jurisdiction of the Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies have been in consultation with the subcommittee on their draft plans, and we encourage that process to continue. The subcommittee is fully committed to support these agencies as they seek to implement the requirements of GPRA. The resulting strategic plans and the goals outlined therein, should serve as important tools in the review of future funding requests.

TITLE I—DEPARTMENT OF LABOR  
 EMPLOYMENT AND TRAINING ADMINISTRATION  
 TRAINING AND EMPLOYMENT SERVICES

Appropriations, 1997 .....	\$4,715,903,000
Budget estimate, 1998 .....	5,295,318,000
Committee recommendation .....	5,260,053,000

The Committee recommends \$5,260,053,000 for this account which provides authorized primarily by the Job Training Partnership Act [JTPA]. This is \$544,150,000 more than the 1997 level.

Training and employment services is comprised of programs designed to enhance the employment and earnings of economically disadvantaged and dislocated workers, operated through a decentralized system of skill training and related services. As required by the Job Training Partnership Act, this appropriation is forward-funded on a July to June cycle. Funds provided for fiscal year 1998 will support the program from July 1, 1998 through June 30, 1999.

*Adult training—title II-A.*—For the Adult Training Program under title II-A of the JTPA, the Committee recommends \$955,000,000. This is \$60,000 more than the 1997 comparable level. The Adult Training Program is designed to prepare economically disadvantaged adults for participation in the labor force by increasing their occupational and educational skills, resulting in improved long-term employability, increased employment and earnings, and reduced welfare dependency. It is operated at the local level through service delivery areas designated by the Governor. Each area has a private industry council to provide guidance and oversight with respect to activities under that area's job training plan, in partnership with the unit or units of general local government in the areas. The private industry council includes representatives of the private sector, educational agencies, organized labor, and other groups in the area. All funds are allocated to the States by statutory formula.

To promote greater flexibility in local decisionmaking, the Committee has once again included bill language that allows service delivery areas to transfer funds provided between the title II-A Adult Training Program and title III Dislocated Worker Assistance Program, if such transfer is approved by the Governor. The Committee is aware of concerns that work participation requirements under welfare reform could foster such transfers to the detriment of services available to dislocated workers. The Committee is also aware of concerns that national reserve account funds may be used to provide services that could have been provided with funds that had been transferred from title III to II-A. Because of these concerns, the Committee has chosen to limit the transfer authority to 20 per-

cent and will closely monitor its implementation to determine whether further transfer authority is warranted in fiscal year 1999.

*Youth training—title II-C.*—For the Youth Training Program under title II-C of the act, the Committee recommends \$129,965,000. This is the same as the budget request and \$3,293,000 over the 1997 comparable level. The title II-C Youth Training Program is designed for youth to improve their long-term employability, enhance their educational, occupational, and citizenship skills, encourage their school completion, increase their employment and earnings, and reduce welfare dependency. Like adult training, the program is administered by local service delivery areas, as directed by private industry councils.

*Summer youth employment and training—title II-B.*—For the Summer Youth Program under title II-B of the act, the Committee recommends \$871,000,000. This is the same as the budget request and the 1997 comparable level. The Summer Youth Program offers work experience, supportive services, and academic enrichment to economically disadvantaged youth, aged 14 to 21. Participants receive the minimum wage. Funds are allocated to the States by formula based on relative numbers of unemployed and economically disadvantaged individuals.

To promote greater flexibility in local decisionmaking, the Committee has included bill language that allows service delivery areas to transfer funds between the title II-C year-round youth program and the title II-B summer program, if such transfer is approved by the Governor.

*Dislocated worker assistance.*—The Committee recommends \$1,350,510,000 for dislocated worker programs. This is the same as the budget request and \$64,310,000 over the 1997 comparable level. The title III system provides for early identification of dislocated workers, the rapid provision of services to such workers, and quality training. Among the program's components are universal rapid response capabilities, early intervention activities, the availability of needs-related payments to assist workers in training, and substate delivery systems. Funds are allocated to the States by statutory formula; 20 percent is retained by the Secretary for discretionary purposes.

The Committee is aware of the severe dislocation brought on by the closure of one of the three sugarcane plantations on the Hawaiian island of Kauai, and the likely closure of a second plantation. To provide assistance to this rural community, the Committee encourages the Secretary to support from discretionary funds, a proposal from the Kauai Cooperative Extension Service to use community-based expertise to provide agricultural and business training to dislocated sugarcane workers.

The Committee includes language in the bill which continues flexibility in three areas. First, the language removes the cost limitations that States utilize not more than 25 percent of funds on needs-related payments and supportive services. It does not remove the 15-percent administrative cost limit. Second, the language modifies the State waiver authority which permits the Governor to reduce to 30 percent the requirement that not less than 50 percent of the funds be used for retraining services. This language will enable local areas to determine the appropriate share of resources for

upfront, cost-effective readjustment services that can facilitate rapid reemployment. Third, the language allows funds awarded under the National Discretionary Grant Program to be used to provide needs-related payments to participants who, in lieu of meeting the general EDWAA requirement that they be enrolled in training by the 13th week after layoff, have enrolled in training by the 6th week after the grant is awarded. This provision adds appropriate flexibility while preserving the principle that retraining is most effective if individuals are enrolled in training early in the adjustment process. These provisions are effective for 1 year only.

The Dislocated Workers Program is invaluable in assisting civilian and military personnel dislocated by post-cold-war military downsizing. Amendments to the JTPA authorize the use of title III moneys to continue to provide assistance to Americans displaced as a result of the country's changing military needs. The Committee urges the Department to continue to work with the Department of Defense and with States to develop appropriate plans for assisting workers being dislocated as a result of base closures.

The Committee has also included \$1,000,000 to provide for a manufacturing technology training demonstration project in Mississippi which will educate technically competent new entrants into the work force and retrain the existing work force to adapt to technological innovation. The project is intended to improve the skills of the east Mississippi region's workers and build a technically competent work force better prepared to compete in the global economy.

The Committee is concerned that the Department may not be taking advantage of cost-effective services for job search assistance offered by the private outplacement sector. The Committee urges the Department to continue to seek permanent cooperative relationships with private outplacement firms and to fully utilize the private, for-profit sector in service to workers through the title II program. The Committee continues to be concerned that public funding of outplacement and job search assistance is displacing traditional funding sources from the private sector and that the public work force system is duplicating resources and capabilities that already exist in the private sector. The Department is strongly urged to continue a series of workshops and related activities between the public work force system and private outplacement firms in 25 major labor market areas to achieve full participation for private outplacement firms in the delivery of job search services through the title III program. In addition to tracking the amount of funds spent for services, including job search assistance, the Department should assess the availability of service providers in local labor market areas in order to identify the potential for outsourcing services where cost savings and improved services can be achieved.

*Native Americans.*—For native American programs, the bill provides \$55,127,000. This is \$2,625,000 above the budget request and the same as the 1997 comparable level. These programs are designed to improve the economic well-being of disadvantaged native Americans through vocational training, work experience, and other services aimed at getting participants into permanent unsubsidized jobs.

*Migrant and seasonal farmworkers.*—For migrant and seasonal farmworker programs, the bill provides \$72,749,000. This is \$3,464,000 above the budget request and the same as the 1997 comparable level. This program is aimed at alleviating chronic unemployment and underemployment being experienced by farmworker families. Training and employability development services prepare farmworkers for stable, year-round employment, both in and outside the agricultural industry. Supportive services such as transportation, housing, health care, and day care are also provided.

The Committee believes that the Association of Farmworker Opportunity Programs [AFOP] provides valuable assistance to section 402 grantees in the form of technical assistance and training, training resource materials for grantee staff, and the development of a national farmworker data base to track program services of migrants who travel throughout the United States. The Committee has provided sufficient funds to maintain AFOP's support in fiscal year 1998.

The Committee again reminds the Department that applicants for funding under the JTPA section 402 program must demonstrate a prior existing capacity to specifically serve the employment and training needs of migrant and seasonal farmworkers, and further reminds the Department of applicable provisions of the current law that states that the Secretary shall provide services to farmworkers through public agencies and private nonprofit organizations with a previously demonstrated capability to administer effectively a diversified employability development program for migrant and seasonal farmworkers.

The Committee recommends the continuation of the Department of Labor Farmworker Housing Program at no less than the rate in effect in fiscal year 1997.

*Job Corps.*—For the Job Corps, the Committee recommends \$1,246,217,000 for program year 1998. This is the same as the budget request and an increase of \$92,708,000 above the 1997 comparable level. The amount in the bill includes \$1,127,726,000 for operations to support 118 centers, including 4 new centers scheduled to open during fiscal year 1997. The amount in the bill also includes \$118,491,000 for facility construction, rehabilitation, and maintenance at existing centers.

The Committee is aware of interest in the establishment of centers in two States without Job Corps campuses, Rhode Island and Delaware. The Committee requests that the Secretary consider including funding in the Department's budget request for fiscal year 1999 to ensure that at-risk youth in these States are being adequately served. The Department is encouraged to explore both low-cost options such as satellite centers, as well as the establishment of new centers.

In order to help single parents enroll and succeed in Job Corps, the Committee urges the Department to pursue linkages and collaborative interagency agreements with the appropriate agencies with the Department of Health and Human Services, including Head Start. Through colocated child care services for Job Corps students and their children on Job Corps campuses, Job Corps can

better serve single parents and agencies, such as Head Start, can reach a greater number of needy children.

The Committee encourages Job Corps to establish effective working relationships with work force development entities, including employers, that will enhance services to students and increase students' career opportunities. The Department is encouraged to intensify its efforts to meet industry standards in its occupational offerings by developing a multiyear process to review, upgrade, and modernize its vocational curricula, equipment, and programs in order to create career opportunities for students in appropriate growth industries. The Committee also encourages the Department of Labor's Employment and Training Administration to encourage Job Corps centers to coordinate with community-based organizations, such as substance abuse treatment centers, in innovative ways.

The Committee also directs the Department to review the process that Job Corps uses to address the facility construction and rehabilitation requirements of its centers. The Department should investigate options, such as design-build, that can meet Job Corps center facility construction and rehabilitation needs in the most cost-effective, expeditious manner.

*Veterans employment.*—The Committee recommends \$7,300,000 for special veterans employment programs. This is the same as the budget request and the 1997 comparable level. These funds provide special employment and training programs designed to meet the unique needs of disabled, Vietnam-era, and recently separated veterans.

*School-to-work.*—The Committee recommends \$200,000,000 for school-to-work. This is the same as the budget request and the same as the 1997 comparable level. The school-to-work program is intended to provide a national framework within which all States can create statewide systems to help youth acquire the knowledge, skills, abilities, and labor market information they need to make an effective transition from school-to-work, or to further education or training. It is jointly administered by the Departments of Labor and Education.

The Committee is aware of school-to-work initiatives that expose students to career opportunities in the retail industries, while strengthening the behaviors and academic accomplishments of participating students through the integration of business and educational needs. The Committee supports ongoing efforts of the School-to-Work Office to competitively fund proposals to enhance linkages with employer associations that have developed model school-to-work programs. The Committee has included funds so that consideration can be given to the multi-State implementation of models such as the New Mexico Retail Association's Program, youth opportunities in retailing.

*National activities.*—For national activities \$369,685,000 is provided. This is \$67,636,000 more than the budget request and \$315,250,000 above the 1997 comparable level. The bill includes funding for research and evaluation, \$8,196,000; pilots and demonstrations, \$83,000,000; labor market information, \$5,489,000; the National Occupational Information Coordinating Committee,

\$8,000,000; skill standards, \$9,000,000; women in apprenticeship, \$3,000,000; and homeless veterans, \$2,500,000.

For homeless veterans, \$2,500,000, is provided for the homeless veterans reintegration project, to be administered by the Assistant Secretary for Veterans Employment and Training Services. The Stewart B. McKinney Homeless Assistance Act authorization for this program was extended by the Veterans Benefits Improvement Act of 1996. It is anticipated that these funds will be awarded through a competitive grant process.

The amount of \$8,000,000 is provided to cover basic NOICC and SOICC activities including the development and delivery of occupational and career information to students, job seekers, employers, education and employment, and training programs (especially one-stop centers), school-to-work transition systems, military transition and staffing initiatives, and welfare to work efforts. At least 75 percent of this amount will pass through to State SOICC's. Of the total, \$2,000,000 will support continuation of national and State career development and related capacity building programs which train personnel in assisting students and adults to understand themselves in the context of their career development and career transition, to be aware of the world of work, to understand the linkage between academic skills and work-related skills, to understand the linkages among related occupations and their skill requirements, and to make more informed, effective career decisions. In addition, the Committee included language which allows NOICC to charge fees for publications, training and technical assistance.

Under pilots and demonstrations, the Committee has provided \$3,000,000 for the Samoan/Asian Pacific Island job training program in the State of Hawaii.

In light of rapid growth in the plastics manufacturing and special tooling industries, the Vermont Department of Employment and Training is developing a skills training center to ensure that job training programs are able to meet these industries' demand for highly skilled workers. Under pilots and demonstrations, the Committee has provided \$200,000 to aid in the development of a high skills training consortia and a pilot project to begin training in the targeted areas.

The Committee has included \$250,000,000 in advance appropriations for fiscal year 1999 funds for youth opportunity area projects, which is contingent upon passage of job training reform legislation that includes authority for these or similar at-risk youth projects by April 1, 1998.

However, recognizing the severe problems facing out-of-school youth in communities with high poverty and unemployment and the interrelatedness of poverty, juvenile crime, child abuse and neglect, school failure, and teen pregnancy, the Committee has provided a \$50,000,000 increase in pilots in demonstrations, which consists of two components: \$25,000,000 in fiscal year 1998 funds for the youth opportunity area pilot to expand the current six site pilot projects; and \$25,000,000 for concentrated programs serving youth who are or have been under criminal justice system supervision.

Because of the concentration of youth offenders and youth gangs in high-poverty areas and the importance of linking youth crime

prevention programs to community-wide youth development programs, current Labor Department grantees involved in community-wide demonstrations should be encouraged to compete for the youth offender grants being supported here. High-poverty communities tend to have high rates of illegal drug use and trafficking, much youth gang activity, and high school dropouts have particularly high rates of incarceration. Under this competition, local communities will be encouraged to test approaches that strengthen the coordination of prevention and recovery services for juveniles and exhibit a high degree of resource integration and result in reduced youth gang and juvenile criminal activity. Among the programs that communities will be encouraged to link are Job Training Partnership Act year-round youth training and summer jobs for at-risk youth, youth fair chance, the new opportunity areas for out-of-school youth, School-to-Work Program, and other Federal programs that could contribute to juvenile crime prevention such as vocational-technical education, and YouthBuild.

The youth opportunity areas pilot is critical to provide venture capital to high poverty urban neighborhoods and rural areas to help them increase employment among out-of-school young people to a level of 80 percent as an alternative to welfare and crime. It provides an important jobs and skill development component to the economic development activities of empowerment zone and enterprise communities, and administers funds through the same local work force development system that will be used to administer other Federal job training and employment resources. The current youth opportunity pilot sites were funded in both fiscal year 1996 and fiscal year 1997 and are testing key features of the approach. These projects leverage other resources within the community to eventually sustain these services directed to out-of-school youth.

The Committee's recommended expansion of the pilot will provide additional communities with the opportunity to improve the employment prospects of out-of-school youth.

The Committee is aware of efforts of Lehigh University's Iacocca Institute, in conjunction with the National Coalition for Advanced Technology Centers, to create work force development education curricula specifically focused on the Nation's manufacturing sector. The Committee believes that the Department needs to undertake more aggressive efforts to foster initiatives between centers of excellence and U.S. manufacturers to promote work force training so as to bolster worker productivity, and in turn, help improve U.S. global competitiveness and lower the Nation's manufactured goods trade deficit. Therefore, the Committee encourages the Department to expedite consideration of the Iacocca Institute's request for funds from the fiscal year 1997 appropriations. Further, the Committee encourages full and fair consideration of a proposal from this organization for use in continuing its work force development pilot project for a second year.

The Committee is aware of the efforts of the Eisenhower Foundation in replicating the south Bronx Argus community education, job training, job placement, and job retention program. The Committee is aware that the Foundation proposes to expand the replications of Argus to employ welfare recipients in high-tech industries, such as installation and repair of telephones, computers, and television.

The Committee urges full and fair consideration of a proposal from this organization.

The Committee recommends continued funding for a special native Hawaiian vocational education demonstration initiative that provides basic education skills and preemployment tutoring for high-risk youth residing in rural communities, with an emphasis on vocations that benefit these communities, such as child care workers and teachers.

The Committee has recognized in the past that, due to the geographical isolation associated with rural communities in the State of Alaska and on the Hawaiian Island of Lanai, disadvantaged populations residing in these areas generally lack access to skill training programs, education opportunities, and other self-development initiatives. The Committee also recognizes that limited access to human development services has contributed to the increase in negative health and social indicators, such as high rates of poverty, unemployment, school dropouts, teen pregnancy, substance abuse, and mental illness.

Expanding on the direction proscribed in previous years, the Committee urges that \$5,000,000 be provided in Job Training Partnership Act [JTPA] pilot and demonstration funds to support training, education, employment, and entrepreneurial opportunities to improve the economic and social health and welfare for adults on the neighbor islands of Hawaii, and in Alaska. The Committee urges that community colleges be the focal point of these programs. In the case of the neighbor islands of Hawaii, the Committee urges the development of one program per island.

In many rural areas and low-income urban neighborhoods, there is a lack of employment opportunities. So, low-income people often must travel long distances to get to centers of employment and lack of transportation is often a major obstacle. For fiscal year 1998, the Committee urges continued funding for the JOBLINKS demonstration. This demonstration program assists local communities in coordinating training and employment, social services and transportation services to improve job opportunities for individuals moving from welfare to work.

The Committee has again included language to authorize the Secretary of Labor to waive requirements (with limited exceptions) of the Job Training Partnership Act and the Wagner-Peyser Act to facilitate the implementation of State plans for improving work force development systems. This language allows the Secretary to waive requirements of JTPA and Wagner-Peyser that are determined to impede these efforts. In exchange for the greater flexibility provided by such waivers, the language requires that the State execute a memorandum of understanding with the Secretary of Labor identifying the outcomes the State intends to achieve and other measures that will ensure appropriate accountability for the use of Federal funds.

In addition, the Committee has retained language included in the fiscal year 1997 bill for the "Training and employment services" account which authorizes the Secretary to establish a work-flex partnership demonstration program with six States. This language does not authorize an additional six States, but merely continues

the authorization for the six States authorized in the fiscal year 1997 bill.

The Committee understands that the welfare-to-work jobs initiative—which is intended to provide \$750,000,000 in mandatory spending in fiscal year 1998—is currently in conference on the reconciliation bill. If necessary, the Committee intends to provide the authorized funding for this program in the Senate/House conference, and address the issue of increased costs associated with the administration of this initiative, once the reconciliation bill has been enacted.

COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

Appropriations, 1997 .....	\$463,000,000
Budget estimate, 1998 .....	440,200,000
Committee recommendation .....	453,000,000

The Committee recommends \$453,000,000, an increase of \$12,800,000 above the budget request for community service employment for older Americans. The Committee recommends 78 percent of the funds for national sponsors and 22 percent is for State sponsors; this is the same percentage distribution as current law. This program, authorized by title V of the Older Americans Act, provides part-time employment in community service activities for unemployed, low-income persons aged 55 and over. It is forward-funded from July to June, and the 1998 appropriation will support the effort from July 1, 1998, through June 30, 1999. These funds are to be distributed in the same manner as currently authorized under the Older Americans Act, unless this law is subsequently altered. The Committee would expect the administration of this program would remain at the Department of Labor, unless subsequent authorizing legislation is enacted which transfers the program to the Department of Health and Human Services.

The Committee is concerned about the impact of welfare reform on indigent elderly legal immigrants who face the loss of Supplemental Security Income [SSI]. Current law states that title V funds should be targeted to eligible individuals with the greatest economic need. The Committee believes that within the title V community service employment for older Americans, special attention should be paid to providing community service jobs for elderly legal immigrants where possible.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

Appropriations, 1997 .....	\$324,500,000
Budget estimate, 1998 .....	349,000,000
Committee recommendation .....	349,000,000

The Committee recommends \$349,000,000, the same as the budget request and an increase of \$24,500,000 above the 1997 enacted level for Federal unemployment benefits and allowances. These are entitlement funds.

The trade adjustment line item has two activities totaling \$304,700,000 in fiscal year 1998.

The first activity, trade adjustment assistance benefits, provides for special unemployment benefit payments to workers as authorized by the Trade Act of 1974, as amended. For this activity the

Committee recommends \$208,000,000. This is the same as the budget request and an increase of \$17,000,000 above the 1997 comparable level. These funds will permit payment of benefits, averaging \$217 per week, to 35,700 workers for 1998. Of these workers, 26,800 will participate in training programs, receiving benefits for an average of 30 weeks. The remaining 8,900 workers receiving benefits will receive training waivers and collect benefits for an average of 18 weeks.

The second activity, trade adjustment assistance training, provides training, job search, and job relocation allowances to workers adversely affected by imports. The funding for this activity is also authorized under the Trade Act of 1974, as amended. The Committee recommends \$96,700,000 for this activity. This is the same as the budget request and an increase of \$11,800,000 over the 1997 comparable level. These funds will provide services for an estimated 30,500 workers.

For NAFTA activities, \$44,300,000 is provided, in two components.

The first component, NAFTA transitional adjustment assistance benefits, provides for weekly benefit payments to workers affected by imports from Mexico and Canada. These payments are also authorized by the Trade Act of 1974, as amended as a result of the signing of the North American Free Trade Agreement [NAFTA]. The Committee recommends \$22,000,000 for this activity. This is the same as the budget request and an increase of \$2,000,000 over the 1997 comparable level. These funds will provide 3,300 eligible workers an average of 30 weeks of benefits each, at an average weekly amount of \$216.

The second component, NAFTA transitional adjustment assistance training, provides funds for training, job search and job relocation to workers affected by imports from Mexico and Canada. The funding for this activity is also authorized by the amendment to the Trade Act of 1974 resulting from the signing of the NAFTA. The Committee recommends \$22,300,000 for this activity. This is the same as the budget request and a reduction of \$6,100,000 below the 1997 comparable level. These funds will provide training for an estimated 5,100 workers.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE  
OPERATIONS

Appropriations, 1997 .....	\$3,315,928,000
Budget estimate, 1998 .....	3,604,928,000
Committee recommendation .....	3,465,928,000

The Committee recommends \$3,465,928,000 for this account. This is \$139,000,000 below the budget request and an increase of \$150,000,000 over the 1997 comparable level. Included in the total availability is \$3,292,476,000 authorized to be drawn from the "Employment Security Administration" account of the unemployment trust fund, and \$173,452,000 to be provided from the general fund of the Treasury.

The funds in this account are used to provide administrative grants and assistance to State agencies which administer Federal and State unemployment compensation laws and operate the public employment service.

Of this amount, \$150,000,000 is included solely for the purpose of assisting States to convert their automated State employment security agency systems to be year 2000 compliant. Failure to convert employment security computer programs, such as benefit and tax systems, will result in disorder and numerous errors causing overpayment of benefits and under-collection of taxes. State agencies will finance the remaining costs of conversion with their own funds.

For unemployment insurance [UI] services, the bill provides \$2,491,458,000. This total includes a regular contingency amount of \$216,333,000 which may be drawn from the "Employment Security Administration" account of the unemployment trust fund. In addition the bill further provides for a second contingency amount should the unemployment workload exceed an average weekly insured claims volume of 2,789,000. This second contingency amount would fund the administrative costs of unemployment insurance workload over the level of 2,789,000 insured unemployed per week at a rate of \$28,600,000 per 100,000 insured unemployed, with a pro rata amount granted for amounts of less than 100,000 insured unemployed.

The unemployment insurance service recommendation provides an increase of \$150,000,000 over the fiscal year 1997 level. The allowance includes \$2,115,125,000 for State operations, a decrease of \$89,000,000 and the same as the 1997 comparable level. In addition, the allowance includes \$10,000,000 for the national activities, the same as the budget request and 1997 comparable level.

For the employment service, the Committee recommends \$824,470,000 which includes \$23,452,000 in general funds together with an authorization to spend \$801,018,000 from the "Employment security administration" account of the unemployment trust fund. These amounts are the same as the budget request and the 1997 comparable level.

Included in the recommendation for the employment service is \$761,735,000 for State grants, available for the program year of July 1, 1998, through June 30, 1999. This is the same as the budget request and the 1997 comparable level. Also included is \$62,735,000 for national activities, the same as the budget request and the 1997 comparable level. Further, the recommendation includes \$150,000,000 for one-stop career centers, which is the same as the budget request and the 1997 comparable level.

The Committee did not provide the \$89,000,000 increase requested for UI integrity activities.

The Committee agrees that the work opportunity tax credit [WOTC], established by the Small Business Job Protection Act, provides important resources to create new jobs, particularly for those Americans who would otherwise be dependent on welfare. Therefore, the Committee recommendation includes \$20,000,000 for this initiative, the same as the request and fiscal 1997 enacted level.

The Committee recommendation for employment service national activities, excluding the work opportunity tax credit program, is \$42,735,000, the same as the request and the fiscal 1997 enacted level.

ADVANCES TO THE UNEMPLOYMENT TRUST FUND AND OTHER FUNDS

Appropriations, 1997 .....	\$373,000,000
Budget estimate, 1998 .....	392,000,000
Committee recommendation .....	392,000,000

The Committee recommends \$392,000,000 the same as the budget request and an increase of \$19,000,000 over the 1997 comparable level, for this account. The appropriation is available to provide advances to several accounts for purposes authorized under various Federal and State unemployment compensation laws and the black lung disability trust fund, whenever balances in such accounts prove insufficient. The bill anticipates that fiscal year 1998 advances will be made to the black lung disability trust fund.

The separate appropriations provided by the Committee for all other accounts eligible to borrow from this account in fiscal year 1998 are expected to be sufficient. Should the need arise, due to unanticipated changes in the economic situation, laws, or for other legitimate reasons, advances will be made to the needy accounts to the extent funds are available. Funds advanced to the black lung disability trust fund are now repayable with interest to the general fund of the Treasury.

PROGRAM OPERATIONS

Appropriations, 1997 .....	\$124,350,000
Budget estimate, 1998 .....	129,643,000
Committee recommendation .....	125,593,000

The Committee recommendation includes \$84,308,000 in general funds for this account, as well as authority to expend \$41,285,000 from the "Employment Security Administration" account of the unemployment trust fund, for a total of \$125,593,000. This is \$4,050,000 less than the budget request and \$1,243,000 more than the 1997 comparable level.

General funds in this account provide the Federal staff to administer employment and training programs under the Job Training Partnership Act, the Older Americans Act, the Trade Act of 1974, and the National Apprenticeship Act. Trust funds provide for the Federal administration of employment security functions under title III of the Social Security Act and the Immigration and Nationality Act, as amended. Federal staff costs related to the Wagner-Peyser Act in this account are split 97 percent to 3 percent between unemployment trust funds and general revenue, respectively.

PENSION AND WELFARE BENEFITS ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 1997 .....	\$76,840,000
Budget estimate, 1998 .....	84,307,000
Committee recommendation .....	82,000,000

The Committee recommendation provides \$82,000,000 for this account, which is \$2,307,000 less than the budget request, and an increase of \$5,160,000 over the 1997 comparable level.

The Pension and Welfare Benefits Administration [PWBA] is responsible for the enforcement of title I of the Employee Retirement Income Security Act of 1974 [ERISA] in both civil and criminal

areas. PWBA is also responsible for enforcement of sections 8477 and 8478 of the Federal Employees' Retirement Security Act of 1986 [FERSA]. PWBA provides funding for the enforcement and compliance; policy, regulation, and public services; and program oversight activities.

The Committee recommendation includes second year costs in support of the administration's \$9,000,000 2-year request for the development of a new system devoted to processing form 5500 series financial data required under the Employee Retirement Income Security Act. When completed, this project will enable employees to submit annual benefit plan reports electronically, reducing the cost, paperwork burden, and enhancing protection of pension funds. This new system is expected to result in savings of \$57,000,000. The new system will be developed and managed by the Department of Labor. The Committee intends for the Internal Revenue Service and the Department of Labor to continue to share the ongoing operating costs of the system in the same manner as under the current system.

PENSION BENEFIT GUARANTY CORPORATION

The Corporation's estimate for fiscal year 1998 includes benefit payments of \$982,140,000, multiemployer financial assistance of \$5,960,000, administrative expenses limitation of \$10,433,000, and services related to terminations expenses of \$137,376,000.

The Pension Benefit Guaranty Corporation is a wholly owned Government corporation established by the Employee Retirement Income Security Act of 1974. The law places it within the Department of Labor and makes the Secretary of Labor the Chair of its Board of Directors. The Corporation receives its income primarily from insurance premiums collected from covered pension plans, collections of employer liabilities imposed by the act, and investment earnings. It is also authorized to borrow up to \$200,000,000 from the Treasury. The primary purpose of the Corporation is to guarantee the payment of pension plan benefits to participants if covered plans fail or go out of existence.

EMPLOYMENT STANDARDS ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 1997 .....	\$290,384,000
Budget estimate, 1998 .....	314,203,000
Committee recommendation .....	300,653,000

The Committee recommendation includes \$300,653,000 for this account. This is \$13,550,000 less than the budget request and an increase of \$10,269,000 above the 1997 comparable level. The bill contains authority to expend \$993,000 from the special fund established by the Longshore and Harbor Workers' Compensation Act; the remainder are general funds. In addition, an amount of \$26,147,000 is available by transfer from the black lung disability trust fund. This is the same as the request and \$94,000 more than the 1997 comparable level.

## SPECIAL BENEFITS

Appropriations, 1997 .....	\$213,000,000
Budget estimate, 1998 .....	201,000,000
Committee recommendation .....	201,000,000

The Committee recommends continuation of appropriation language to provide authority to require disclosure of Social Security account numbers by individuals filing claims under the Federal Employees' Compensation Act or the Longshore and Harbor Workers' Compensation Act and its extensions.

The bill includes \$201,000,000, the same as the budget request and a decrease of \$12,000,000 below the 1997 comparable level. This appropriation primarily provides benefits under the Federal Employees' Compensation Act [FECA]. The payments are prescribed by law.

The total amount to be available in fiscal year 1998, including anticipated reimbursements from Federal agencies of \$1,857,000,000 is \$1,991,000,000, a decrease of \$4,000,000 below the 1997 comparable level.

The Committee recommends continuation of appropriation language that provides authority to use the FECA fund to reimburse a new employer for a portion of the salary of a newly reemployed injured Federal worker. The FECA funds will be used to reimburse new employers during the first 3 years of employment not to exceed 75 percent of salary in the worker's first year, declining thereafter. Costs will be charged to the FECA fund.

The Committee again includes appropriation language that retains the drawdown date of August 15. The drawdown authority enables the agency to meet any immediate shortage of funds without requesting supplemental appropriations. The August 15 drawdown date allows maximum flexibility for continuation of benefit payments without interruption.

The Committee recommends continuation of appropriation language to provide authority to deposit into the special benefits account of the employees' compensation fund those funds that the Postal Service, the Tennessee Valley Authority, and other entities are required to pay to cover their fair share of the costs of administering the claims filed by their employees under FECA. The Committee recommends appropriation language to provide that \$7,269,000 of the funds transferred from the fair share agencies to pay the costs of administration will be available to the Secretary of Labor to finance capital improvements relating to upgrading and enhancing the Federal employees' compensation computer system's hardware and software.

The Employment Standards Administration is involved in the administration of numerous laws, including the Fair Labor Standards Act, the Immigration and Nationality Act, the Migrant and Seasonal Agricultural Workers' Protection Act, the Davis-Bacon Act, the Family and Medical Leave Act, the Federal Employees' Compensation Act [FECA], the Longshore and Harbor Workers' Compensation Act, and the Federal Mine Safety and Health Act (black lung).

## BLACK LUNG DISABILITY TRUST FUND

Appropriations, 1997 .....	\$1,007,982,000
Budget estimate, 1998 .....	1,007,000,000
Committee recommendation .....	1,007,000,000

The bill includes authority to obligate \$1,007,000,000 from the black lung disability trust fund in fiscal year 1998. This is an decrease of \$982,000 below the 1997 comparable level.

The total amount available for fiscal year 1998 will provide \$466,650,000 for benefit payments, and \$45,698,000 and \$356,000 for administrative expenses for the Departments of Labor and Treasury, respectively. Also included is \$494,000,000 for interest payments on advances. In fiscal year 1997, comparable obligations for benefit payments are estimated to be \$496,665,000 while administrative expenses for the Departments of Labor and Treasury, respectively, are \$45,674,000 and \$356,000.

The Committee reiterates its directive to prevent the closing of and to ensure the staffing of black lung field offices.

The trust fund pays all black lung compensation/medical and survivor benefit expenses when no responsible mine operation can be assigned liability for such benefits, or when coal mine employment ceased prior to 1970, as well as all administrative costs which are incurred in administering the benefits program and operating the trust fund.

It is estimated that 73,500 people will be receiving black lung benefits financed from the trust fund by the end of fiscal year 1998. This compares with an estimated 77,000 receiving benefits in fiscal year 1997.

The basic financing for the trust fund comes from a coal excise tax for underground and surface-mined coal. Additional funds come from reimbursement payments from mine operators for benefit payments made by the trust fund before the mine operator is found liable, and advances. The advances to the fund assure availability of necessary funds when liabilities may exceed other income. The Omnibus Budget Reconciliation Act of 1987 continues the current tax structure until 2014.

## OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

## SALARIES AND EXPENSES

Appropriations, 1997 .....	\$324,955,000
Budget estimate, 1998 .....	347,805,000
Committee recommendation .....	336,205,000

The Committee recommendation includes \$336,205,000 for this account. This is \$11,600,000 less than the budget request and an increase of \$11,250,000 above the 1997 comparable level. This agency is responsible for enforcing the Occupational Safety and Health Act of 1970 in the Nation's workplaces.

In addition, the Committee has included language to allow OSHA to retain up to \$750,000 per fiscal year of training institute course tuition fees to be utilized for occupational safety and health training and education grants in the private sector.

The Committee retains language carried in last year's bill effectively exempting farms employing 10 or fewer people from the pro-

visions of the act except those farms having a temporary labor camp. The Committee also retains language exempting small firms in industry classifications having a lost workday injury rate less than the national average from general schedule safety inspections. These provisions have been in the bill for many years.

The Committee is very pleased with OSHA's efforts in placing high priority on the voluntary protection programs [VPP] and other voluntary cooperative programs. The agency's work in reducing the VPP application backlog and its commitment to eliminate this backlog is particularly noteworthy. The Committee expects OSHA to continue to place high priority on the VPP, assuring prompt review and processing of VPP applications from interested employers and employees. Cooperative voluntary programs, especially the VPP, are an important part of OSHA's ability to assure worker safety and health and should be administered in conjunction with an effective strong enforcement program.

In addition, the Committee is aware of two serious problems which OSHA needs to address in the areas of lead abatement and asbestos abatement that can lead to worker and community contamination: (1) There is a lack of emphasis on the use of reusable work clothes as the best alternative for protecting workers engaged in this type of work, especially in abrasive blasting, and (2) where reusable work clothes are utilized, there is a lack of adequate safeguards to assure that such clothes are laundered only in facilities operated in conformance with standards for such laundering, potentially endangering workers engaged in such laundering.

The Committee also intends that the Office of Regulatory Analysis continue to be funded as nearly as possible at its present level.

The Committee is aware that small employers in the furniture stripping and foam manufacturing and fabrication industries are concerned about the cost of complying with the provisions of OSHA's methylene chloride standard. The Committee believes that assuring the availability of OSHA compliance assistance to these employers will assist the employers' ability to meet the standard's requirements with methods that are well suited to their particular workplaces and capable of affording employers in these establishments the same level of protection that the standards deem necessary for safety and health and that larger employers are better able to provide.

Therefore, the Committee directs OSHA not to enforce the methylene chloride regulations unless: (1) the agency makes available to employers with fewer than 150 employees in the furniture stripping and foam manufacture or fabricating industries an onsite consultation program that will give the establishments in these industries highest priority for receiving consultative services; (2) any establishment that receives a consultation visit and is found to be out of compliance with the requirements of the standard due to infeasibility will receive additional compliance assistance but will not be referred for inspection; and (3) establishments in these industries that receive an OSHA enforcement inspection and are found to be out of compliance with the exposure limit requirements of the methylene chloride standard because compliance is economically or technologically infeasible will not be cited for violation of that requirement, but instead OSHA will work with the employer to seek

and employ alternative means of abatement. The Committee believes that these actions will adequately address the concerns of small business while ensuring workplace safety and health.

The Committee has included language in the bill prohibiting the Occupational Safety and Health Administration from promulgating a proposed or final standard on ergonomics during fiscal year 1998 and prohibiting enforcement activity under the general duty clause of the Occupational Safety and Health Act which would be based on the issuance by OSHA of any voluntary guidelines with respect to ergonomics.

MINE SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 1997 .....	\$197,187,000
Budget estimate, 1998 .....	205,804,000
Committee recommendation .....	205,804,000

The Committee recommendation includes \$205,804,000 for this account. This is the same as the budget request and \$8,617,000 more than the 1997 comparable level. This agency is responsible for enforcing the Federal Mine Safety and Health Act in our Nation's underground and surface mines.

This agency insures the safety and health of the Nation's miners by conducting inspections and special investigations of mine operations, promulgating mandatory safety and health standards, cooperating with the States in developing effective State programs, and improving training in conjunction with States and the mining industry.

The Committee is satisfied with MSHA's justification of the consolidation of its technical support functions, and the General Accounting Office's [GAO] review of that decision. Specifically, the GAO concluded that: "The revision to MSHA's relocation plan that maintains gas analysis equipment and staff in Denver adequately addresses the concern about MSHA's ability to protect the safety and health of miners in the West by responding to time-critical events promptly." GAO's report also states that: "\* \* \* we have little or no basis to believe that the revised relocation plan will have a significant adverse effect on MSHA's ability to protect the health and safety of western miners." Consequently, the Committee sees no reason for any further study or delay, and expects the Department of Labor to adhere to its consolidation schedule, which anticipates that consolidation will be complete by September 30, 1997.

The Committee retains bill language prohibiting the use of funds to carry out the training provisions of the act with respect to shell dredging or with respect to any sand, gravel, surface stone, surface clay, colloidal phosphate, or surface limestone mine.

BUREAU OF LABOR STATISTICS

SALARIES AND EXPENSES

Appropriations, 1997 .....	\$360,822,000
Budget estimate, 1998 .....	379,457,000
Committee recommendation .....	372,671,000

The Committee includes \$372,671,000 for this account, which is \$6,786,000 less than the budget request and \$11,849,000 more than the 1997 comparable level. This includes \$52,574,000 from the “Employment Security Administration” account of the unemployment trust fund, and \$320,097,000 in Federal funds. The Bureau of Labor Statistics is the principal fact finding agency in the Federal Government in the broad field of labor economics.

The Committee has included \$15,430,000 for the Consumer Price Index revision; this effort should remain the highest priority for the Bureau.

DEPARTMENTAL MANAGEMENT

SALARIES AND EXPENSES

Appropriations, 1997 .....	\$145,119,000
Budget estimate, 1998 .....	152,678,000
Committee recommendation .....	152,413,000

The Committee recommendation includes \$152,413,000 for this account, which is \$265,000 less than the budget request and \$7,294,000 above the 1997 comparable level. This consists of \$152,131,000 in general funds and authority to transfer \$282,000 from the “Employment Security Administration” account of the unemployment trust fund. In addition, an amount of \$19,551,000 is available by transfer from the black lung disability trust fund. This is the same as the budget request.

The primary goal of the Department of Labor is to protect and promote the interests of American workers. The departmental management appropriation finances staff responsible for formulating and overseeing the implementation of departmental policy and management activities in support of that goal. In addition, this appropriation includes a variety of operating programs and activities that are not involved in departmental management functions, but for which other salaries and expenses appropriations are not suitable.

The Committee intends that the Women’s Bureau maintain support at the fiscal year 1997 level for technical assistance and training on displaced homemaker programming through effective programs such as the Women Work Program. This assistance is critical as State and local agencies develop and implement new models for work force development and welfare reform. The Committee has not agreed to the requested reduction in the Women’s Bureau budget, instead recommending the fiscal year 1997 level of \$7,743,000.

The Committee has expressed its concern in recent years about the exploitation of child labor around the world. The Committee’s concern has been mirrored in a number of other international initiatives, and as a result, the fight to reduce child exploitation has been placed onto the global agenda. In a report released in 1996, the International Labor Organization estimates the total number of child workers between the ages of 5 and 14 to be 250 million worldwide—some 120 million working full time.

The Committee notes the positive work being done by the ILO’s International Programme for the Elimination of Child Labor [IPEC], including funds made available to the Secretary of Labor

by this Committee. The Committee has provided an additional \$1,500,000 from within funds for the Bureau of International Labor Affairs, to continue work on international child labor issues and funding for the IPEC program.

In the Committee's view, it is now appropriate to ask the Bureau of International Labor Affairs to study how the growing international public concern about child exploitation has been translated into specific actions in the countries where child labor has been identified as a significant problem. This review should examine the policies and initiatives by the relevant foreign governments to reduce the exploitation of child labor, and the results of such efforts. The review should include domestic efforts to strengthen law enforcement against the exploitation of children, additional investments in child education, changes in domestic child labor laws, effective partnerships with nongovernmental actors, and the position of such governments on international initiatives to fight the exploitation of child labor. The report should be completed and submitted to the Committee by July 15, 1998.

In addition, the Committee is concerned by the large and growing problem of abusive treatment of workers around the world who produce apparel for export to the United States and the impact of that treatment on companies and workers in the United States. In an effort to obtain more detailed and accurate information, the Committee urges the Department to establish a methodology and format for reporting regularly on the use of sweatshops in the production of apparel for import into the United States. Because the Department's reporting capabilities are currently limited to violations by domestic producers only, the misleading impression that violations of law and substandard conditions in the industry are far more extensive within the United States than elsewhere is given. Development of new reporting methods should help to correct the existing imbalance in the Department's current reporting on this subject.

The Committee retains bill language intended to ensure that decisions on appeals of Longshore and Harborworker Compensation Act claims are reached in a timely manner.

ASSISTANT SECRETARY FOR VETERANS EMPLOYMENT AND TRAINING

Appropriations, 1997 .....	\$181,851,000
Budget estimate, 1998 .....	181,955,000
Committee recommendation .....	181,955,000

The Committee recommendation includes \$181,955,000 to be expended from the "Employment Security Administration" account of the unemployment trust fund. This is the same as the budget request and \$104,000 above the 1997 comparable level.

For State grants the bill provides \$80,040,000 for the Disabled Veterans Outreach Program and \$77,078,000 for the Local Veterans Employment Representative Program.

For Federal administration, the Committee recommends \$22,837,000, an increase of \$104,000 over the fiscal year 1997 level. The Committee supports the concept of the Transition Assistance Program administered jointly with the Department of Defense which assists soon-to-be-discharged service members in transition-

ing into the civilian work force and includes funding to maintain an effective program.

In addition, the Committee recommends \$2,000,000 for the National Veterans Training Institute [NVTI]. This Institute provides training to the Federal and State staff involved in the direct delivery of employment and training related services to veterans. The administration requested elimination of the Institute.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 1997 .....	\$46,981,000
Budget estimate, 1998 .....	46,750,000
Committee recommendation .....	46,750,000

The bill includes \$46,750,000 for this account, the same as the budget request and \$231,000 below the 1997 comparable level. The bill includes \$43,105,000 in general funds and authority to transfer \$3,645,000 from the "Employment Security Administration" account of the unemployment trust fund. In addition, an amount of \$296,000 is available by transfer from the black lung disability trust fund.

The Office of the Inspector General [OIG] was created by law to protect the integrity of departmental programs as well as the welfare of beneficiaries served by those programs. Through a comprehensive program of audits, investigations, inspections, and program evaluations, the OIG attempts to reduce the incidence of fraud, waste, abuse, and mismanagement, and to promote economy, efficiency, and effectiveness throughout the Department.

GENERAL PROVISIONS

General provisions bill language is included to: Prohibit the payment of more than \$125,000 to Job Corps contractor employees (sec. 101); permit transfers of up to 1 percent between appropriations (sec. 102); and permit contracting out of Job Corps civilian conservation centers that fail to meet performance standards (sec. 103); and prohibit OSHA from promulgating or issuing any proposed or final standard regarding ergonomics (sec. 104).

TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES

HEALTH RESOURCES AND SERVICES ADMINISTRATION

HEALTH RESOURCES AND SERVICES

Appropriations, 1997 .....	\$3,404,567,000
Budget estimate, 1998 .....	3,266,479,000
Committee recommendation .....	3,429,071,000

The Committee recommends an appropriation of \$3,429,071,000 for health resources and services. This is \$162,592,000 above the administration request and \$24,504,000 more than the fiscal year 1997 allowance.

Health Resources and Services Administration [HRSA] activities support programs to provide health care services for mothers and infants; the underserved, elderly, homeless; migrant farm workers; and disadvantaged minorities. This appropriation supports cooperative programs in community health, AIDS care, health provider training, and health care delivery systems and facilities.

CONSOLIDATED HEALTH CENTERS

The Committee has again provided funds for community health centers, migrant health centers, health care for the homeless, and public housing health service grants in a consolidated line rather than through separate lines. The Committee provides \$826,000,000 for the consolidated health centers [CHC's], which is \$23,991,000 above the 1997 level and \$16,132,000 above the administration request for this group of programs.

*Community health centers*

The community health centers provide comprehensive, case-managed primary health care services to medically indigent and underserved populations in rural and urban areas. Of the clients served by community health centers, about 44 percent are children and 66 percent have incomes below the poverty line.

The Committee understands that half of new patients served by health centers over the past 3 years have no health insurance. This increase in uninsured patients has driven demand for expanded services. The Committee expects that funding increases will be reasonably allocated to increase grant levels for existing grantees (particularly those serving greater numbers of uninsured persons) and to initiate new sites in underserved areas, particularly in rural regions.

Of the amount provided for consolidated health centers, the Committee has again included bill language making available a total of up to \$6,000,000 for loan guarantees for loans made by non-Federal lenders for the construction, renovation, and modernization of fa-

cilities that are owned and operated by health centers and for loans made to health centers for the costs of developing and operating managed care networks or plan, both to be administered by the Bureau of Primary Health Care. The Committee directs that funds collected through loan origination fees shall be deposited in the appropriate credit program account for authorized costs of such loans. It is anticipated that with the full amount provided for this activity, up to \$80,000,000 in loans could be made available for health-center renovations and managed care network formation, assuming a subsidy rate of approximately 7.5 percent for Federal funds appropriated.

The Committee reiterates its concern that social, cultural, and language barriers make it difficult to effectively provide primary health care to Hispanic populations in some States. The Committee strongly encourages HRSA to establish new centers in communities with significant Hispanic-American populations. The Committee is aware of a proposal by the Cabot Westside Clinic and Samuel U. Rodgers Health Center in Kansas City, MO, and encourages full and fair consideration of the proposal from these organizations.

Within the increase provided for community health centers, the bureau is encouraged to demonstrate and evaluate the outcomes of linking community health centers and substance abuse treatment centers.

#### *Migrant health centers*

The program helps provide culturally sensitive comprehensive primary care services to migrant and seasonal farm workers and their families. Over 80 percent of the centers also receive funds from the community health centers program.

#### *Health care for the homeless*

The program provides project grants for the delivery of primary health care services, substance abuse services, and mental health services to homeless adults and children. About one-half of the projects are administered by community health centers. The other one-half are administered by nonprofit coalitions, inner-city hospitals, and local public health departments.

#### *Public housing health service grants*

The program awards grants to community-based organizations to provide case-managed ambulatory primary health and social services in clinics at or in proximity to public housing. More than 60 percent of the programs are operated by community health centers.

#### *Native Hawaiian health care*

The Committee again includes the legal citation in the bill for the Native Hawaiian Health Care Program. The Committee has included funding for the consolidated health centers line so that health care activities funded under the Native Hawaiian Health Care Program can be supported under the broader community health centers line. The Committee expects that not less than \$3,500,000 be provided for these activities in fiscal year 1998.

The purpose of this activity is to improve the health status of native Hawaiians by making primary care, health promotion, and dis-

ease prevention services available through the support of native Hawaiian health systems. Services provided include health screening, nutrition programs, and contracting for basic primary care services. This activity also supports a health professions scholarship program for native Hawaiians.

The Committee is encouraged by the efforts of section 330 grantees and Native Hawaiian health systems in forming a hui, an association dedicated to addressing the health needs of Hawaii's underserved. The Committee encourages HRSA to maintain grantees participating in the hui at their current funding level.

Regarding Pacific basin activities, the agency is urged to address the pressing health needs of rural Hawaii. The Committee encourages utilization of the expertise and resources of the universities in the Pacific region in providing training, technical assistance, and program evaluation in Hawaii and the current and former territories in the Pacific. The Committee urges that special consideration be given to these universities when procuring services for the Pacific jurisdictions. The Committee looks forward to the completed report by the Institute of Medicine concerning the unmet health care needs of this area.

*National Health Service Corps: Field placements*

The Committee provides \$37,244,000 for field placement activities, which is the same as the 1997 level and the administration request. The funds provided for this program are used to support the activities of National Health Service Corps obligors and volunteers in the field, including travel and transportation costs of assignees, training and education, recruitment of volunteers, and retention activities. Salary costs of most new assignees are paid by the employing entity.

The Committee is concerned about the lack of dental participation in the NHSC Scholarship Program and few dental recipients of NHSC loan repayment awards, despite a significant increase in the number of dentists needed to service designated dental health professions shortage areas. The Committee strongly urges the NHSC to address this problem through increased dental participation.

*National Health Service Corps: Recruitment*

The Committee provides \$78,166,000 for recruitment activities, which is the same as the 1997 level and the administration request. This program provides major benefits to students (full-cost scholarships or sizable loan repayment) in exchange for an agreement to serve as a primary care provider in a high priority federally designated health professional shortage area. The Committee reiterates its intention that funds provided be used to support multiyear, rather than single-year, commitments.

The Committee again intends that \$3,000,000 of funds appropriated for this activity be used for State offices of rural health. The Committee continues to be concerned about possible overlap and duplication between primary care offices [PCO's] supported in every State through the health centers appropriation and State offices of rural health [SORH's] supported in each State through the National Health Service Corps appropriation. While some required

activities are exclusive to one program or another, the majority are similar. These include assessment of need for health services and available resources, targeting areas of unmet need, site and community development, technical assistance, and training. The Committee reiterates its recommendation that HRSA encourage States to create agreements between each State's PCO and SORH delineating joint and separate activities and promoting collaboration to the satisfaction of program officials.

In view of the disproportionate shortage of mental health care providers in the programs supported by the National Health Service Corps, the Committee is encouraged by the NHSC's announcement to launch a special initiative to target mental health care providers in underserved areas. The Committee requests that it be kept informed of the progress of this initiative and what additional action steps are planned to meet the demonstrated need for mental health care providers and to increase the numbers of such providers supported by the NHSC.

The Committee is aware that the NHSC has conducted a special pilot project over the last several years to place psychologists and other behavioral and mental health providers in community and migrant health centers. The Committee is further pleased that the NHSC publicly announced a special initiative to place psychologists and other behavioral/mental health professionals. However, the Committee is concerned with the slow progress made to date to actually increase the number of these providers.

#### HEALTH PROFESSIONS

For all HRSA health professions programs, the bill includes \$220,000,000, which is \$72,818,000 less than the fiscal year 1997 appropriation and \$90,000,000 higher than the overall administration request for these programs. The administration requested funding in consolidated program clusters. The Committee recommends separate, consolidated funding for programs authorized under either title VII or VIII of the Public Health Service Act.

##### *Consolidated funding for authorized title VII programs*

For programs authorized under title VII of the Public Health Service Act, as amended, the Committee recommends \$165,000,000, which is \$62,433,000 less than fiscal year 1997 appropriations and \$42,700,000 above the administration request. The administration requested funding of the title VII programs in the following consolidated program clusters: Workforce development; minority/disadvantaged; primary care and public health; and enhanced area health education. The Committee has provided funding for these programs in one consolidated account to provide enhanced flexibility in priority setting and to encourage administrative simplification. The Committee previously provided funding as separate line items.

Within the amount provided for title VII programs funded within this account, the Committee urges the Secretary to give priority consideration for the family medicine, rural interdisciplinary traineeships, and expects the Secretary to maintain the highest possible funding of geriatric education centers, area health edu-

cation centers, and the programs designated by the administration within the minority/disadvantaged cluster.

The Committee continues to encourage collaboration between the agency and the Substance Abuse and Mental Health Administration to conduct interdisciplinary health professions training projects, including training of mental health professionals, for practice in managed care settings and other primary care health settings. The Committee encourages the agency to assess and disseminate exemplary interdisciplinary models of practice that integrate health care, mental health and addictions services in primary care.

The following programs are included in this consolidated account:

*Grants to communities for scholarships*

This program provides grants to States to provide financing for community organizations located in health professions shortage areas to make scholarship awards to health professions students in exchange for a service obligation in the community. Sixty percent of the costs of scholarships are paid by the States and sponsoring community organizations. The administration requested funding in a consolidated program cluster. This program is authorized by section 338L of the Public Health Service Act.

*Health professions data and analysis*

This program supports the collection and analysis of data on the labor supply in various health professions and on future work force configurations. The administration requested funding in a consolidated program cluster.

*Research on certain health professions issues*

This program supports research on the extent to which debt has a detrimental effect on students entering primary care specialties; the effects of federally funded education programs for minorities attending and completing health professions schools; and the effectiveness of State investigations in protecting the health of the public. The Committee reiterates its support for the three centers for health professions research that are current grantees. The administration requested funding in a consolidated program cluster.

*Centers of excellence*

This program was established to fund institutions that train a significant portion of the Nation's minority health professionals. Funds are used for the recruitment and retention of students, faculty training, and the development of plans to achieve institutional improvements. The institutions that are designated as centers of excellence are private institutions whose mission is to train disadvantaged minority students for service in underserved areas. Located in poor communities and usually with little State funding, they serve the health care needs of their patients often without remuneration. The administration requested funding in a consolidated program cluster.

*Health careers opportunity program*

This program provides funds to medical and other health professions schools for recruitment of disadvantaged students and

preprofessional school preparations. The administration requested funding in a consolidated program cluster. The Committee urges the agency to distribute a reasonable allocation of grants among both historical minority institutions as well as those with more recent commitments toward diversity efforts.

*Exceptional financial need scholarships*

This program provides scholarship assistance to exceptionally needy students enrolled in schools of medicine, osteopathic medicine, or dentistry who agree to practice primary care for 5 years after completing training. The administration requested funding in a consolidated program cluster.

*Faculty loan repayment*

This program provides for the repayment of education loans for individuals from disadvantaged backgrounds who are health professions students or graduates, and who have agreed to serve for not less than 2 years as a faculty member of a health professions school. The administration requested funding in a consolidated program cluster.

*Financial assistance for disadvantaged health professions students*

This program provides financial assistance to disadvantaged students at medical, osteopathic, or dental schools who agree to practice primary health care for 5 years after completing training. The administration requested funding in a consolidated program cluster.

*Scholarships for disadvantaged students*

This program provides grants to health professions schools for student scholarships to individuals who are from disadvantaged backgrounds and are enrolled as full-time students in such schools. The Committee continues to intend that all health professions disciplines made eligible by statute be able to participate in the scholarships program. The administration requested funding in a consolidated program cluster.

*Family medicine training*

Family medicine activities support grants for graduate training in family medicine, grants for predoctoral training in family medicine, grants for faculty development in family medicine, and grants for the establishment of departments of family medicine. The Committee reiterates its support for this program and recognizes its importance in increasing the number of primary care physicians in underserved areas. The administration requested funding in a consolidated program cluster.

*General internal medicine and pediatrics training*

This program provides funds to public and private nonprofit hospitals and schools of medicine and osteopathic medicine to support residencies in internal medicine and pediatrics. Grants may also include support for faculty. The administration requested funding in a consolidated program cluster.

*Physician assistants*

This program supports planning, development, and operation of physician assistant training programs. The administration requested funding in a consolidated program cluster.

*Public health and preventive medicine*

This program supports awards to schools of medicine, osteopathic medicine, public health, and dentistry for support of residency training programs in preventive medicine and dental public health; and for financial assistance to trainees enrolled in such programs. The administration requested funding in a consolidated program cluster.

*Health administration traineeships and special projects*

This program provides grants to public or nonprofit private educational entities, including schools of social work but not schools of public health, to expand and improve graduate programs in health administration, hospital administration, and health policy analysis and planning; and assists educational institutions to prepare students for employment with public or nonprofit private agencies. The administration requested funding in a consolidated program cluster.

*Area health education centers*

This program links university health science centers with community health service delivery systems to provide training sites for students, faculty, and practitioners. The program supports three types of projects: Core grants to plan and implement programs; special initiative funding for schools that have previously received AHEC grants; and model programs to extend AHEC programs with 50 percent Federal funding. The administration requested funding in a consolidated program cluster. The Committee intends that adequate funding be provided to the area health education centers [AHEC] grant program since AHEC's are an important component of the Federal/State partnership in addressing rural health issues.

Within funds allocated to this program, the Committee encourages the agency to undertake new provider education programs to improve the detection, treatment, and management of patients with chronic fatigue and immune dysfunction syndrome. The Committee understands that the recommendations made in the joint report between the agency and the CFIDS Association of America may form the basis for implementation strategies.

The Committee is aware of and supportive of the WAMI medical education consortium for eligible residents of the States of Washington, Alaska, Montana, and Idaho. The current program seeks to add a rural integrated training experience program [WRITE] to provide clinical experiences for medical students under the tutelage of a rural physician as well as telecommunications links among participating centers. The Committee encourages the agency and the AHEC program to grant full and fair consideration of the WAMI proposal.

*Border health training centers*

These centers provide training to improve the supply, distribution, and quality of personnel providing health services in the State of Florida or along the border between the United States and Mexico and in other urban and rural areas with populations with serious unmet health care needs.

*General dentistry residencies*

This program assists dental schools and postgraduate dental training institutions to meet the costs of planning, developing, and operating residency training and advanced education programs in general practice of dentistry and funds innovative models for postdoctoral general dentistry. The administration requested funding in a consolidated program cluster.

*Allied health advanced training and special projects*

This program provides funds to assist schools or programs with projects designed to plan, develop, or expand postbaccalaureate programs for the advanced training of allied health professions; and provide traineeships or fellowships to postbaccalaureate students who are participating in the program and who commit to teaching in the allied health profession involved. This program also provides funds to expand existing training programs or develop new ones, recruit individuals into allied professions with the most severe shortages or whose services are most needed by the elderly, and increase faculty recruitment and education, and research. The administration requested funding in a consolidated program cluster.

The Committee continues to encourage HRSA to give priority consideration to those projects for schools training allied health professionals experiencing shortages, such as medical technologists and cytotechnologists.

*Geriatric education centers and training*

This program supports grants to health professions schools to establish geriatric education centers and to support geriatric training projects. The administration requested funding in a consolidated program cluster. These centers and geriatric training programs play a vital role in enhancing the skill-base of health care professionals to care for our Nation's growing elderly population. The Committee is concerned about the shortage of trained geriatricians and urges the agency to give priority to building the work force necessary to care for the Nation's elderly.

*Rural health interdisciplinary training*

This program addresses shortages of health professionals in rural areas through interdisciplinary training projects that prepare students from various disciplines to practice together, and offers clinical training experiences in rural health and mental health care settings to expose students to rural practice. The administration requested funding in a consolidated program cluster. The Committee encourages this program to continue addressing the issue of how the delivery of chiropractic health care can be enhanced in rural

areas, and how more women and minorities can be recruited as chiropractic health care practitioners in rural areas.

*Podiatric primary care training*

The program provides grants to hospitals and schools of podiatric medicine for residency training in primary care. The administration requested funding in a consolidated program cluster.

*Chiropractic demonstration grants*

The program provides grants to colleges and universities of chiropractic to carry out demonstration projects in which chiropractors and physicians collaborate to identify and provide effective treatment of spinal and lower back conditions. The administration requested funding in a consolidated program cluster. The Committee recommends that the program be continued and funded at current levels.

*Consolidated funding for authorized title VIII programs*

For programs authorized under title VIII of the Public Health Service Act, as amended, the Committee recommends \$55,000,000, which is \$10,385,000 less than the total fiscal year 1997 appropriations and \$47,300,000 above the administration request. The administration requested funding of the title VIII programs in a consolidated nurse education/practice cluster. The Committee previously provided funding as separate line items. The Committee has provided funding for these programs in one consolidated account to provide for a comprehensive, flexible, and effective authority for nursing work force development. The Committee urges the Secretary to give priority within the consolidated account to nurse disadvantaged assistance and nurse practitioner programs.

The following programs are included in this consolidated account:

*Advanced nurse education*

This program funds nursing schools to prepare nurses at the master's degree or higher level for teaching, administration, or service in other professional nursing specialties. The administration requested funding in a consolidated program cluster.

*Nurse practitioner/nurse midwife education*

This program supports programs preparing nurse practitioners and nurse midwives to effectively provide primary health care in settings such as the home, ambulatory, and long-term care facilities, and other health institutions. These professionals are in especially short supply in rural and underserved urban areas. The administration requested funding in a consolidated program cluster.

*Nursing special projects*

This program supports projects to increase the supply of nurses meeting the health needs of underserved areas; demonstrate methods to improve access to nursing services in nontraditional settings; and demonstrate innovative nursing practices. The administration requested funding in a consolidated program cluster.

*Nurse disadvantaged assistance*

This program provides grants and contracts to qualified schools and education programs to recruit individuals from minority and disadvantaged backgrounds, and to assist them with their nursing education by providing training, counseling, and stipends. The administration requested funding in a consolidated program cluster.

*Professional nurse traineeships*

Traineeships fund registered nurses in programs of advanced nursing education, including preparation for teaching, administration, supervision, clinical specialization, research, and nurse practitioner and nurse midwife training. The administration requested funding in a consolidated program cluster.

*Nurse anesthetist traineeships*

Grants are awarded to eligible institutions to provide traineeships for licensed registered nurses to become certified registered nurse anesthetists [CRNA]. The program also supports fellowships to enable CRNA faculty members to obtain advanced education. The administration requested funding in a consolidated program cluster.

*Nurse loan repayment for shortage area service*

This program offers student loan repayment to nurses in exchange for an agreement to serve not less than 2 years in an Indian health service health center, native Hawaiian health center, public hospital, community or migrant health center, or rural health clinic. The administration requested funding in a consolidated program cluster.

## OTHER HRSA PROGRAMS

*Hansen's disease services*

The Committee has included \$14,424,000 for the Hansen's Disease Program, which is the \$2,670,000 lower than the 1997 level and \$2,045,000 lower than the administration request. The administration proposed to consolidate all Hansen's disease programs into a program cluster, consisting of the National Hansen's Disease Center, a \$1,750,000 payment to Hawaii for medical care for Hansen's disease patients in the State, and funds for buildings and facilities repair and renovation at the Gillis W. Long Hansen's Disease Center in Carville, LA. The Committee has provided funding for the payment to Hawaii as a separate line item.

*Maternal and child health block grant*

The Committee recommends \$681,000,000 for the maternal and child health [MCH] block grant. This is the same as the fiscal year 1997 appropriation and the administration request.

The MCH block grant funds are provided to States to support health care for mothers and children. According to statute, 15 percent of funds are used for special projects of regional or national significance [SPRANS]; and 12.75 percent of funds over \$600,000,000 are used for community-integrated service systems [CISS] programs. After taking the 12.75-percent set-aside, the re-

maining 87.25 percent is distributed on the same percentage split as the basic block grant formula.

The Committee again includes bill language designating \$103,609,000 of the maternal and child health block grant for special projects of regional and national significance [SPRANS]. This designation will again provide \$2,857,000 more for SPRANS activities than would otherwise be the case under the statutory formula. The Committee intends that this amount be used for the traumatic brain injury State demonstration projects authorized under title XII of the Public Health Service Act.

The Committee recognizes that the hemophilia treatment centers program serves as a model in the management of chronic diseases, demonstrating cost-effective health outcomes, including reduced hospitalization, and expects the agency to sustain funding support for this program.

The Committee has been pleased with the Bureau's efforts in responding to the joint effort with the National Institute of Child Health and Human Development in the back to sleep campaign for sudden infant death syndrome [SIDS], and by the effort to understand the need for SIDS services through its nationwide survey of sudden infant death services. The Committee commends the Bureau for its work toward establishing a SIDS program support center as recommended by the nationwide survey.

The Committee again commends the Office of Adolescent Health for working to develop an integrated, multidisciplinary approach, and urges its continued emphasis on using the expertise of a variety of health professions, including nursing. The Committee reiterates that special attention be devoted toward addressing adolescents' mental health problems, including depression, violence, and suicide. The Committee commends the close working relationship between the Office of Adolescent Health and the Carnegie Council on Adolescent Development, and urges the implementation of the Carnegie Council's recommendations.

Millions of infants are not receiving screening for hearing loss. Such screening can be performed at minimal cost and can prevent significant health and education costs for children. Recent advancements have been made on screening and the National Institutes of Health is concluding a major study of the most effective forms of screening. The Committee believes that infant hearing screening would be a wise use of block grant funds and recommends that HRSA provide States with the results of this landmark NIH study.

Dental caries (tooth decay) is one of the most common health problems among children, and fluoridation has proven to be the single most cost-effective preventive measure. It is estimated that Medicaid spends \$30 or more per child to care for a child's teeth in nonfluoridated areas compared to districts whose water supply is fluoridated. The Committee reiterates its support for implementation of enhanced fluoridation efforts, particularly in underutilized areas of the country, and intends that an amount no less than that expended last year by the agency be used for those States with fluoridation levels below 25 percent to allow them to develop implementation plans for increased fluoridation.

The Committee emphasizes the importance and value of the LEND programs on neurodevelopment currently operating under

the SPRANS set-aside within the MCH block grant and encourages the agency to continue to award such grants.

The Committee has been concerned about the impact of the rapidly changing health care system upon families with children who have special medical needs. The Committee is especially concerned with the challenges confronting many of these families in obtaining comprehensive care for their children and by what processes this care is provided to them. Within the amount provided to the SPRANS set-aside, sufficient funds are available to initiate a 1-year planning and development grant prior to a potential multiyear study that examines the complex issue of resource integration for children with special medical needs. The Committee is aware of a proposal being developed by the Connecticut Children's Medical Center that has many meritorious characteristics, and urges the Bureau to give a full and fair consideration of this proposal.

The Committee recognizes that amblyopia is the most widespread clinically serious eye problem in children, and that undetected vision problems hamper children's ability to learn. In order to improve early detection services, the Committee notes that there are sufficient funds within the amount available for the SPRANS setaside for a multistate demonstration project to provide and evaluate the practicality and effectiveness of ocular screening services for young children, including photoscreening technology. If implemented, the project should deliver ocular screening services to the largest practical number of children in one age group in each State, collect and maintain the screening results for all tested children in a data base, and report results to each child screened, each screening site, and to the appropriate State agency within a reasonable period of time. The Committee urges the Bureau to consult with the National Eye Institute and with appropriate State agencies in determining useful screens to efficiently detect amblyopic risk factors and other significant ocular problems.

The Committee encourages the agency to work with organizations, such as the Children's Health Fund, that seek to initiate a national network of innovative pediatric programs providing health services to medically underserved children. The Committee understands that there is a need to learn from successful program models and to propagate these lessons to a broader national network with the participation of private support.

#### *Healthy start initiative*

The Committee recommends \$95,982,000 for the healthy start infant mortality initiative. This amount is the same as the fiscal year 1997 amount and the same as the administration request.

The healthy start initiative was developed to respond to persistently high rates of infant mortality in this Nation. The initiative was expanded in fiscal year 1994 by a special projects program, which supported an additional seven urban and rural communities to implement infant mortality reduction strategies and interventions.

While these projects have made substantial progress in the reduction of infant mortality, there remain significant challenges to sustain the gains already attained. Abrupt termination of the program will likely result in increases in infant mortality in the tar-

geted project areas. While the Committee is aware of the original timeframe of the program, it places its highest priority toward averting and reducing infant mortality through sustainable means in areas with continued critical needs.

The funds provided by the Committee would provide the opportunity to replicate the best models from the demonstration phase of the initiative and propagate the lessons learned with more than 300 urban and rural communities with a high rate of infant mortality. Within this amount, funds would be available to existing projects for: The increased support of successful strategies and interventions; the utilization of these projects as resource centers for other health providers, including managed care organizations; and for the initiation of projects in new communities with high incidence of infant mortality. Existing sites include those initially approved in 1991 but not funded until 1994.

*Organ procurement and transplantation*

The Committee provides \$2,778,000 for organ transplant activities. This is \$1,113,000 lower than the administration request and \$500,000 more than the fiscal year 1997 appropriation. These funds support a scientific registry of organ transplant recipients and kidney dialysis patients, and the National Organ Procurement and Transplantation Network to match donors and potential recipients of organs. A portion of the appropriated funds may be used for education of the public and health professionals about organ donations and transplants, and to support agency staff providing clearing-house and technical assistance functions.

The Committee strongly believes that a concerted effort should be made to increase the supply of organs available for transplantation, and encourages the consideration of options that would enhance donor awareness, such as enhanced cooperation among public and private organizations, and behavioral research. The administration requested \$1,687,000 in increased funding for a public education campaign aimed at specific segments of the population.

The Committee has provided \$500,000 over last year's level to identify and implement targeted strategies for assisting hospital staff to become more knowledgeable about and more committed to donation, and to develop and implement public education programs that focus upon key professions that can potentially affect donation, such as clergymen. The goal would be to significantly increase the rate that potential donor families are contacted by hospital staff for the purpose of informing them of donation options. The Committee understands that nearly one-third of potential donor families are not asked to donate because of the lack of hospital staff training or apprehension about the request process. The Committee is aware of the other educational activities proposed by the agency, such as developing a grade K-12 curriculum and college campus activities, and notes that SPRANS funds within the MCH block grant could be made available for these activities.

The Committee is aware of the chronic difficulties that has existed for a number of years regarding allocation formulas for livers and other organs, and notes that last year while 50,000 people were on the UNOS waiting list for an organ, only 19,000 solid organ transplants were performed. The Committee reiterates its

expectation of prior notification and consultation regarding any change in the current liver allocation criteria. It also expects the Department to carefully weigh key factors such as severity of illness and geography in determining a new allocation policy.

The Committee is also aware of problems concerning the sharing of data between the agency and the primary contractor, and expects that information acquired with the use of Federal funds be accessible by the contracting agency with appropriate consideration for issues surrounding privacy.

#### *Health teaching facilities interest subsidies*

The Committee recommends \$225,000 for interest subsidies for three health professions teaching facilities. This is the same as the administration request and \$72,000 less than the fiscal year 1997 appropriation. This program continues support of interest subsidies and loan guarantees for three loans for construction of health professions teaching facilities under a now discontinued Public Health Service Act authority. The remaining Federal commitment on these loans will expire in the year 2004.

#### *National bone marrow donor program*

The Committee has included \$15,270,000 for the national bone marrow donor program. This is the same as the administration request and the fiscal year 1997 level. The National Bone Marrow Donor Registry is a network, operated under contract, that helps patients suffering from leukemia or other blood diseases find matching volunteer unrelated bone marrow donors for transplants. The program also conducts research on the effectiveness of unrelated marrow transplants and related treatments.

The Committee is pleased that the National Bone Marrow Registry is increasingly meeting the needs of a significant proportion of those in need of allogenic bone marrow transplants. In addition, the bone marrow program is continuing to increase the size and diversity of the registry of potential donors. Continued progress is critical to improving the chances of finding a matched marrow donor for patients of all races and ethnic heritage.

#### *Rural health outreach grants*

The Committee recommends \$30,092,000 for health outreach grants. This amount is \$2,296,000 higher than the fiscal year 1997 level and \$5,000,000 higher than the administration request. This program supports projects that demonstrate new and innovative models of outreach in rural areas such as integration and coordination of health services and rural telemedicine projects. The Health Care Consolidation Act of 1996 authorized a new rural network development program intended to develop integrated organizational capabilities among three or more rural health provider entities.

Sufficient funds are provided within this account to initiate a telemedicine project dedicated to serving rural, poor, and medically underserved communities through a high-speed, community-access telecommunication network. The Committee is aware of the University of South Alabama's proposal to initiate the Southwest Alabama Network for Education and Telemedicine and urges the agency to grant full and fair consideration to this noteworthy project.

Within the increase provided, sufficient funds are available to conduct a telemedicine project that will strengthen the knowledge base in developing graduate and undergraduate health professions education program curricula that meet the special needs of rural communities. The Committee is aware of the proposal by the State of Vermont to conduct a telemedicine demonstration project that would integrate health professions education with the delivery of health services in rural areas, and urge the agency grant full and fair consideration to this proposal.

*Emergency medical care for children*

The Committee provides \$13,000,000 for emergency medical services for children. This is \$507,000 above the 1997 level and \$1,000,000 above the administration request. The program supports demonstration grants for the delivery of emergency medical services to acutely ill and seriously injured children. The Committee urges HRSA to focus attention on the shortage of these programs in remote and rural areas of the country, such as those in Alaska and Hawaii.

*Black lung clinics*

The Committee includes \$5,000,000 for black lung clinics. This is \$1,000,000 more than the fiscal year 1997 amount and \$3,094,000 higher than the administration request. This program funds clinics which treat respiratory and pulmonary diseases of active and retired coal miners. These clinics reduce the incidence of high-cost inpatient treatment for these conditions. The Committee intends the increase to sustain patient services at all current operating centers.

*Alzheimer's disease demonstration grants*

The Committee recommends \$5,999,000 for Alzheimer's demonstration grants, which is the same as the 1997 level. The administration requested transfer of funding and program operations to the Administration on Aging.

The Committee is pleased that this program continues to be an effective catalyst by stimulating over 140 State, local, public, and private agencies to coordinate and strengthen community services for Alzheimer's families. The program focuses on making existing services work better, with special emphasis on hard-to-reach and underserved populations. With relatively modest funding, projects have provided outreach and support to an estimated 4.5 million persons in over 20 ethnic groups. The Committee is pleased with the current success of this program and with the creativity and flexibility with which HRSA has administered it. The Committee sees no compelling reason to transfer this program, as proposed by the administration, and is strongly concerned that a transfer risks disruption of the strong public/private partnerships already in place. The Committee, therefore, rejects the proposed transfer and directs that the program remain at HRSA.

*Payment to Hawaii, Hansen's disease treatment*

Within the amount provided for Hansen's disease services, the Committee has provided \$2,045,000 for the 1998 payment to the State of Hawaii for the medical care and treatment in its hospital

and clinic facilities of persons with Hansen's disease at a per diem rate not greater than the comparable per diem operating cost per patient at the Gillis W. Long National Hansen's Disease Center in Carville, LA. This amount is \$295,000 above the administration request and the same as the 1997 level. The administration requested funding in a consolidated program cluster for Hansen's disease.

#### ACQUIRED IMMUNE DEFICIENCY SYNDROME

##### RYAN WHITE AIDS PROGRAMS

The Committee provides \$1,077,252,000 for Ryan White AIDS programs. This is \$41,000,000 above the administration request and \$81,000,000 above the 1997 level.

##### *Emergency assistance—title I*

The Committee recommends \$457,943,000 for emergency assistance grants to eligible metropolitan areas disproportionately affected by the HIV/AIDS epidemic. This amount is \$8,000,000 above the fiscal year 1997 amount and \$3,000,000 higher than the administration request. These funds are provided to metropolitan areas with a cumulative total of more than 2,000 cases of AIDS or a per capita incidence of 0.0025. One-half of the funds are awarded by formula and one-half are awarded through supplemental competitive grants.

The Committee is concerned about the limited AIDS therapy options for children and pregnant women, and encourages the Secretary, when awarding supplemental title I funds, to give priority as appropriate to EMA's whose applications increase services to women and children with AIDS/HIV infection.

##### *Comprehensive care programs—title II*

The Committee has provided \$469,954,000 for HIV health care and support services. This amount is \$38,000,000 above the administration request and \$53,000,000 above the 1997 level. These funds are awarded to States to support HIV service delivery consortia, the provision of home and community-based care services for individuals with HIV disease, continuation of health insurance coverage for low-income persons with HIV disease and support for State AIDS drug assistance programs [ADAP].

The Committee is heartened by the advent of protease inhibitor therapy in combination with other medications for patients with HIV, which has resulted in lower mortality rates for individuals with HIV/AIDS for the first time in the history of the epidemic. The Committee continues to be concerned by the high costs of new medications for AIDS, and, in anticipation of higher demand for these treatments, has approved bill language for \$217,000,000 for AIDS medications, compared to \$167,000,000 provided for this purpose in fiscal year 1997. The Committee remains concerned about the lack of timely national data available to estimate future demand for AIDS medications funded by the ADAP program, and is further concerned about the wide variation in State Medicaid policies regarding eligibility, benefits, and formularies. The Committee urges the Secretary to establish useful benchmarks in measuring

progress for ADAP activities and to increase data collection and information sharing efforts between the Department, the States, and nongovernmental organizations such as the ADAP Working Group, the AIDS Treatment Data Network, and the National Alliance of State and Territorial AIDS Directors. The Committee reiterates its directive that the program use all means necessary to reduce the purchase price of AIDS drugs.

*Early intervention program—title III-B*

The Committee recommends \$79,568,000 for early intervention grants. This is \$10,000,000 above the 1997 level and \$5,000,000 less than the administration request. These funds are awarded competitively to primary health care providers to enhance health care services available to people at risk of HIV and AIDS. Funds are used for counseling, testing, diagnostic, and therapeutic services.

To the extent practicable, the Committee encourages HRSA to fairly allocate the increase for title III-B between existing grantees and new providers. The Committee understands that existing grantees have been level-funded throughout the history of the CARE Act. By providing additional funds to current grantees, the Committee intends to undergird the HIV care infrastructure already established in title III-B clinics. The Committee also supports expansion of the number of communities receiving assistance from this title. The Committee understands that HRSA is conducting a grant-review process expected to identify qualified new grantees in underserved rural and urban areas.

*Pediatric AIDS demonstrations—title IV*

The Committee recommends \$45,000,000 for title IV pediatric AIDS, which is \$5,000,000 higher than the administration request and \$9,000,000 above the 1997 amount. This program supports demonstration grants to develop innovative models that foster collaboration between clinical research institutions and primary/community-based medical and social service providers for underserved children, youth, pregnant women, and their families.

Some 5 percent of the funds appropriated under this section may be used to provide peer-based training and technical assistance through national organizations that collaborate with projects to ensure development of innovative models of family-centered and youth-centered care; advanced provider training for pediatric, adolescent, and family HIV providers; health care financing, outcome measures, and policy analysis; and coordination with research programs.

The Committee is aware that the Ryan White CARE Act Amendments of 1996 requires significant enrollment of title IV patients in NIH research programs. The Committee is further aware that funding for the pediatric AIDS clinical trial group has been reduced by the NIH Office of AIDS Research, and urges HRSA to consider this reduction in funding as well as research protocol requirements when evaluating the ability of title IV projects to enroll significant numbers of patients in research programs.

*AIDS dental services*

The Committee provides \$7,500,000 for AIDS dental services, which is the same as the administration request and the 1997 level. This program provides grants to dental schools and postdoctoral dental education programs to assist with the cost of providing unreimbursed oral health care to patients with HIV disease.

*AIDS education and training centers*

The Committee recommends \$17,287,000 for the AIDS education and training centers [AETC's]. This amount is \$1,000,000 above the 1997 level and the same as the administration request. AIDS education and training centers train health care practitioners, faculty, and students who care for AIDS patients outside of the traditional health professions education venues, and support curriculum development on diagnosis and treatment of HIV infection for health professions schools and training organizations. With the issuance of new protease inhibitor treatment guidelines for patients with HIV, the Committee provides a significant increase in this account and expects the participating centers to disseminate and educate health care providers on the proper use of these new medications.

*Family planning*

The Committee recommends \$208,452,000 for the title X family planning program. This is \$5,000,000 higher than the administration request and \$10,000,000 above the 1997 level. Title X grants support primary health care services at more than 4,000 clinics nationwide. About 85 percent of family planning clients are women at or below 150 percent of poverty level.

Title X of the Public Health Service Act, which established the family planning program, authorizes the use of a broad range of acceptable and effective family planning methods and services. The Committee believes this includes oral, injectable, and other preventive modalities.

The Committee is concerned that programs receiving title X funds ought to have access to these resources as quickly as possible. The Committee, therefore, instructs the Department to distribute to the regional offices all of the funds available for family planning services no later than 60 days following enactment of this bill.

The Committee urges that the Office of Family Planning support national and community-based initiatives to involve males in family planning matters. The Committee is aware of the efforts of the National Organization of Concerned Black Men, Inc., of Philadelphia, PA, and its local affiliates to enhance the involvement of African-American males in all aspects of family planning, including teen pregnancy prevention, parenting skills, fatherhood responsibility, and male mentoring, and applauds such practical solutions and urges the Office to support such endeavors.

*Rural health research*

The Committee recommends \$11,713,000 for the Office of Rural Health Policy. This is \$3,000,000 more than the fiscal year 1997 level and the administration request. The funds provide support for

the Office as the focal point for the Department's efforts to improve the delivery of health services to rural communities and populations. Funds are used for rural health research centers, grants to telemedicine projects, the National Advisory Committee on Rural Health, and a reference and information service.

Within the increased amount provided above last year's level, sufficient funds are available to support a project that integrates biomedical research activities with rural health training of physicians. The Committee understands that the McLaughlin Research Institute of Great Falls, MT, is especially well-suited to both undertaking biomedical research and providing research opportunities to rural-based health practitioners, and urges the full and fair consideration of its proposal.

Within the increased amount provided above last year's level, sufficient funds are available to support a project that consolidates instructional facilities for allied health programs into one site in a rural area. The Committee notes that the North Dakota State College of Science in Wahpeton, ND, has many meritorious characteristics that would efficiently and effectively conduct such a consolidation and urges the full and fair consideration of its proposal.

Within the increased amount provided above last year's level, sufficient funds are included to support a project that establishes an integrated system to improve the health status of specific medically underserved populations identified in rural, transitional, and urban areas designated as health professional shortage areas. The Committee is aware of the proposal by the Carolinas HealthCare System of North Carolina to establish the Carolinas Community Health Institute and urges the agency's expeditious consideration of its proposal.

#### *Health care facilities*

The Committee provides \$10,000,000 for health care facilities, which is \$2,902,000 below the 1997 level and \$10,000,000 above the administration request. Funds are made available to public and private nonprofit entities for construction or modernization of outpatient medical facilities.

Sufficient funds are provided for the construction of a health care center dedicated to the delivery of primary and preventive health care services to a medically underserved area. The Committee understands that the Sacred Heart Hospital of Allentown, PA, has many meritorious characteristics that would optimize the delivery of health care services to the underserved of its region, and urges the full and fair consideration of its proposal.

Also available are funds supporting the development of a center that provides geriatric care, adolescent health services, and general prevention services. The Committee is cognizant of Lehigh Valley (Pennsylvania) Hospital and Health Network's efforts to construct such a center, and urges the full and fair consideration of its proposal.

Funds are also available for the construction of a facility that would house a model program for the delivery of state-of-the-art medical care to economically deprived, inner-city neighborhoods. The Committee is aware that the Associates in Medicine Program at Columbia University in New York City has been developing such

a model program and urges the full and fair consideration of its proposal.

Sufficient funds are provided for the initiation of construction of outpatient facilities at a genetics counseling, patient care, and research center. The Committee urges strong consideration of the proposal developed by the University of Alabama at Birmingham, whose expertise and leadership in health care delivery in under-privileged areas is especially noteworthy.

*Buildings and facilities*

The Committee recommends no funding for buildings and facilities, the same as the administration request and \$828,000 below the fiscal year 1997 amount.

*National practitioner data bank*

The Committee has not provided Federal funding for the national practitioner data bank, which is the same as the administration request. The Committee and the administration assume that \$8,000,000 will be provided entirely through the collection of user fees and will cover the full cost of operating the data bank, an amount that is \$2,000,000 higher than what was authorized to be collected in fiscal year 1997. Traditional bill language is included to ensure that user fees are collected to cover all costs of processing requests and providing such information to data bank users.

*Program management*

The Committee recommends \$114,429,000 for program management activities for fiscal year 1998. This is \$3,480,000 higher than the administration request and \$1,500,000 above the 1997 level. The Committee is concerned that the growing number, complexity, and fiscal impact of HRSA's programs have expanded over the last 5 years, and that the agency's program management budget has not kept pace, resulting in problems ranging from insufficient numbers of qualified staff to outdated technology. The amount provided above the request is intended to enhance the agency's administrative and management capabilities, particularly in AIDS programs.

The Committee has not provided bill language requested by the administration enabling HRSA's Office of Drug Pricing to finance the Public Health Service Prime Vendor Program through a user fee. Additional funds to run this office, if necessary, are available from the increase provided to the program management account.

MEDICAL FACILITIES GUARANTEE AND LOAN FUND

Appropriations, 1997 .....	\$7,000,000
Budget estimate, 1998 .....	6,000,000
Committee recommendation .....	6,000,000

The Committee recommends \$6,000,000 for the medical facilities guarantee and loan fund. This is the same as the administration request and \$1,000,000 less than the fiscal year 1997 appropriation. These funds are used to comply with the obligation of the Federal Government to pay interest subsidies on federally guaranteed loans throughout the life of the loans. These loans were used for hospital modernization, construction, and conversion. The bill in-

cludes language, as in prior years, which prohibits commitments for new loans or loan guarantees in fiscal year 1998.

HEALTH EDUCATION ASSISTANCE LOANS

The Committee recommends guarantee authority of \$85,000,000 for new HEAL loans in fiscal year 1998, which is the same as the President's request and \$55,000,000 below the fiscal year 1997 level.

The Committee recommends \$29,566,000 to liquidate 1998 obligations from loans guaranteed before 1992, which is the same as the administration request and \$8,042,000 below the 1997 appropriation. In addition, the Committee provides \$1,020,000 to pay default claims arising from loans guaranteed in 1998, which is the same as the administration request and \$543,000 above the 1997 appropriation.

For administration of the HEAL Program, the Committee recommends \$2,688,000, which is the same as the 1997 appropriation and the administration request.

The HEAL Program insures loans to students in the health professions and helps to ensure graduate student access to health professions education, especially among minority, disadvantaged students, and those from behavioral and mental health fields. The Budget Enforcement Act of 1990, changed the accounting of the HEAL Program. One account is used to pay obligations arising from loans guaranteed prior to 1992. A second account was created to pay obligations and collect premiums on loans guaranteed in 1992 and after. Administration of the HEAL Program is separate from administration of other HRSA programs.

The Committee has provided a loan limitation level sufficient only to support the continuation costs of those students currently receiving HEAL loans. The Committee anticipates that the need for the HEAL Program will decline as loan limits for guaranteed student loans have been raised by the Department of Education. The Committee has also included bill language enabling the Office of HEAL Loan Default Reduction to use up to \$1,000,000 derived by transfer from insurance premiums collected from such guaranteed loans.

VACCINE INJURY COMPENSATION TRUST FUND

Appropriations, 1997 .....	\$169,721,000
Budget estimate, 1998 .....	45,448,000
Committee recommendation .....	45,448,000

The Committee recommends that \$45,448,000 be released from the vaccine injury compensation trust fund in 1998, of which \$3,000,000 is for administrative costs. This amount is the same as both the budget request and the fiscal year 1997 amount. In addition, no general funds are appropriated for compensation of vaccine-related injuries associated with vaccines administered before fiscal year 1989. This is the same as the administration request and \$110,000,000 below the fiscal year 1997 amount.

The National Vaccine Injury Compensation Program provides compensation for individuals with vaccine-associated injuries or deaths. Funds are awarded to reimburse medical expenses, lost earnings, pain and suffering, legal expenses, and a death benefit.

The vaccine injury compensation trust fund is funded by excise taxes on certain childhood vaccines. The administration proposes to exempt the vaccines for children program of Medicaid and the CDC discretionary vaccine purchase program from payment of the vaccine excise tax in fiscal year 1998, yielding an appropriations reduction of \$91,000,000.

#### CENTERS FOR DISEASE CONTROL AND PREVENTION

##### DISEASE CONTROL, RESEARCH, AND TRAINING

Appropriations, 1997 .....	\$2,302,168,000
Budget estimate, 1998 .....	2,315,795,000
Committee recommendation .....	2,368,133,000

For the Centers for Disease Control and Prevention [CDC], the Committee provides \$2,368,133,000, which is \$65,965,000 above the 1997 level and \$51,338,000 more than the budget request.

The activities of the CDC focus on four major priorities: provide core public health functions; respond to urgent health threats; promote women's health; and provide leadership in the implementation of nationwide prevention strategies to encourage responsible behavior and adoption of lifestyles that are conducive to good health. While Americans today enjoy the longest life expectancy of any time in our Nation's history, preventable diseases and conditions still cause death, and disability, and still compromise the quality of life for millions of Americans. Public health experts estimate that about one-half of the deaths which occur in the United States every year are considered preventable, as are many of the illnesses.

##### *Preventive health and health services block grant*

The Committee recommends \$143,940,000 for the preventive health and health services block grant, the same as the budget request and \$10,054,000 below the 1997 appropriation. The Committee recommendation includes an additional \$45,000,000 from the violent crime reduction trust fund for rape prevention and education activities authorized by the Violence Against Women Act to be carried out through the preventive health and health services block grant. This amount is \$10,000,000 over the 1997 appropriation and the full amount authorized by the act for fiscal year 1998.

The preventive health and health services block grant provides States with funds for services to reduce preventable morbidity and mortality and improve the quality of life. The grants give States flexibility in deciding how available funding can be used to meet State preventive health priorities. Programs eligible for funding include screening, laboratory services, health education, and outreach programs for such conditions as high blood pressure and cholesterol, and breast and uterine cancer.

##### *Prevention centers*

The Committee recommends \$8,099,000 for prevention centers. This is the same as the budget request and the fiscal year 1997 appropriation.

CDC's prevention centers program provides grants to academic programs to support applied research designed to yield tangible re-

sults in health promotion, disease prevention, and injury control. This network of collaborating prevention centers works to fill the knowledge gaps that block achievement of prevention goals. The centers work with State and local health departments and other organizations to increase the implementation of research findings.

The Committee encourages the continued support of center activities aimed at improving knowledge about the usefulness and effectiveness of health promotion programs for persons with disabilities.

#### *Sexually transmitted diseases*

The Committee recommends \$111,171,000 for sexually transmitted disease prevention and control, the same as the budget request and \$4,968,000 more than the fiscal year 1997 appropriation.

The mission of the STD program is to survey, prevent, and control the transmission of STD's by providing national leadership for: prevention and control programs; monitoring disease trends; behavioral and clinical research; education and training; building partnerships for STD prevention; the STD accelerated prevention campaign; and infertility. Grants are awarded to State and local health departments and other nonprofit entities to support primary prevention activities, surveillance systems, screening programs, partner notification and counseling, outbreak control, and clinical skills training.

The increase provided will support replication of the successful chlamydia prevention demonstration program. The impact of this model has already been proven in 20 States to work rapidly. In the Pacific Northwest, for example, chlamydia rates have dropped by almost 60 percent within the first 5 years of the program. Additional funds will be used to expand the number of women participating in this collaborative services delivery model and to implement and evaluate demonstration projects to extend screening to young men in order to augment prevention of complications in women.

The Committee understands that the Institute of Medicine recently released a report that outlined the connection between non-HIV STD's and an increased risk of transmission of HIV. The report estimated that successfully treating 100 cases of syphilis among high-risk groups for STD's would prevent up to 1,200 HIV infections over a 10-year period. The Committee concurs with the view of the IOM report that collaboration between the STD and HIV divisions of the CDC is critical and encourages the Director to improve the collaborative interventions and initiatives between these two divisions.

Earlier this year the President appropriately apologized on behalf of the Nation to survivors of the Tuskegee experiment. The Committee requests that the CDC report to the Committee by February 1, 1998, concerning the progress made to date in eliminating syphilis, and the additional effort and investment needed over the next 5 years to eradicate this disease in the United States.

#### *Immunization*

The Committee recommends \$445,545,000 for immunization activities in fiscal year 1998 authorized under section 317 of the Pub-

lic Health Service Act, \$18,233,000 more than the budget request and \$22,038,000 below the fiscal year 1997 appropriation.

The Omnibus Reconciliation Act [OBRA] of 1993 established a new vaccine purchase and distribution system that provides, free of charge, all pediatric vaccines recommended for routine use by the Advisory Committee on Immunization Practices to all Medicaid-eligible children, uninsured children, underinsured, and native Americans through program-registered providers. Included in the Medicaid estimate for fiscal year 1998 is \$437,104,000 for the purchase and distribution of vaccines for a total immunization recommendation of \$882,649,000 in the bill.

The administration of safe and effective vaccines remains the most cost-effective method of preventing human suffering and reducing economic costs associated with vaccine-preventable diseases. Through the immunization program, the CDC provides leadership and support for national and international efforts to prevent and/or control vaccine-preventable diseases.

Within the amounts appropriated, sufficient funds are provided for the purchase of vaccine under the 317 program. The Committee has not agreed to the language proposed in the budget request to exempt from the payment of excise tax vaccines purchased with Federal funds under the authority of section 317 of the Public Health Service Act. As in previous years, the Director has discretion to make transfers from among funds provided for 317 vaccine purchase and infrastructure grants based upon the program requirements. The Committee requests that the CDC provide notification of the amount of any transfer, the latest State carryover balance estimates, and the justification for the transfer.

The Committee recommends the Director ensure that the 317 program concentrates on improving the vaccine delivery infrastructure for children, adolescents, and adults. Barriers to immunization involving poor delivery systems, ineffective tracking systems, and limited access to providers continue in many of our Nation's communities. The Committee urges the Director to build greater accountability mechanisms into the 317 program so that States and localities receiving support are utilizing funds in a timely and effective manner. The Committee continues to receive reports of significant unspent balances in the 317 accounts of many States. The Committee requests that the Director be prepared to report on the calendar year 1997 balances in the program and steps the CDC has taken to ensure State and local health departments implement systems to ensure that limited Federal funds are properly and timely spent.

An important role of the CDC is to ensure that parents and providers have full information about the safety and efficacy of vaccines. The Committee encourages the CDC to develop an ongoing program to communicate the relationship of benefits versus risk of immunization, as well as the consequences that result from under-immunization to appropriate individuals and providers.

The Committee recommends that the CDC continue to ensure that all grantees receiving IAP funds reserve 10 percent of those funds for the purpose of funding immunization assessment and referral services in WIC sites in 1997. CDC should ensure that all of these funds are used in each State for WIC immunization activi-

ties unless CDC can document that assessment and referral in a State's WIC sites are taking place without the need for specific funds. CDC should collaborate with the National Association of WIC Directors and with State immunization directors in setting the criteria for assessment, referral, and annual reporting of WIC coverage.

As in previous years, the Committee also recommends that the CDC require that all States receiving IAP funds continue to conduct annual provider site assessments in all public clinics, using CDC-approved methodology. In the event that States lack sufficient resources to conduct such assessments, the Committee requests that the CDC provide technical assistance to the States for this purpose.

The Committee recommendation assumes the continuation of the bonus program to improve immunization rates. Using State-specific immunization coverage data, CDC provides payments to States for 2-year-olds who have been fully immunized. CDC will provide to the States: \$50 per child in excess of 65 percent and less than 75 percent; \$75 per child in excess of 75 percent and less than 85 percent; and \$100 per child in excess of 85 percent.

The recommendation includes the funds requested for polio eradication in order to support CDC's capacity to meet the goal of global eradication of polio by the year 2000. The Committee is aware of the progress that has been made in eradicating polio, and the real prospect of eliminating this disease by the year 2000. The Committee commends the CDC for its active leadership in the effort. Achieving the goal of eradication will mean savings in human and financial costs. In the United States alone, savings of \$230,000,000 will accrue on an annual basis once the disease is eradicated and the need for immunization is eliminated.

The Committee is aware that while hepatitis B [HBV] vaccines have been available for years and are recommended by the CDC, only 20 percent of the 4 million 11- and 12-year-old children are currently vaccinated. Vaccinating these preteens will prevent up to 30,000 new teenage HBV infections each year. To address this public health threat, the CDC is urged to assist States in working with physicians, nurses, public health care providers, schools, and others to increase the rate of compliance with HBV vaccination programs.

The recommendation includes sufficient funds for the CDC, as part of their global polio eradication efforts, to provide measles vaccine for supplemental measles immunization campaigns and to expand epidemiologic, laboratory, and programmatic/operational support to the WHO and its member countries. Such support should build on the global disease control and surveillance infrastructure developed for polio eradication in a manner that does not compromise ongoing global polio eradication activities. The Committee also encourages the Director to provide sufficient staff support for this accelerated international measles control effort.

The Committee has received information on the work being undertaken at Thomas Jefferson University Center for Biomedical Research in collaboration with the Delaware Valley College involving research on plant-delivered oral vaccines. Through the use of genetically engineered plants, this research shows promise as a means of oral vaccine production for both animals and humans.

The Committee encourages the Director to give consideration to supporting this important area of research.

The Committee is aware that CDC will finally begin construction on a new infectious disease laboratory. The laboratory is a long overdue replacement for work that is now being carried out in two 1960's-era facilities that are no longer adequate for handling a broad array of pathogenic microorganisms. Because of inflationary and budgetary constraints, the laboratory will be much smaller than the 148,000 square feet originally projected to meet CDC's needs. Since a significant portion of the work that will be done in the new laboratory directly relates to immunization such as influenza, polio, measles, meningococcal meningitis, rotavirus, rabies, and others, the Committee would give careful consideration to a one-time reprogramming request from funds provided for immunization activities that would allow construction of the complete laboratory project.

#### *Infectious diseases*

The Committee's recommendation includes \$112,428,000 for infectious disease activities, the same as the budget request and \$24,708,000 over the 1997 appropriation.

These activities focus on: national surveillance of infectious diseases; applied research to develop new or improved diagnoses; prevention and control strategies; working with State and local departments and private health care providers, to transfer application of infectious diseases prevention technologies; and strengthening the capability to respond to outbreaks of new or reemerging disease.

Over the past 50 years, significant progress has been made in the prevention and control of many infectious diseases. Due to a myriad of factors, today this progress has been partially reversed, resulting in the emergence of drug resistance and new and resurgent bacteria and viruses. Funds provided in fiscal year 1998 will continue the phased implementation of the CDC developed strategic plan to combat new and emerging infectious diseases.

In fiscal year 1997, the Committee requested that the CDC initiate a trans-Department public education campaign to foster more effective communication between consumers and health care providers on helicobacter pylori and its link to ulcer disease. The Committee has provided funding in fiscal year 1998 to continue the helicobacter pylori public education campaign. The Committee believes that the potential for improving the quality of life for thousands of Americans and for producing substantial cost savings warrant additional funding for this campaign to ensure that it is comprehensive and effective.

Last year, the Committee called upon CDC to provide increased support to implement a comprehensive blood safety surveillance and patient outreach effort in the hematologic diseases branch. The Committee understands that CDC, working collaboratively with the National Hemophilia Foundation, has initiated a program to address safety concerns over possible viral or pathogenic contamination and related medical risks for persons with bleeding disorders. While pleased with the initial efforts, the Committee supports further implementation of this important initiative. The Committee

also encourages the CDC to maintain the current hemophilia prevention complications and outreach activities.

The Committee notes that patients differ in their use of blood products, depending on the disease. For example, thalassemia patients rely on blood, and not blood products. As the single, largest group of chronically transfused patients, it is not uncommon for a patient to receive 30 to 35 transfusions per year. As such, they are in an excellent position to assist in improving the safety of the blood supply. The Committee encourages CDC to recognize these differences when implementing its improved blood safety plans.

The Committee is aware that in the United States there is currently no surveillance system to determine trends in chronic liver disease. This information is needed to assist the CDC, NIH, and other public health agencies to better target their research and other public health efforts. The Committee urges the CDC to give priority to developing the necessary epidemiological information regarding trends in chronic liver disease. The Committee supports the CDC efforts to establish a hepatitis and liver disease information center in fiscal year 1997 and urges its continuation and expansion in fiscal year 1998 to a level that would meet the need for public information on hepatitis and liver disease.

In May 1997 the Department of Agriculture, the Department of Health and Human Services, and the Environmental Protection Agency submitted a report to the President detailing a national food safety initiative. The report notes that many of the new foodborne pathogens that have emerged over the past decade are not easily detected and are increasingly resistant to time-tested controls. The report noted further that the relevant agencies "need to better coordinate their research efforts on the highest priority issues and work together more effectively to leverage each other's resources." Toward that end, the Committee encourages the CDC to work with the National Institutes of Health and the Agricultural Research Service to develop a research agenda on food safety to be collaboratively funded by the three agencies.

In the fiscal 1997 supplemental appropriations committee report, the Committee noted its concern that hepatitis C [HCV] is increasing in prevalence and mortality. The Committee has asked the CDC to increase disease surveillance efforts in this regard. Since then, the Committee has received information from Department of Health and Human Services on the issue of HCV and is concerned that the Department states that death certificate data is the only means of monitoring this disease and that an accurate analysis of the magnitude of the disease has been difficult to ascertain. The Committee looks forward to hearing from the CDC at its fiscal 1999 budget hearings about its efforts to improve disease surveillance in HCV.

#### *Tuberculosis elimination*

The Committee's recommendation provides \$119,236,000 for CDC's activities to prevent or control tuberculosis. This is the same as the budget request and \$58,000 below the fiscal year 1997 appropriation.

CDC provides support for the control and elimination of TB. This is accomplished in large part through awarding cooperative agree-

ments to State, territorial, and large city health departments to strengthen their control and elimination programs.

The Committee is pleased that the focus on tuberculosis control has had a positive impact on tuberculosis rates in the United States and commends the CDC and its State and local partners for the fourth year of decline in reported cases of TB. Clearly, CDC's public health intervention strategies, such as directly observed therapy have been effective in reversing the alarming increases in TB during the preceding decade. The Committee continues to be concerned about the increasing number of foreign-born TB cases, the need for improved surveillance and new diagnostic and preventive tools, such as a vaccine, and multidrug resistant TB. The Committee encourages CDC's continued efforts outlined in the national plan for the elimination of multidrug resistant tuberculosis.

The Committee notes the number of cases in the United States and globally among the foreign born. The Committee commends CDC for working with the U.S. Agency for International Development to develop a joint plan for collaboration among both agencies that outlines specific initiatives that could take place to combat TB globally, and further recommends that CDC work with the USAID to encourage the expansion of their effort beyond the three foreign countries that contribute most heavily to the cases of foreign born TB in the United States.

*Chronic and environmental disease prevention*

The Committee's recommendation includes \$203,454,000 for chronic and environmental disease prevention activities. This is \$12,415,000 over the budget request and \$36,580,000 above the 1997 appropriation.

In many instances, premature death, avoidable illness, and disability are caused by personal behavior, exposure to toxic substances, and/or natural disasters. Prevention of the occurrence and progression of chronic diseases, therefore, is based on reducing or eliminating behavioral risk factors, increasing the prevalence of health promoting practices, detecting disease early to avoid complications, assessing human risks from environmental exposures, and reducing or eliminating exposures to environmental hazards. The focus of the programs in this activity includes diabetes, cardiovascular diseases, developmental disabilities, tobacco use, comprehensive school health, teen pregnancy, birth defects, fetal alcohol syndrome, spina bifida, chronic fatigue syndrome, prostate cancer, women's health, cancer registries, oral health, skin cancer, arthritis, and epilepsy.

*Diabetes.*—The incidence of diabetes affects more than 16 million persons in America. Research has demonstrated that controlling blood sugar levels prevents diabetes-related complications. While the CDC supports local diabetes prevention and control programs in all States, additional support could further reduce the number of diabetes complications. The Committee supports this work and has included sufficient funds to enable the CDC to expand its diabetes prevention effort. Funds are provided as proposed in the request to: establish comprehensive State diabetes prevention programs; implement the public health components of the National Diabetes Education Prevention Program; develop and implement pub-

lic health surveillance systems; and conduct applied prevention research.

The Committee is particularly concerned about the high incidence of diabetes within the native American, Native Alaskan, and native Hawaiian populations. The Committee urges the CDC to conduct research and develop a targeted prevention and treatment program for these culturally unique groups with shared similarities. Funds are included to award cooperative agreements to establish core-capacity diabetes prevention research and control programs targeted to the needs of native populations, and conduct a community-based intervention project in Gallup, NM. Additionally, the Committee urges the CDC to work with native groups and community health centers during program development.

The Committee recommends that some of the included increase be used for an independent, comprehensive evaluation, in cooperation with a State health department, of the effectiveness of preventing the complications of diabetes through enhanced education services to achieve improved self-monitoring, nutrition and appropriate physical activity for rural, elderly populations.

*Hanford thyroid disease study.*—The Committee recommendation includes funds requested for the continuation of the Hanford thyroid morbidity study. The Committee notes that the U.S. Department of Energy [DOE] provided supplemental funding in fiscal years 1995–97 and recommends the CDC again work with the DOE to provide support for fiscal year 1998. These supplemental funds will enable this project to remain on schedule for completion in the fall of 1998.

*Cancer.*—Prostate cancer, and its disproportionate impact on minority males, continues to be a major concern of the Committee. More than 334,000 new cases of prostate cancer will be diagnosed in 1997, making it the most commonly diagnosed cancer. The Committee encourages the CDC to enhance its prostate cancer awareness/outreach program targeted at high-risk populations through collaborations with public and private nonprofit organizations with expertise in cancer education.

The Committee is very pleased with CDC's leadership in initiating a colorectal cancer screening public awareness campaign. Included in the bill is funding for the continuation of CDC's program which is designed to educate health care providers and consumers about colorectal cancer screening guidelines, inform the public about the availability and advisability of screening, and assess and resolve barriers to screening.

The Committee has provided sufficient funds to continue the Cancer Registries Program. The information gleaned from these registries are important for planning, implementation, and evaluation of public health practices in cancer prevention and control at the State and national levels. Funding also has been included to assist in the conversion of the Savannah River site cancer registry, formerly supported by the Department of Energy, and the South Carolina State cancer registry into a single statewide registry.

*Safe drinking water.*—The Committee recommendation includes funds above the request to enhance CDC supported evaluations and interventions regarding the health effects from inadequate provision of safe drinking water in remote arctic communities. The

Committee recommends the CDC consider building upon existing cooperative agreements with State departments of health in the region when undertaking this initiative.

*Sudden infant death syndrome.*—The Committee notes the work of the CDC, the National Institute of Child Health and Human Development, and the Health Resources and Services Administration in developing a model guideline for death scene protocol for sudden infant death syndrome. The Committee encourages continued development and publication of these guidelines.

*Birth defects.*—The Committee recognizes that birth defects are the leading cause of infant mortality in the United States and are also the leading cause of childhood disability. The Committee has provided funds for the CDC to expand its efforts to research, survey, and prevent birth defects. The Committee is especially interested in CDC's efforts to prevent spina bifida and anencephaly through the promotion of increased consumption of folic acid among women of reproductive age.

The Committee applauds the efforts of the agency in guiding the efforts of the National Skin Cancer Prevention Education Program. Through aggressive public education, this program presents a real opportunity to modify behaviors that place Americans at increased risk for developing skin cancer. The Committee is encouraged by the collaborative efforts of the National Association of Physicians for the Environment and Federal departments and agencies to implement a melanoma education initiative for Federal employees. The Committee encourages the Director to convene a working group of Federal departments and agencies to develop a plan of action in this critical area.

*Disabilities prevention.*—The Committee continues to strongly support the CDC disabilities prevention program which provides support to States and academic centers to reduce the incidence and severity of disabilities, especially developmental and secondary disabilities. The Committee recommendation includes sufficient funds to continue the expansion of research on mild mental retardation, including Project Begin.

The Committee recommendation includes sufficient funds to support a national information dissemination center to actively promote fitness opportunities and accessible facilities for participation in disability fitness and rehabilitative sport activities if in the judgement of the Director there is sufficient need for the center. The center should direct educational initiatives toward: medical and rehabilitation professionals; community programs that have traditionally offered fitness opportunities for the nondisabled populations; and the population of people with disabilities. The Committee intends that priority consideration be given to a national organization experienced in fitness and sport activities for people with disabilities.

*Tobacco.*—The Committee supports CDC's Office of Smoking and Health, and encourages continued public health prevention and cessation activities. The Committee continues to strongly support efforts to reduce youth tobacco use and is very concerned about reports of increasing use. For a number of years, the Committee has included funding within the Office for counteradvertising. The Committee believes that more must be done in this area. The budg-

et included an extensive proposal to target youth tobacco use. The Committee supports these important efforts and has included funding above the 1997 level.

*Traditional healing.*—Native Hawaiians continue to experience major health care problems, including extraordinarily high incidences of diabetes and asthma. The Committee urges CDC to work collaboratively with the community health centers serving this population to explore whether systematically utilizing indigenous Hawaiian healing expertise might effectively impact their health status. The Committee appreciates the CDC designating this as a high priority.

*Volcanic emissions.*—The Committee continues to be concerned about the public health hazard posed by volcanic emissions, in Hawaii, and, therefore, encourages CDC to work with NINR and NIEHS in determining the environmental, physical, and mental effects of volcanic emissions that might result in higher levels of cancer, asthma, and other serious illnesses. The Committee is pleased with initial efforts in this area.

*Malama.*—The Committee continues to support the concept of Malama. This innovative, culturally sensitive community partnership program addresses the prenatal needs of minorities in rural Hawaii. The Committee encourages the CDC to support the replication of this project to include teen pregnancies. The ever increasing epidemic of teen pregnancy makes the maximum utilization of effective strategies a necessity.

*Oral health.*—The Committee notes the contribution of oral health to overall health status, the significant health care expenditures directed to oral conditions that are largely preventable, and the importance of strong scientific leadership on oral health issues. The Committee recommendation includes funds to expand the Division of Oral Health in fiscal year 1998.

*Cardiovascular diseases.*—The Committee remains concerned that cardiovascular diseases, including heart disease and stroke, remain the No. 1 killer in the United States. The Committee has included funding to expand its heart disease and health promotion activities and assist States in the prevention of risk factors associated with cardiovascular diseases, such as, tobacco use, physical inactivity, and poor nutrition.

*Chronic fatigue and immune dysfunction syndrome [CFIDS].*—The Committee understands that the CDC has taken steps to identify adolescents and children with CFIDS and encourages the CDC to continue, and expand where appropriate, these investigations on populations not formerly recognized as being affected by CFIDS. The Committee has received reports that growth in CDC's CFIDS research program has stalled and promising research is not being published in a timely manner. The Committee requests that the CDC be prepared to report during the fiscal year 1999 budget hearings concerning its allocation of funds to CFIDS, specifically detailing all program and administrative expenses that are charged to these activities.

*Limb loss.*—The Committee recommendation includes sufficient funds for the CDC to continue support for development of a National Limb Loss Information Center.

*Asthma.*—The Committee recognizes that asthma is estimated to affect between 14 and 15 million people, and is the most common chronic disease of childhood—affecting 5 million children under the age of 18. In addition, the Committee is aware that there have been significant scientific advances in the management of asthma and that there are many promising environmental interventions that have been shown to reduce the frequency and severity of asthma exacerbations. In order to assure that these breakthroughs are translated into effective actions that improve the public's health, the Committee encourages the CDC to begin implementation of a program to prevent the morbidity and mortality associated with asthma.

In this regard, the Committee further encourages the National Center for Chronic Disease Prevention and Health Promotion, and the National Center for Environmental Health, to consider undertaking a collaborative effort to foster more effective communication between physicians and consumers on asthma and an effective means of controlling and preventing the disease.

*Iron overload.*—Hereditary hemochromatosis is one of the most common genetic disorders. By middle age, excess iron accumulation often causes inflammation and tissue damage, and may cause arthritis, cirrhosis, diabetes, impotence, and heart failure. The Committee has provided funds for the CDC to further study and implement strategies for the prevention of iron overload diseases.

*Fetal alcohol syndrome.*—Researchers at the University of New Mexico have been engaged with the CDC for the past 4½ years in a project to establish the prevalence and characteristics of fetal alcohol syndrome in the population of New Mexico. This project will provide extensive information from interviews with mothers of these children to establish risk factors for FAS which then will be used to design prevention programs. The Committee encourages the CDC to support an extension of this important project for another year.

The Committee is aware of the CDC's work in assisting communities in developing strategies to prevent out-of-wedlock teen pregnancies. The city of Newark ranks among the highest in the Nation in teen pregnancy, low birthweight babies, and infant mortality. The Committee is aware of the city's bright futures initiative to combat teen pregnancy and encourages the Director to give appropriate consideration to supporting this program.

#### *Lead poisoning*

The Committee recommendation includes \$38,200,000 for lead poisoning prevention activities, \$19,000 above the 1997 appropriation and \$46,000 above the President's request.

Since its inception in fiscal year 1990, the CDC program has expanded to about 40 project areas that encompass States, local areas, and numerous communities and screens an estimated 1,750,000 children annually.

CDC is to be commended for its support of the continued development of more effective and portable blood lead hand screening tools, and for supporting the development of screening kits for professionals to use in the field that will allow an almost immediate reading, making possible immediate intervention and treatment.

The Committee understands that a prototype device has been developed and is being considered by the FDA.

*Breast and cervical cancer mortality prevention*

The Committee's recommendation includes \$141,897,000 for breast and cervical cancer mortality prevention activities, the same as the request and \$2,238,000 more than the 1997 appropriation.

While some progress has been made recently in reducing deaths from breast cancer, many women who develop these cancers and who are at highest risk for premature death from cancers of the breast and cervix are minorities and/or the economically disadvantaged. These populations of women still have not showed reductions in deaths from breast cancer, in large measure due to not having access to preventive services such as screening mammograms and pap smears.

In fiscal year 1998, 65 States, territories, and American Indian tribal organizations will receive resources for comprehensive programs. Funds provided for fiscal year 1998 will help improve access for all women to preventive services, and assist State programs in: informing women of the value of early detection; educating physicians about recommended screening guidelines; ensuring the quality of screening mammography and pap tests; and monitoring program effectiveness through appropriate surveillance and evaluation activities.

The Committee commends the CDC for utilizing funding for the breast and cervical screening program to continue to build programs nationwide, and to develop programs consistently from State to State that include minimum standards for participating States. Continued priority for breast cancer screening should be given to postmenopausal, low-income, underinsured and uninsured women, and those at high risk of breast cancer. The Committee requests that the CDC give consideration to expanding the Wisewoman Program from the current three States to a total of eight States.

*Injury control*

The recommendation by the Committee includes \$45,063,000 for injury control efforts. This is \$3,970,000 less than the President's request and \$1,881,000 more than the fiscal year 1997 appropriation. The recommendation includes an additional \$6,000,000 from the violent crime reduction trust fund for domestic violence activities authorized by the Violence Against Women Act. This is the same level as the 1997 appropriation. The President's budget had requested the full \$6,000,000 under general purpose appropriations. These funds will continue to support community program demonstrations on domestic violence.

The Center is the lead Federal agency for injury prevention and control. Programs are designed to prevent premature death and disability and reduce human suffering and medical costs caused by: fires and burns; poisoning; drowning; violence; lack of bicycle helmets, seatbelts, and baby seats; and other injuries. The national injury control program encompasses nonoccupational injury and applied research in acute care and rehabilitation of the injured. Funds are utilized both for intramural and extramural research as well as for assisting State and local health agencies in implement-

ing injury prevention programs. The Committee recognizes the important role that CDC provides as a focal point for all Federal injury control activities.

The Committee supports the extramural research program of the Center which supports research aimed at preventing and/or mitigating the effects of injuries. The program supports research centers, individual investigator-initiated research projects, and the training of new workers in the injury control field. The Committee remains supportive of acute care training demonstrations at existing university-based research centers and encourages CDC to make acute care training demonstrations a priority. In addition, the Committee is pleased with the ICRC's work, especially in regards to acute trauma care.

Each year, approximately 300 bicyclists 17 years and younger are fatally injured, and over 150,000 are treated in hospital emergency rooms for bicycle-related head injuries. Research has shown that 85 percent of these head injuries can be prevented by the use of helmets. Despite this fact, and the successful effort in many communities to promote bicycle helmet usage, it is estimated that less than 15 percent of American children wear them. The Committee encourages the Center to organize a national campaign to promote bicycle helmet usage. Such efforts should involve private and public partners, and include organizations interested in child health, safety, brain injury prevention, and cycling.

Sufficient funds have been provided to enable the Center to support effective prevention programs for traumatic brain injury consistent with the Traumatic Brain Injury Act.

Suicide and suicidal behavior is a major public health risk, particularly for elderly Americans. The Committee recommendation includes funds above the request for the Center to conduct evaluations of interventions focused on the prevention of suicide among the elderly.

The Committee recognizes CDC's contribution to national efforts to reduce violence and prevent domestic violence. With over 1 million children a year the victims of abuse and neglect, the Committee recommends the Center give consideration to extending its focus on violence by supporting an initiative directed to the prevention of physical and emotional injuries associated with child maltreatment and neglect. The Committee encourages the NCIPC to collaborate with relevant national organizations and with academic institutions, including schools of social work, in the development and implementation of this initiative.

The Committee recommendation maintains the proviso included in the House bill prohibiting the use of funds to advocate or promote gun control.

The recommendation includes funding to establish a developmental center for the prevention of accidental injury among older Americans. In addition, sufficient funding is provided to initiate a developmental injury center for the prevention of suicide. The Committee recommends that in locating this center, the Director give consideration to an area with high rates of suicide.

The Committee is pleased with the attention CDC has given to the national program for playground safety. The heightened public interest and awareness that have resulted from the development

and dissemination of the national action plan for the prevention of playground injuries is encouraging. The Committee recommends the CDC continue to provide sufficient support to implement the plan in order to reduce the more than 200,000 injuries reported annually.

Emerging research is telling us that child sexual abuse represents a critical point on the intergenerational continuum of intimate partner violence. This research suggests that child sexual abuse is a risk factor in males for committing sexual offenses in adolescence and adulthood. Women who are survivors of child sexual abuse are at greater risk of sexual assault victimization in adulthood. To address this important public health problem with the goal of breaking the cycle of violence, the Committee requests that the CDC evaluate the effectiveness of current public health prevention efforts directed at perpetrators and to educate people who may know a perpetrator to confront the abusive behavior.

#### *Occupational safety and health*

The Committee's recommendation includes \$148,463,000 for the National Institute for Occupational Safety and Health [NIOSH], the same as the budget request and \$7,123,000 more than the 1997 appropriation.

The National Institute for Occupational Safety and Health [NIOSH] in CDC is charged with conducting a national program of occupational safety and health research and information dissemination to ensure safe and healthful working conditions for American working men and women. Occupational injuries occur at twice the rate of injuries in the home or in public places. Severe occupational trauma is second only to motor vehicle incidents as a cause of unintentional death in the United States. The majority of all of these deaths and injuries are preventable.

To prevent work-related hazards, NIOSH conducts applied research with a corps of occupational safety and health professionals operating in multidisciplinary teams comprised of engineers, epidemiologists, industrial hygienists, physicians, and toxicologists. Intramural efforts are complemented by grants, contracts, and cooperative agreements to form a comprehensive and integrated program consisting of four components: Identification of hazards; research on causes and prevention of occupational injuries and illnesses, dissemination of research findings and recommendations; and training of those involved in preventing disease and injury at work.

Funds have been provided as requested for intramural research on work-related diseases at the new state-of-the-art laboratory in Morgantown, WV, and to fully staff the laboratory research program. In addition, funds have been provided as proposed in the request to conduct firefighter fatality assessment and control investigations.

The Committee recommends that NIOSH give consideration to increasing funding for a Northwest fishing safety and health initiative. Such an initiative would permit cooperative efforts among government and academia and the fishing industry to reduce lives lost in this high hazard occupation.

Sufficient funding is provided to continue the farm health and safety initiative. This important initiative, begun in 1990, has a primary focus of reducing the incidence of fatal and nonfatal injuries and occupational diseases among the millions of agricultural workers and their families in the United States. The Committee is particularly pleased with the research being undertaken by the agricultural research centers and expects that this program will continue at no less than the level of funding provided in fiscal year 1997.

After more than 20 years of increasing rates of injuries in the building and construction trades industry, the Committee was very pleased to note from the Bureau of Labor Statistics that the rate of injuries decreased by 28 percent in 1993. The Committee is impressed with the progress that has been made on construction safety and health during the last 5 years, and has encourages NIOSH to maintain its level of effort in this area.

Concerns continue to be brought to the Committee regarding the design and review of a multiyear study, jointly funded by NIOSH and the National Cancer Institute, to investigate the health effects of diesel fumes on workers in underground noncarbon mines. The Committee requests that NIOSH submit a report by December 1, 1997, detailing the following: (1) the extent to which time has been given for public comment on the draft study protocols; (2) the extent to which the study protocols have undergone peer review; (3) the makeup of the review group and the extent to which labor and industry were represented; (4) the extent to which modifications have been made to the study protocols which resulted from recommendations from the review process and/or public comment; (5) whether any feasibility study has demonstrated the effectiveness of the study equipment, protocol, and design, particularly with regard to the accuracy of historical diesel exposure assessment; and (6) the extent to which data will be shared with participating organizations as it is collected.

The Committee commends the work of the university based educational resource centers and the smaller single discipline training project grants. The Committee is supportive of expanding the research and research training activities of the ERC's and TPG's.

#### *Mine safety and health*

The recommendation includes \$40,000,000 for the former U.S. Bureau of Mines mine safety and health research activities. In fiscal year 1996 these activities were transferred from the U.S. Bureau of Mines to NIOSH. The recommendation is \$8,000,000 above the budget request and \$8,087,000 above the 1997 appropriation. The former Bureau of Mines research activities address a broad spectrum of issues which target worker safety, disaster prevention, and health in the mining industry.

While NIOSH has had responsibility for occupational safety and health research aimed at industry in general, the Committee understands that many mine safety and health research needs are either unique to mining or require mining-specific emphasis. The Committee, therefore, expects the NIOSH to continue to preserve the integrity of the mine safety and health research unit of the Bu-

reau so that the collective experience and expertise of that group can be maintained within NIOSH.

The additional funds have been provided restore the mine safety and health program in fiscal year 1998 to a level comparable to levels prior to the transfer of the program. Historical tables show that comparable programs received approximately \$40,000,000 in fiscal year 1995. With the transfer to NIOSH, both former Bureau of Mines staff and facilities need to be prepared for the new work that will be undertaken to better protect the health and safety of mine workers.

#### *Epidemic services*

The Committee's recommendation includes \$69,322,000 for epidemic services, the same as the request and \$286,000 less than the 1997 appropriation.

The objectives of the epidemic services activity are to: provide for the investigation, prevention, or control of epidemics, develop, operate, and maintain surveillance systems, analyze data, and respond to public health problems when indicated; train public health epidemiologists [EIS]; carryout quarantine regulations; reduce the importation of disease from developing countries; publish the morbidity and mortality weekly report; develop, coordinate, and provide efficacious, effective, and economic prevention strategies; and assist in the improvement of State infrastructure.

#### *Health statistics*

Included in the recommendation of the Committee is \$18,033,000 in Federal funds for health statistics. Also included is \$70,063,000 to be provided from PHS 1 percent evaluation funds. This brings the total available to the CDC for health statistics to \$88,096,000. This is \$930,000 less than the request and \$2,084,000 more than the fiscal year 1997 level.

CDC's National Center for Health Statistics [NCHS] is the Nation's principal health statistics agency, whose mission is to provide statistical information that will guide actions and policies to improve the health of the American people.

The increase provided is for the national health and nutrition examination survey [NHANES]. This is the same as the request and will provide for full funding of this important component of the Nation's health information strategy. When fully implemented, NHANES provides unique information from direct physical examinations, biochemical measures, interviews, and nutritional analysis from a large, representative sample of persons. This survey is the only national source of objectively measured health status data, and is essential to interpreting information from other survey components.

The Committee has become aware of the prevalence of sarcoidosis as a public health problem. Overall, sarcoidosis is estimated to occur in 35.5 per 100,000 U.S. blacks and 10.9 per 100,000 U.S. whites. The Committee recommends that NCHS give consideration to making sarcoidosis a reportable disease, by establishing a national sarcoidosis patient registry, in collaboration with the National Heart, Lung and Blood Institute, the National Institute of

Allergy and Infectious Disease, and the Sarcoidosis National Network.

*Human immunodeficiency virus*

The Committee recommendation includes \$646,790,000 for HIV/AIDS activities, \$30,000,000 more than the fiscal year 1997 appropriation and \$12,524,000 more than the request.

The Committee continues to support CDC's strategy to develop community planning to direct resources to where the most critical needs are.

The Committee understands that the Institute of Medicine recently released a report that outlined the connection between non-HIV STD's and an increased risk of transmission of HIV. The report estimated that successfully treating 100 cases of syphilis among high-risk groups for STD's would prevent up to 1,200 HIV infections over a 10-year-period. The Committee concurs with the view of the IOM report that collaboration between the STD and HIV divisions of the CDC is critical and encourages the Director to improve the collaborative interventions and initiatives between these two divisions.

The Committee is very supportive of the hemophilia consumer-based patient involvement programs that have been successful in HIV/AIDS risk reduction and in the prevention of the complications of hemophilia. The Committee has included funds to maintain and strengthen hemophilia and other hematologic program activities focused on preventing and reducing the crippling, debilitating complications, and death caused by such bleeding disorders.

*Building and facilities*

The Committee recommendation includes \$23,007,000 for repair and renovation of CDC facilities, the same as the request and \$7,546,000 below the fiscal year 1997 appropriation. Funds are provided for the most needed repair and improvement projects as facilities age and programs change.

*Program management*

For program management, the Committee recommends \$2,465,000, the same as the President's request and \$98,000 below the fiscal year 1997 appropriation.

The "Program management" account primarily supports the activities of the Office of the Director of the CDC. The vast majority of administrative costs are captured throughout the program accounts within the CDC.

The recommendation includes bill language providing the Director with authority to transfer funds available from the sale of surplus vaccine from the vaccine stockpile to other activities within the jurisdiction of the Centers for Disease Control and Prevention. In the event the Director exercises this transfer authority, the Committee is to be notified immediately.

The Committee continues to be pleased with CDC's program activity and commitment to improving the health status of minority and disadvantaged individuals, and urges continuation of innovative programs, such as the coordination of preventive care with substance abuse treatment centers.

The Committee understands that under the Clinical Laboratory Improvement Act [CLIA], the FDA was given the responsibility to categorize the complexity of new invitro diagnostic [IVD] devices. However, the FDA failed to undertake this task and the responsibility for regulating the complexity of these IVD products is being carried out by the CDC. At the same time, FDA continues to conduct extensive evaluations of these IVD devices before clearing them for market under the FDCA, including reviewing their instructions for use. The Committee concurs with the concern expressed by the authorizing committee that this dual responsibility has resulted in a process that causes confusion, unnecessary conflict, and duplication of effort. This Committee encourages the CDC to review with the FDA the prospect of returning to the FDA the role of categorizing the complexity evaluations under the CLIA and be prepared to report on the review during the fiscal year 1999 hearings.

Local health departments are the first line of defense in protecting the public health. The Committee is concerned that many local health departments may lack basic and necessary technologies to carry out their mission. The Committee requests the Director of the CDC to review the technology and training needs of local health departments and report to the Committee on the findings prior to the fiscal year 1999 budget hearings. This report should include recommendations on how to address existing unmet needs.

The Committee has received concerns from States regarding its policy for tapping program lines for central administrative activities. The Committee requests that the Director provide to the Committee a report on the amount of administrative funding that will be tapped from each program line before the end of the first quarter. The Committee requests that any subsequent change to program administrative taps be treated as a reprogramming request.

#### *Violent crime reduction trust fund*

The Committee recommendation includes \$51,000,000 from the violent crime reduction trust fund for activities authorized by the Violence Against Women Act in the crime bill included is \$45,000,000 to augment rape prevention services supported by the States through the preventive health and health services block grant, and \$6,000,000 for grants to public and private nonprofit organizations to support community programs to prevent domestic violence.

The funds for rape prevention and services total \$10,000,000 above the 1997 appropriation and will be used by States to expand support for rape crisis centers and State coalitions, to support rape crisis hotlines, victim counseling, professional training of police officers and investigators, and education programs in colleges and secondary schools.

The Committee is concerned with the distribution of funds for rape prevention and education that are provided with funds from the violent crime reduction trust fund and sent to the States through the preventative health and health services block grant. States should comply with the statutory language and congressional recommendations accompanying the use of these funds. Funds should be used to supplement rape crisis centers and State

sexual assault coalition's rape prevention and education efforts and not to supplant funds from other sources.

#### NATIONAL INSTITUTES OF HEALTH

The Federal investment in biomedical research at the National Institutes of Health [NIH] is regarded by the Committee as one of its highest priorities. Few activities of the Government have the potential to improve the quality of life for our Nation's citizenry and reduce the costs of health care than medical research. Earlier this year, the Senate endorsed 98 to 0, a substantial expansion of funding for the National Institutes of Health. The Committee recommendation reflects this commitment to medical research while also maintaining support for other high priority primary and preventive health programs. The fiscal year 1998 recommendation for the 24 Institutes, Centers, and Divisions which comprise the National Institutes of Health totals \$13,692,844,000. The recommendation is \$952,001,000 over the 1997 level and \$614,641,000 over the budget request.

#### NATIONAL CANCER INSTITUTE

Appropriations, 1997 .....	\$2,254,951,000
Budget estimate, 1998 .....	2,441,738,000
Committee recommendation .....	2,558,377,000

The Committee recommends an appropriation of \$2,558,377,000 for the National Cancer Institute [NCI]. This is \$116,639,000 more than the budget request and \$177,228,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NCI conducts and supports basic and applied cancer research in prevention, early detection, diagnosis, treatment, and rehabilitation. NCI provides training support for research scientists, clinicians, and educators, and maintains a national network of cancer centers, clinical cooperative groups, community clinical oncology programs, cancer prevention and control initiatives, and outreach programs to rapidly translate basic research findings into clinical practice.

The Committee has held a number of hearings this year examining the hopes, dreams, and frustrations of patients and scientists on the frontlines in our war against cancer. Through these hearings, the Committee has developed a greater understanding of the programs, priorities and needs of our National Cancer Program. It is abundantly clear that the hope of ameliorating the societal burden of cancer lies in the diligent pursuit of a comprehensive cancer research program to improve cancer prevention, early detection, treatment, and survival. The Committee recognizes that one in two males, and one in three females will develop cancer over their lifetime. This disease poses a major and catastrophic health threat to the American public. The costs, both human and economic, of cancer in this country are catastrophic. The national investment in cancer research remains the key to bringing down spiraling health care costs, as treatment, cures, and prevention remain much cheaper than chronic and catastrophic diseases, like cancer. The Commit-

tee continues to strongly support cancer research as a national priority.

*Cancer coordination.*—The Committee is pleased that NCI continues to recognize its leadership role as coordinator of the National Cancer Program. As facilitator of the Nation's fight against cancer, the Committee encourages NCI to continue to work in collaboration with private/voluntary sector organizations, the CDC, and other Federal agencies to address the coordination challenges outlined in the National Cancer Advisory Board's report entitled: "Cancer at a Crossroads".

*Breast cancer.*—While recent data continues to show a drop in deaths from breast cancer, still this disease is expected to strike over 180,000 women in 1997. The Committee continues to believe that an intensive research program on breast cancer should be among the top priorities of the NCI and the NIH. More research is needed to better understand the underlying mechanisms of this disease, and to improve the ability to detect, diagnose, and treat breast cancer. Research also is needed to develop new prevention strategies with respect to this form of cancer. The Committee urges the NCI to strengthen its budgetary commitment to breast cancer research.

The recommendations include sufficient funds to support the activities of the national action plan on breast cancer which the Committee understands will continue to be implemented by the PHS Office on Women's Health. This important public/private partnership, which catalyzes breast cancer activities across the Federal Government and the private sector, has accomplished a great deal in the fight against breast cancer.

*Digital mammography.*—The Committee is aware of promising technology to improve the early detection of breast cancer involving digital mammography. The Committee understands further that a number of small-scale trials are underway and encourages the Institute to give strong consideration to supporting a large-scale trial on this technology should these early trials show improved efficacy.

*Ataxia telangiectasia.*—Ataxia telangiectasia is an inherited disorder that causes progressive loss of muscle control, immune deficiency, a strikingly high rate of cancer, and eventually death in children. With support from NIH, research has recently shown that the ATM protein missing in A-T children interacts with the well-known tumor suppressor gene p53 and plays a roll in DNA repair, cell-cycle control, and cellular aging. The Committee considers A-T research a high priority, and it is an outstanding example of how research on a rare disorder may ultimately benefit the public at large. In particular, the Committee strongly encourages NCI to sponsor workshops and participate at conferences on A-T aimed at sharing unpublished data, generating new research strategies, minimizing duplication of research efforts, and encouraging new collaborations.

*Waldenstrom's macroglobulinemia.*—The Committee is concerned about the lack of information and treatments available for this rare disease which is particularly debilitating and costly to adults under the age of 50. The Committee and urges the Institute to intensify its research efforts with regard to Waldenstrom's macroglobulinemia.

*Neurofibromatosis.*—Advances continue to be made in research on neurofibromatosis [NF]. The Committee encourages the Institute to expand its NF research portfolio and support novel approaches in clinical development of NF research and therapies, including the use of: requests for applications, as appropriate; program announcements; the national cooperative drug discovery group program; and small business innovative research grants. The Committee recognizes that progress in developing new technologies and enhancing our understanding of the fundamental process of cancer will benefit specific diseases such as NF. The Committee requests that the Institute be prepared to report on the status of the NF research program, including progress in implementing the recommendations in this and last year's Committee reports, at its hearing on the fiscal 1999 budget.

*Nutrition science.*—The Committee is encouraged by the continued emphasis placed on nutrition research by the NCI. The Committee is especially interested in the clinical aspects of nutrition research and would urge the Institute to expand support for clinical nutrition units and similar programs which can serve to integrate the findings of basic science with improved patient care.

*Ovarian cancer.*—The Committee understands that more than 70 percent of women with ovarian cancer are diagnosed by their physicians for the first time when the disease is in its advanced stages. As survival rates for women with ovarian cancer increase dramatically if the cancer is found in its earliest stages, which appears to be due to an absence of reliable diagnostics to detect it, in part because there are only vague symptoms in the early stages of the disease. The Committee encourages the NCI to support expanded research into the early detection, diagnosis, and staging of ovarian cancer.

*Prostate cancer.*—The Committee continues to be concerned about the increasing rates of prostate cancer, particularly among African-American males. The Committee is encouraged by NCI's investment in the prostate component within the prostate, lung, colon, and ovary screening trial and the formation of a prostate cancer progress review group. In addition, the Committee applauds NCI's research collaborations with the Department of Defense and Howard University aimed at determining why African-American males are at greater risk. The Committee urges NCI to continue to expand and strengthen its prostate cancer research program.

*Adolescent tobacco use.*—The Committee is pleased that NCI is seeking to increase the number of applications for prevention and cessation of tobacco use by children and youth. While rates of tobacco use among adults have been reduced, controlling tobacco use among U.S. youth has not been successful. The Committee understands that the NCI is seeking innovative behavioral proposals to target interventions that prevent use of tobacco, as well as community-based or health services research aimed at young people. The Committee is particularly interested to learn how lessons can be learned from youth populations with low use of tobacco, that is, African-American youth, and applied to populations with higher use.

*Cancer in minorities.*—Recent statistics continue to document the high incidence of cancer among the native Hawaiian population. When compared with other ethnic and racial groups, native Hawai-

ians have among the highest incidence of the most common types of cancer such as breast, colon, and lung cancer. The Committee encourages continued research emphasis in this priority area and expresses its gratitude for the work the NCI has done with the Hawaii Cancer Center.

*Diethylstilbestrol.*—The Committee continues to strongly support increased efforts to study and educate the public and health professionals about the impact of exposure to the synthetic hormone diethylstilbestrol [DES]. The NCI and other Institutes, along with the Office of Women's Health have developed a plan for expanded research activities in this area. The Committee encourages the Institute to carry out this plan. In addition, educational materials for consumers and health professionals have been developed as a result of a demonstration project funded by the Committee in previous years. The Committee also encourages the NCI, in conjunction with HRSA, CDC, and the Office of Women's Health, to disseminate these materials nationally and to undertake other educational efforts targeting consumers and health professionals on a national basis. The Committee expects NCI and these other agencies to continue to consult with organizations representing individuals impacted by DES as they carry out DES research and education efforts.

*Brain tumors.*—The Committee continues to place a high priority on brain tumor research. The Committee strongly supports the approach of using centers of excellence to conduct basic, translational, and clinical research to determine the cause, mechanisms of development, and better methods of treatment and prevention of primary and secondary brain tumors.

*Translational research.*—Translational clinical research is the bridge between the laboratory and new methods of diagnosis, treatment, and prevention and is, thus, essential to progress against cancer. This research has been responsible for some of the most stunning clinical successes of this century, including determining the molecular mechanisms of colon cancer, the engineering of effective AIDS treatment, and the new treatments to reduce the side effects of chemotherapy. Translational research is critical to fully develop the major advances made by basic scientists in areas such as molecular genetics, regulatory proteins, and cellular signaling into new detection technologies, targeted treatments, and prevention strategies for cancer patients. The Committee urges the Institute to strengthen its efforts in this area in an effort to rapidly translate our research progress.

#### NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Appropriations, 1997 .....	\$1,351,440,000
Budget estimate, 1998 .....	1,467,189,000
Committee recommendation .....	1,531,898,000

The Committee recommendation includes \$1,531,898,000 for the National Heart, Lung, and Blood Institute [NHLBI]. This is \$64,709,000 more than the budget request and \$99,369,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The National Heart, Lung, and Blood Institute provides leadership for a national research program in diseases of the heart, blood vessels, lungs, and blood, in transfusion medicine, and in sleep disorders through support of innovative basic, clinical, population-based, and health education research.

*Asthma.*—The NHLBI continues to provide leadership in asthma through a comprehensive program that spans from basic research to health education and prevention initiatives. The Committee is particularly pleased to learn about the implementation of special projects on the role of infection in the development of asthma in very young children and the plans to continue research on the genetics of asthma. Important efforts are underway by the NHLBI to understand the causes of asthma, and possible means for prevention, clinical research programs to study the best approach to asthma management, and design of new, more effective medications. For this reason, the Committee encourages the NHLBI to continue its support of the Childhood Asthma Management Program to follow over 1,000 children with asthma (with over one-third of the participants Hispanics or African-American asthmatics) and the Asthma Clinical Research Network. The NHLBI is to be congratulated on its coordination of asthma research and education programs throughout the United States under its National Asthma Education and Prevention Program, as well as its international efforts through the global initiative for asthma project conducted in collaboration with the World Health Organization.

The Committee urges that NHLBI continue its efforts through the NAEPP to make community education a priority, especially directed at special populations that experience high morbidity and mortality from asthma.

*National Center on Sleep Disorders Research.*—The Committee is pleased with progress by the National Center on Sleep Disorders Research in collaborating with other NIH Institutes to implement recommendations from the national sleep disorders research plan. The Committee encourages the NIH Director to take an active role in facilitating future collaborations. The Committee also urges NHLBI to follow up on recent scientific publications calling into question the public health significance of sleep apnea and develop a program to address this important problem. Growing concern has been expressed about breathing disorders during sleep in children. The Committee recommends that special attention be given to this area of sleep research. The Committee is pleased with the materials produced in the sleep education program and urges the NHLBI to expand its public and professional sleep education activities, with special attention to targeting messages at youth, high school, and college students.

*Pulmonary centers of research.*—An impressive array of scientific opportunities in the areas of fibrotic lung disease, asthma, and lung development can be expected to lead to translation of basic science into clinical applications. The Committee recognizes that the NHLBI has made significant contributions to clinical research through its pulmonary related specialized centers of research programs.

*Sarcoidosis.*—Sarcoidosis is an inflammatory, noninfectious multisystem disease of unknown cause that can lead to fibrosis, or

scarring. Although sarcoidosis has been recognized for over 100 years, information on its incidence, prevalence, risk factors, and natural history remains limited. Geographic and racial variations in the occurrence of sarcoidosis suggest that it may be caused by environmental factors or a combination of environmental factors and a susceptible host. The Committee, therefore, encourages the Institute to explore environmental and genetic causes of sarcoidosis as an essential step toward identifying risk factors and improving treatment and prevention of the disease.

*Cooley's anemia.*—A special emphasis panel convened by NHLBI in September 1996 strongly recommended the establishment of a network of collaborative clinical centers to study the effectiveness of new clinical interventions for Cooley's anemia. Because no single clinical center has enough patients to undertake a meaningful clinical study, the network would be the most cost-effective plan to undertake this translational research. Such a network could serve as a model for other diseases with relatively small populations. The Committee looks forward to learning from NHLBI what progress has been made on this network prior to next year's hearings.

*Outreach and public education.*—The success of NIH and the impact of its research initiatives are dependent to a degree on the translation of that research into clinical practice. The Committee commends NHLBI for its outreach and public education activities. The Committee encourages NHLBI to expand upon its efforts in this area and to continue to provide exemplary outreach and public education services to its constituencies and the general public.

*Cardiovascular diseases.*—The Committee recognizes the seriousness of heart attack, stroke, and other cardiovascular diseases and is concerned that cardiovascular diseases have remained America's No. 1 killer of men and women since 1919 and a major cause of disability. The Committee urges the Institute to place the highest priority on cardiovascular research and expand, within the funds provided, the extramural Heart Program to support existing programs and invest in promising research initiatives.

*Origins of atherosclerosis.*—Atherosclerosis (hardening of the arteries), causing blockage of blood vessels, underlies much of heart disease and stroke. The Committee encourages the Institute to expand and initiate research that could lead to the identification and treatment of high risk individuals before heart attack and stroke strikes and supports expanded research on the role of inflammation of the walls of blood vessels in development of these killer diseases.

*Congestive heart failure.*—The result of a damaged heart muscle from diseases such as heart attack, high blood pressure and congenital heart defects and congestive heart failure, affects about 5 million Americans. Current treatment only slows the course of the underlying diseases, so the Committee recommends that the Institute support an intensified research program to test promising treatments to restore heart function and to study heart muscle cells that may lead to muscle cell regeneration and transformation of heart scar tissue into functioning cells. The Institute is also encouraged to study the genetic causes of cardiomyopathy, a heart muscle disease afflicting 50,000 Americans who are also prone to congestive heart failure.

*Congenital heart defects.*—Congenital heart deformities remain America's most common birth defect. They are the major cause of birth defect-related infant deaths and an important cause of childhood disability that progresses into adulthood. The Committee encourages expansion of research that uses new genetic tools to identify genes that control heart development and are responsible for these defects. Such genetic research may ultimately lead to effective prevention and/or treatment of these defects.

*A healthful lifestyle.*—Success in translating awareness of heart attack, stroke and other cardiovascular disease risk factors into behavior modification has been limited. The Committee encourages the Institute to expand and initiate research into behavior modification and long-term compliance. Learning how to ensure adherence to programs known to be effective if followed can greatly reduce the occurrence of heart disease and stroke.

*Hemophilia.*—The Committee fully supports the need to maximize funding for the hemophilia research program at NHLBI, especially in seeking a cure for this severe bleeding disorder. Further, the Committee remains deeply concerned that little progress has been made in addressing the vulnerability of the hemophilia community to the blood contaminants including Creutzfeldt-Jakob disease [CJD] in the blood supply. The Committee urges the NHLBI to develop a research program, in collaboration with CDC, to ensure maximum safety and integrity of the U.S. blood supply by end of this year.

*Transfusion medicine.*—The Committee is pleased that the NHLBI has created a network of umbilical cord blood banks and transplant centers and encourages the Institute to continue to pursue an aggressive research program to improve blood safety and further the field of transfusion medicine.

*Alternative research resources.*—The Committee supports the expansion of existing alternative resources to the use of animals, particularly through ensuring increased access by researchers to human tissues and organs for research purposes. The Committee encourages the Director to give consideration to participating in a multi-Institute initiative geared to increase support in this area and respond to the research community's growing need for human tissues and organs.

*Acute respiratory distress syndrome [ARDS].*—ARDS is a devastating form of respiratory failure, remains a significant health threat for many seriously ill people for which there is no effective treatment. The ARDS Network, consisting of 10 critical care treatment groups, has been established by the NHLBI to identify effective therapies through prospective, randomized multicentered clinical trials. The Committee is pleased to learn that the ARDS network will be evaluating a promising investigational toxicity modifier in the ARDS network. This product shows promise in preclinical investigations and may offer the first real innovation in the management of this disease over the past decade. The Committee believes that these types of innovative collaborations, supported by the public and private sectors, will serve to rapidly translate research progress from discovery to patients. The Committee looks forward to hearing about this important initiative at next year's hearing.

*Minority health.*—The Committee has been pleased with the commitment of the NHLBI with respect to initiatives to study health issues disproportionately impacting African-Americans and other minorities. The Committee commends NHLBI for its leadership in supporting research and training programs at minority health professions institutions.

NATIONAL INSTITUTE OF DENTAL RESEARCH

Appropriations, 1997 .....	\$195,825,000
Budget estimate, 1998 .....	202,831,000
Committee recommendation .....	211,611,000

The Committee recommendation includes \$211,611,000 for the National Institute of Dental Research [NIDR]. This is \$8,780,000 more than the budget request and \$15,786,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NIDR supports research and research training to improve the oral health of the American people. The Institute emphasizes ways to prevent disease in high-risk groups, including the elderly, minority populations, and people with medical conditions and medications that compromise oral health. The research agenda includes studies of craniofacial genes and birth defects; bone and joint diseases; AIDS, other infections, and immunity; oral cancer; chronic pain; epidemiology; biomaterials; and diagnostic systems.

*Bone diseases.*—The Committee is pleased with the growth of research on osteoporosis, Paget's disease and osteogenesis imperfecta and encourages the Institute to consider using a portion of the increased funding for fiscal year 1998 to further expand and intensify its research programs on bone diseases.

*Temporomandibular joint disorders [TMJ].*—The Committee remains strongly interested in research on temporomandibular joint disorders [TMJ]. Last year, NIDR convened a Technology Assessment Conference on the Management of TMJ. The Committee urges the Institute to expand its efforts to implement this agenda. The Committee also asks NIDR to form an inter-institute committee along with representatives of the Office of Women's Health, AHCPR, and CDC to develop a short- and long-term research agenda. Further, a study of TMJ patients who are suffering craniofacial and systemic problems as the results of implants is recommended.

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Appropriations, 1997 .....	\$815,607,000
Budget estimate, 1998 .....	833,802,000
Committee recommendation .....	883,321,000

The Committee recommends an appropriation of \$883,321,000 for the National Institute of Diabetes and Digestive and Kidney Diseases [NIDDK]. This is \$49,519,000 more than the administration's request and \$67,714,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NIDDK provides leadership for a national program in three major disease categories: diabetes, endocrinology,

and metabolic diseases; digestive diseases and nutrition; and kidney, urologic, and hematologic diseases. The NIDDK plans, conducts, fosters, and supports a coordinated program of fundamental and clinical research and demonstration projects relating to the causes, prevention, diagnosis, and treatment of diseases within these categories. The Institute also supports efforts to transfer the knowledge gained from its research program to health professionals, patients, and the general public.

*Polycystic kidney disease.*—Polycystic kidney disease [PKD] is the most common life-threatening genetic disease, affecting 600,000 Americans. The Committee understands that scientists worldwide agree that PKD science is mature and that discoveries leading to a treatment and ultimately a cure are now foreseeable. The Committee, therefore, urges the NIDDK to increase its research efforts to find a treatment and cure for PKD.

*Digestive diseases.*—Diseases of the digestive system continue to affect more than one-half of all Americans at some time in their lives. Serious disorders such as colon cancer, inflammatory bowel disease, irritable bowel syndrome, and viral hepatitis, take a significant toll in terms of human suffering and mortality. Therefore, the Committee encourages NIDDK to continue its efforts to strike an appropriate balance between conducting basic studies on digestive diseases and bringing those research findings to the bedside in the form of improved patient care.

The Committee continues to be concerned about the prevalence of inflammatory bowel disease [IBD], including Crohn's disease and ulcerative colitis. These extremely complex disorders represent the major cause of morbidity from intestinal illness. The Committee recommends that the NIDDK continue its investigations into the genetic structure of IBD as well as the roles played by environmental factors and the immune system in the development of the disease.

The Committee continues to be concerned about the increasing frequency of irritable bowel syndrome [IBS], a chronic complex of disorders that malign the digestive system. The Committee recommends that NIDDK provide adequate funding for irritable bowel syndrome/functional bowel disorders research and give priority consideration to funding IBS education/scientific symposiums.

*Food safety.*—In May 1997, the DOA, the Department of Health and Human Services, and the Environmental Protection Agency submitted a report to the President detailing a national food safety initiative. The report notes that many of the new foodborne pathogens that have emerged over the past decade are not easily detected and are increasingly resistant to time-tested controls. This clarifies the need for biomedical research to enhance our ability to prevent, detect, and treat foodborne illness in humans. The report noted that relevant agencies "need to better coordinate their research efforts on the highest-priority issues and work together more effectively to leverage each other's resources." Toward that end, the NIDDK is encouraged to work with the NIAID, the Centers for Disease Control and Prevention, and the Agricultural Research Service to develop a research agenda on food safety to be collaboratively funded by the three agencies.

*Hepatitis C [HCV].*—The Committee is pleased with the leadership of the NIDDK in sponsoring the Hepatitis C Consensus Conference in March 1997 and is aware of the significant new NIDDK research recommendations made by the consensus conference to conduct large scale, long-term prospective studies to better define the natural history of HCV; to study the pathogens and mechanism of liver cell injury by HCV; and to study the interaction between alcohol ingestion and HCV. The Committee urges priority consideration be given to initiating this research in a manner responsive to the professional judgment recommendations.

The Committee also recommends that the Institute ensure that the findings of this conference is disseminated among health care providers to heighten awareness with regard to effective treatments that are available, and lifestyle changes necessary to modify the progression and transmission of disease.

*Liver disease.*—The Committee encourages the NIDDK to maintain a high-priority consideration on research to prevent, cure and better treat liver disease with a special focus on the needs for pediatric liver disease. The Committee supports the NIDDK minisymposium that was scheduled for June 1997 to develop an action plan for liver disease research. The Committee requests that this plan be completed in time to be submitted to the Committee along with the fiscal year 1999 budget proposal. Finally, the Committee encourages the NIDDK to strengthen its outreach to the liver disease research community and its coordination and information program regarding liver disease research.

*Cooley's anemia.*—The Committee has long supported research in the area of Cooley's anemia. Due to the numerous red blood cell transfusions that patients must undergo, iron accumulates in the major organs. The effective removal of this iron by chelating drugs requires an accurate assessment of iron levels in the patient. Accuracy is impeded, however, by the lack of a quality, noninvasive test to measure iron overload. The Committee, therefore, encourages NIDDK to move forward in an effort to develop an accurate noninvasive test to measure iron overload in patients with Cooley's anemia as well as other conditions. Treatment could be further enhanced by the development of an iron chelator drug that can be taken orally.

*Bone diseases.*—The Committee is pleased with the growth of research on osteoporosis, Paget's disease, and osteogenesis imperfecta and encourages the NIDDK to further expand and intensify its research programs on these bone diseases.

*Diabetes.*—Diabetes affects 16 million Americans and is a leading cause of blindness, kidney disease, heart disease, and amputations. Given the enormous human and economic costs of diabetes, the Committee urges the Director of the Institute to work closely with the Director of the NIH in establishing a diabetes research working group to develop a comprehensive plan for all NIH-funded diabetes research efforts. The Director of the Institute and the Diabetes Mellitus Interagency Coordinating Committee is encouraged to work closely with the working group in the development and implementation of the diabetes research plan.

The NIDDK and the CDC are to be commended for their joint establishment of a National Diabetes Education Program. Recent re-

search has determined that the key pathology underlying type II diabetes is insulin resistance. Accordingly, the Committee encourages the NDEP to fully reflect the latest scientific data regarding the importance of strict management of blood glucose levels by measures that include the direct treatment of insulin resistance.

The Committee is concerned about the high incidence of diabetes in native American, Native Alaskan, and native Hawaiian populations. The Committee encourages the NIDDK to develop a targeted diabetes prevention and treatment program for these culturally unique groups which share many similarities. Additionally, the Committee encourages the CDC to work with native American, Native Alaskan, and native Hawaiian groups and local community health centers in the development and implementation of this program.

The Committee notes that the availability of human islets is an essential component for translational diabetes research. The Committee is aware of the partnership between the Miami VA Medical Center, Jackson Memorial Hospital, and the University of Miami Diabetes Research Institute for multidisciplinary diabetes research. The Committee encourages NIDDK to give consideration to establishing a dedicated Human Islet Processing and Distribution Center.

*Interstitial cystitis.*—The Committee continues to support a strong interstitial cystitis [IC] research program. IC is a serious and debilitating bladder disorder which primarily affects women. The Committee is pleased that in fiscal year 1997 the NIDDK continued to fund IC clinical research and is encouraged by the progress made by the national IC data base.

*Nutrition sciences.*—Nutrition science is a major part of the NIH research agenda related to prevention. Diet and nutrients are factors in the prevention of diabetes, heart disease, certain cancers, hypertension, and birth defects. The Committee believes that the utilization of clinical nutrition research units and obesity research centers and similar programs are appropriate methods through which to integrate basic and clinical research in nutrition and thereby improve health care and prevent disease. The Committee recommends the Institute give consideration to expansion of the clinical nutrition research centers programs in order to expand clinical research and assure the translation of research results into practice through training of professionals. The Committee is particularly interested in a focus on nutrition, obesity, and diabetes.

*Prostatitis.*—The Committee is pleased that the NIDDK has begun to address the public health issues of prostatitis. The Committee encourages the NIDDK to consider expanding the number of clinical centers to be funded from the current solicitation and soliciting individual applications from investigators with diverse backgrounds to address basic and clinical research approaches to the disease.

*Urologic diseases.*—The Committee encourages the Institute to increase research in urology, including the basic and applied science of the prostate, and urological health issues affecting women, such as interstitial cystitis, urinary incontinence, and urinary tract infections. The Committee recommends that the NIDDK consider developing an appropriate data base for urologic diseases.

This data base would, for the first time, give realistic estimates of the extent of these diseases, the health care expenditures for these diseases, the variations in treatment, and the effect that these diseases have on the minority populations.

*End stage renal [ESRD].*—With over 60,000 Americans dying each year from kidney failure, the Committee encourages the NIDDK to develop and to implement an interinstitute action plan for adult and pediatric kidney disease research, including other NIH institutes, AHCPR, HCFA, and the CDC, that shares and leverages funding opportunities inside and outside of the NIDDK.

*Cystic fibrosis.*—As a result of the partnering the NIH has undertaken, the future looks promising for patients with this disease. The Committee encourages the NIDDK, along with the NHLBI and the NCRRT to expand its support of centers of excellence in cystic fibrosis [CF] and the CF gene therapy centers. Furthermore, NIH is encouraged to assure the development of an infrastructure for the rapid assessment of the new clinical therapies to treat this and other devastating diseases.

*Alternative research resources.*—The Committee supports the expansion of existing alternative resources to the use of animals, particularly through ensuring increased access by researchers to human tissues and organs for research purposes. The Committee encourages the Director to give consideration to participating in a multi-Institute initiative geared to increase support in this area and respond to the research community's growing need for human tissues and organs.

#### NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

Appropriations, 1997 .....	\$726,407,000
Budget estimate, 1998 .....	747,828,000
Committee recommendation .....	781,351,000

The Committee recommends an appropriation of \$781,351,000 for the National Institute of Neurological Disorders and Stroke [NINDS]. This is \$33,523,000 more than the budget request and \$54,944,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NINDS conducts and supports a broad range of research and research training on the normal function of the brain, spinal cord, and peripheral nerves, and on neurological and neuromuscular disorders. Neurological research includes epidemiology studies to identify risk factors for disease; laboratory studies to examine the structure and function of nerve cells; and brain imaging studies to understand how the brain is affected by disease and how it operates to carry out tasks such as learning and memory. New approaches for the diagnosis, treatment, and prevention of brain disorders are evaluated in studies with patients and people at risk for brain disorders.

*Parkinson's disease.*—The Committee continues to seek intensified and expanded efforts by the Institute to understand the pathophysiology of Parkinson's disease and develop effective therapies for this devastating disorder.

The Committee was pleased to learn of important advances in the genetics of Parkinson's disease, resulting from collaborations

developed after the international workshop sponsored by the NINDS in collaboration with the NIA, the NIEHS, and the NIMH. Other Institute initiatives, including two recent program announcements, have stimulated additional research that will provide important insights into this devastating disorder. However, much remains to be done to improve the outlook for patients and their families. The Committee recommendation includes sufficient funds for the Institute to expand funding for research in Parkinson's disease. This will allow a balanced program of basic and clinical research, including centers, clinical trials, and further work in the genetics and cell biology of neurodegenerative disease.

The Committee notes that the Institute has made use of exploratory center grants and is developing a similar mechanism to encourage the design of high quality clinical trials. The Institute is encouraged to use these and other innovative mechanisms to stimulate the field, such as a consortium of investigators focusing on the genetics and epidemiology of Parkinson's disease and the center without walls approach that proved successful for Huntington's disease research. The Committee looks forward to hearing about the progress of these efforts at the fiscal year 1999 hearing.

The Committee also encourages the Institute to consider the creation of a position for a senior program officer with specific responsibility for the coordination of the NIH-wide Parkinson's research program.

*Multiple sclerosis [MS].*—The Committee continues its strong interest in an aggressive research program on MS. The Committee is aware of recent progress in treating MS patients with recurrent/remissive forms of the disease and urges the Institute to continue and expand its support for basic and applied research on MS.

*Dystonia.*—The Committee continues to be pleased with the Institute's efforts to encourage extramural initiatives in dystonia-specific research, including a recent NINDS-sponsored workshop on dystonia research opportunities. The Committee encourages NINDS to work closely with other organizations having an interest in dystonia research to collaborate on joint research programs encouraging investigators to study this disease.

*Neurodegenerative disorders.*—The Committee encourages the Institute to continue research to determine the role of neurotransmitters in neurodegenerative disorders.

*Stroke.*—Stroke remains America's No. 3 killer, the leading cause of serious disability and a major contributor to late-life dementia. Now, opportunities to improve prevention and acute treatment of stroke appear to have never been greater. The Committee urges the Institute to place high priority on stroke research and encourages expansion of the stroke education program and support of innovative approaches to improved stroke diagnosis, treatment, rehabilitation, and prevention to make more rapid progress toward the "Decade of the Brain" goal of "prevention of 80 percent of strokes and protection of the brain during acute stroke."

*Amyotrophic lateral sclerosis [ALS].*—Amyotrophic lateral sclerosis, commonly referred to as Lou Gehrig's disease, is a progressive, fatal neurologic disease for which no cure exists. Recent clinical research resulted in the first compound to alter the course of the dis-

ease. The Committee encourages NINDS to enhance its support of brain research relevant to ALS.

*Neurofibromatosis.*—Neurofibromatosis [NF] is associated with many forms of human cancer, brain tumors, and learning disabilities affecting more than 100 million Americans. The Committee encourages the Institute to expand its NF research portfolio and to support novel approaches in the development of NF clinical research and therapies, including the use of: requests for applications, as appropriate; program announcements; the national cooperative drug discovery group program; and small business innovative research grants. The Committee requests that the Institute be prepared to report the status of NF research program, including progress in implementing the recommendations in this and last year's Committee reports, at its hearings on the fiscal 1999 budget.

*Batten disease.*—Batten disease is an irreversible and severe neurologic disorder affecting the brains of infants, children, and young adults. The most common type is characterized by motor and intellectual deterioration, vision loss, behavioral changes, and the onset of progressively severe seizures and terminates in death in a vegetative state. The Committee continues to be concerned with the pace of research in Batten disease. The Committee recommends that the Institute consider actively soliciting and encouraging quality grant applications for Batten disease and should continue to take steps necessary to assure that a vigorous research program is sustained and expanded.

*Brain tumors.*—The Committee continues to place a high priority on brain tumor research. The Committee strongly supports the approach of using centers of excellence to conduct basic, translational, and clinical research to determine the cause, mechanisms of development, and better methods of treatment and prevention of primary and secondary brain tumors.

*Minority health.*—The Committee has been pleased with the commitment of the NINDS with respect to initiatives to study health issues disproportionately impacting African-Americans and other minorities. The Committee commends Institute for its leadership in supporting research and training programs at minority health professions institutions.

*Autism.*—Given that there is already significant research in epilepsy, the Committee urges the NINDS to explore the link between seizure activity and autism. Additionally, the Committee recommends the Institute, along with the NIMH, explore more effective neural imaging strategies for young children.

#### NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

Appropriations, 1997 .....	\$1,256,659,000
Budget estimate, 1998 .....	1,312,502,000
Committee recommendation .....	1,359,688,000

The Committee recommends an appropriation of \$1,359,688,000 for the National Institute of Allergy and Infectious Diseases [NIAID]. This is \$47,186,000 more than the budget request and \$103,029,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NIAID supports and conducts basic and clinical research and research training programs in infectious diseases, including AIDS, and diseases caused by, or associated with, disorders of the immune system. The NIAID is the lead NIH Institute charged with developing new and improved vaccines and supporting research on acquired immunodeficiency syndrome, tuberculosis, sexually transmitted diseases, and tropical diseases. The NIAID's research goal is to improve the health and quality of life of people by improving diagnosis, treatment, and prevention of diseases.

*Tuberculosis.*—NIAID's support for tuberculosis research is critical in developing improved diagnostic tests, and treatments in response to the reemergence of TB in the United States. The Committee understands that NIAID-supported researchers have begun to understand multidrug resistant tuberculosis and hope to develop methods to quickly determine which drug therapy is appropriate for MDRTB strains, so a patient can begin an appropriate treatment therapy immediately, thus reducing the risk of transmitting the disease to others.

*Primary immune deficiency diseases.*—The Committee recognizes that more than 70 primary immune deficiency diseases have been identified to date, with 500,000 cases diagnosed and estimates of another 500,000 undiagnosed. These diseases, in which the body is unable to fight off infections, strike most severely at children, many of whom do not survive beyond their teens or early twenties. The Committee encourages NIAID to maintain its research focus on these devastating disorders as well its support of primary immune deficiency disease registries. The Committee also encourages the Institute to continue the important collaborations with the Jeffrey Modell Foundation on both research and public education endeavors.

*Sarcoidosis.*—The Committee supports the role NIAID has played in the establishment of the sarcoidosis national network [SNN], a national network of sarcoidosis patients, their family members, and the public health community. We encourage their continued support of this effort. The Committee also urges NIAID to continue its examination of the environmental and genetic agents associated with sarcoidosis, since approximately one-fourth of the chronic sarcoidosis cases are dying due to respiratory failure, or other pulmonary dysfunctions.

*Food safety.*—In May 1997 the DOA, the Department of Health and Human Services, and the Environmental Protection Agency submitted a report to the President detailing a national food safety initiative. The report notes that many of the new foodborne pathogens that have emerged over the past decade are not easily detected and are increasingly resistant to time-tested controls. This clarifies the need for biomedical research to enhance our ability to prevent, detect, and treat foodborne illness in humans. The report noted that relevant agencies "need to better coordinate their research efforts on the highest priority issues and work together more effectively to leverage each other's resources." Toward that end, the NIAID is encouraged to work with the NIDDK, the Centers for Disease Control and Prevention, and the Agricultural Research Service to develop a research agenda on food safety to be collaboratively funded by the three agencies.

*Hepatitis C [HCV].*—The Committee is aware that significant new NIAID research recommendations were made by the Hepatitis C Consensus Conference in March 1997 to develop a HCV vaccine and to conduct clinical trials to better determine optimum treatment regimens, including better treatment for those coinfecting with HIV. The Committee urges that this research be initiated in fiscal year 1998 in a manner responsive to the conference recommendations.

*Blood safety/hemophilia.*—The Committee is pleased with NIAID's continuing commitment to maximize clinical funding support, to assure access to newly available HIV/AIDS drugs for people with hemophilia. The Committee urges NIAID to work with the national hemophilia leadership to determine what further research steps should be taken to address the complications associated with hemophilia including treatment for viral hepatitis.

*Chronic fatigue and immune dysfunction syndrome.*—The Committee encourages the Institute to provide additional support for extramural grants focused on promising areas of CFIDS biomedical research, particularly those investigations which will define the pathophysiology of the illness and identify diagnostic markers.

*Organ transplantation research.*—The Committee urges the Director to support research efforts to increase organ donation, including projects: (1) aimed at increasing organ donations in underserved and rural areas and among minority populations, and (2) evaluating community-based initiatives.

*Postpolio syndrome.*—The Committee is aware of the progress being made on the postpolio syndrome and encourages the Institute to support research in this area, including providing rehabilitation alternatives for postpolio patients.

*E. coli.*—The Committee is aware that 10,000 to 20,000 infections of *Escherichia coli* (*E. coli*) occur in the United States annually and that such infections can lead to serious complications, including death. The Committee encourages the NIAID to expand its work in *E. coli* infections.

*Alternative research resources.*—The Committee supports the expansion of existing alternative resources to the use of animals, particularly through ensuring increased access by researchers to human tissues and organs for research purposes. The Committee encourages the Director to give consideration to participating in a multi-Institute initiative geared to increase support in this area and respond to the research community's growing need for human tissues and organs.

*Malaria.*—The Committee is encouraged by NIH's interest and effort to bring renewed attention to research opportunities for malaria prevention and control. U.S. leadership at this time is critical. The Committee supports the National Institute of Allergy and Infectious Diseases [NIAID] intention to launch a new malaria research initiative to better understand human immunity to several forms of malaria, and to accelerate the development of a malaria vaccine. In addition, the Committee urges NIAID to coordinate its efforts with the CDC, the Agency for International Development, and the Department of Defense to maximize Federal research efforts.

*Allergic diseases.*—As many as 50 million Americans suffer from allergic diseases. Allergic reactions can be debilitating or even fatal, and they can often lead to such chronic conditions as sinusitis and asthma. Researchers do not fully understand how the immune system recognizes an allergen or why reactions are more severe in certain individuals. The Committee urges that additional research be supported in this area to help determine risk factors for developing allergic disorders and sinusitis, and to determine the role of infectious agents including viruses, bacteria, and fungi in the pathogenesis of such disorders.

The Committee is concerned about the effects of untreated allergies, as well as the impact of sedating antihistamines on worker safety and children's learning. Further, the Committee is concerned about allergic rhinitis as a factor contributing to the morbidity and mortality related to asthma. The Committee looks to the Institute to develop guidelines with regard to the management of allergic rhinitis and related conditions. These guidelines should build support for the proper diagnosis and treatment of allergic rhinitis.

*Emerging infectious diseases.*—The Committee supports the continued focus on research into the antibiotic resistance of life-threatening bacterial organisms and the development of a new generation of antibiotics, and the Committee recommends support for this continued area of research. The Committee is aware of the research into infectious diseases being conducted at the Public Health Research Institute and encourages the NIAID to give appropriate consideration to research proposals received from this institution.

#### NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

Appropriations, 1997 .....	\$998,387,000
Budget estimate, 1998 .....	1,020,192,000
Committee recommendation .....	1,058,969,000

The Committee recommendation includes \$1,058,969,000 for the National Institute of General Medical Sciences [NIGMS]. This is \$38,777,000 more than the budget request and \$60,582,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—NIGMS supports research and research training in the basic biomedical sciences. Institute grantees, working in such fields as cell biology, biophysics, genetics, developmental biology, pharmacology, physiology, and biological chemistry, study normal biological processes to better understand what goes wrong when disease occurs. In this way, NIGMS supplies the new knowledge, theories, and technologies that can then be applied to the disease-targeted studies supported by other NIH components. NIGMS-supported basic research advances also regularly find applications in the biotechnology and pharmaceutical industries. The Institute's training programs help provide the scientists needed by industry and academia to maintain U.S. leadership in biomedical science.

*Trauma.*—The Committee recognizes that injury is a leading public health problem: the leading cause of death for Americans under age 45, and the fourth leading cause of death overall. In recognition of this fact and the chronic shortage of basic and clinical investigators of trauma research, the Committee encourages the In-

stitute to preserve and augment existing trauma and burn research training grants.

NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

Appropriations, 1997 .....	\$631,365,000
Budget estimate, 1998 .....	647,279,000
Committee recommendation .....	676,870,000

The Committee recommends an appropriation of \$676,870,000 for the National Institute of Child Health and Human Development [NICHD]. This is \$29,591,000 more than the budget request and \$45,505,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—NICHD is that component of the National Institutes of Health which is responsible for conducting and supporting research on maternal and child health, the population sciences, and medical rehabilitation. Research encompassed by these areas targets infant mortality; genetic diseases, including birth defects; mental retardation; contraceptive development and evaluation; pediatric, maternal, and adolescent AIDS; developmental biology; vaccine development; demographic and behavioral research; and restoration or enhancement of function in individuals experiencing physical disability due to injury, disease, or birth defect.

*Sudden infant death syndrome [SIDS].*—NICHD is to be commended for its aggressive efforts to reduce SIDS deaths through the national collaborative back to sleep campaign. This campaign has been responsible for a 30-percent reduction in SIDS rates, the highest reduction in infant mortality rates in 20 years. To continue this progress, the Committee encourages the Institute to support the fourth year of the second SIDS 5-year research plan. These plans, developed in collaboration with the SIDS scientific and advocacy community, have provided guidance, structure, and support to the NICHD SIDS research program.

*Primary immune deficiency diseases.*—The Committee understands that NICHD is moving forward with peer-reviewed, collaborative research projects into these diseases. The Committee strongly supports these efforts and encourages the Institute to pursue additional emphasis on them. In addition, because of the critical importance of early diagnosis and proper treatment, the Committee is pleased with the efforts to educate primary care physicians, school nurses, and other providers in early diagnosis and treatment. The Committee strongly encourages NICHD to continue and expand its educational efforts and be prepared to report to the Committee prior to next year's hearings concerning the success of these efforts and future plans for public awareness and education.

*Osteogenesis imperfecta [OI].*—NICHD is to be commended for its research on the mapping of gene markers associated with several diseases, including osteogenesis imperfecta [OI]. OI is a genetic disorder characterized by bones that break easily from little or no apparent cause. The Committee encourages the NICHD to further expand and intensify its research efforts on OI.

*Autism.*—Autism is a developmental disability that typically appears during the first 3 years of life. At the present time, there is no prevention, treatment or cure for autism. The Committee is en-

couraged by the NIH's recent research effort focused on the neurobiology and genetics of autism.

The Committee recognizes some recent strides, particularly the NICHD/NIDCD RFA in the genetics and neurobiology of autism and the creation of an interagency autism coordinating committee. The Committee encourages the coordinating committee to meet regularly, to make those meetings open to the public, and to report to Congress on the goals set and progress made prior to the fiscal year 1999 hearings. In addition, the Committee urges the Institute to develop a standardized and universal diagnostic criteria in autism to aid in earlier diagnosis, and to promote clinical trials, an important part of medical progress often unavailable to the pediatric population. Finally, the Committee urges consideration of a center-based approach, similar to the one used in research on Alzheimer's disease to speed the pace of progress in autism.

*Demographic research.*—The Committee continues to place high priority on demographic research and data collection that provide objective information for public policy related to the well-being of children and families. The Committee urges NICHD to continue a proactive role in supporting state-of-the-art data collection to meet these research needs.

*Childhood development.*—The Committee commends the NICHD for support of research to better understand how genes and the environment interact to cause extraordinary changes of the brain during the first years of life. More behavioral research is needed to increase knowledge about the developing brain, basic processes of learning, and how changes in these processes occur as a result of a variety of experiences. In particular, further research is needed to better understand the central nervous system of children with learning disabilities, and the instructional conditions that must be in place in order to help all children and adults develop competent academic and social skills.

*Child care.*—The Committee wants to emphasize its strong support for the ongoing developmental studies examining the effects of nonmaternal care on a child's psychological and cognitive development and physical health. The Committee encourages the Institute to pursue further research in this area.

The Committee urges the Institute to conduct a study which will examine the quality of child care funded by Federal resources. The purpose of the study is to examine to what extent recent research on the brain development of young children is being applied by recipients of Federal child care funds and to make recommendations to ensure the use of best practices by these recipients.

*Health and behavior.*—The Committee emphasizes its strong support for health and behavioral research at NICHD. The Committee looks forward to learning the results of the first national, longitudinal study about behaviors that place teens at risk. The data will yield a wealth of information invaluable in helping to understand how best to protect the health of our young people.

*Diet and nutrition.*—The Committee is concerned about the large number of girls who are engaged in restrictive dieting and the consequences of dieting on their health and development. The Committee encourages the NICHD to further investigate behavioral, social, and cultural factors that affect adolescent girls' eating habits.

*Reading development and disability.*—The Committee is impressed with the important accomplishments reported from the NICHD research program on reading development and disability, and is eager to have this information brought to the attention of educators, policymakers, and parents. Noting the fact that the NICHD is already collaborating with the Department of Education, the Committee urges the Director of the NICHD in consultation with the Secretary of Education, to convene a national panel to assess the status of research-based knowledge, including the effectiveness of various approaches to teaching children to read. The Committee recommends that the panel be comprised of 15 individuals, who are not officers or employees of the Federal Government and include leading scientists in reading research, representatives of colleges of education, reading teachers, educational administrators, and parents. Based on its findings, the panel should present a report to the Secretary of Health and Human Services, the Secretary of Education, and the appropriate congressional committees. The report should present the panel's conclusions, an indication of the readiness for application in the classroom of the results of this research, and, if appropriate, a strategy for rapidly disseminating this information to facilitate effective reading instruction in the schools. If found warranted, the panel should also recommend a plan for additional research regarding early reading development and instruction. The Committee looks forward to discussing the findings of the report during the hearing on the fiscal year 1999 budget.

The Committee commends the Institute for its outreach and public education efforts which have had a significant impact on the health and well-being of our Nation's children. The Committee encourages the NICHD to expand this effort to include the Institute's research on reading development and disability, and to use the expertise of writers, teachers, producers, artists, and academics to bring this information directly to children through the media.

*High-frequency oscillatory ventilation [HFOV] research.*—The Committee understands that a relatively new form of ventilation called high-frequency oscillatory ventilation has been used to care for fragile, low birthweight infants with respiratory problems. Many investigators believe this will decrease the incidence of pulmonary complications; however, the research evidence to date is split on whether this form of therapy is superior to conventional respiratory therapy. The Committee understands that research is needed to assess how well HFOV works and whether or not there may be potential dangers. The Committee urges NICHD to give strong consideration to supporting this HFOV research.

*Fragile X.*—Fragile X is the most common inherited cause of mental retardation. The Committee urges NICHD to expand basic and applied research and testing of Fragile X. The Committee recommends that NICHD give consideration to convening a colloquium of leading scientists in this field and in related fields with a view toward publishing a report on the most promising directions of future research aimed at treatment.

*Behavioral and social sciences.*—The Committee recognizes the NICHD's mission to study issues related not only to individuals, but to families and distinct population groups within the United

States. In support of this mission, the Committee encourages the NICHD give careful consideration to demonstration projects to create virtual community-based centers designed to strengthen families in multicultural environments, such as the one proposed by the University of Hawaii's Center on the Family.

*Infertility and contraceptive research.*—The Committee continues to place high priority on research to combat infertility and speed the development of improved contraceptives. The Committee encourages NICHD to continue aggressive activities in this area, including individual research grants and those of the infertility and contraceptive research centers.

*Media and youth.*—The Committee is concerned that a recent review of the scientific literature on the factors leading to early sexual activity and pregnancy concluded that little empirical research has been conducted on the effects of growing up in an environment saturated by models of nonmarital sexual behavior, especially as portrayed by the popular media. What is not known is whether frequent exposure to various forms of media that include high levels of sexual content and low levels of portrayal of responsible sexual conduct affect young people's attitudes and behavior. Careful, peer-reviewed research is needed to address this question and the Committee encourages the NICHD to stimulate research in this area. The Committee further encourages the Institute to consider the following three basic issues: (1) What sexual messages do youth pay attention to, and how do they interpret what they see and hear? (2) Does sexual media content affect youth's sexual beliefs and behavior? and (3) Can the mass media be used to promote responsible sexual behavior among youth? The Committee requests that the Director be prepared to report on its activities in this area during the hearings on the fiscal year 1999 budget.

*National Center for Medical Rehabilitation Research.*—Medical rehabilitation is a relatively new, rapidly expanding field and many of its therapeutic practices have never been evaluated for their effectiveness and cost justification. Though outcomes research is an expressed emphasis of the Center, the Committee understands that it has not yet supported full-scale clinical trials intended to assess the outcomes of significant rehabilitation practices. The Committee encourages the Center to initiate such research, where appropriate.

*Down syndrome research.*—The Committee commends the NICHD for embarking on an expanded Down syndrome research initiative, and encourages other Institutes to join in similar collaborations with a Down syndrome focus. In addition, the Committee is pleased that NICHD and the National Down Syndrome Society [NDSS] have also made plans to jointly sponsor a state-of-the-art research conference in which renowned scientists from NDSS, NICHD, and other NIH Institutes will collaborate and set priorities for future research in Down syndrome and related areas of cognition, behavior, and therapeutics. This sharing of information, technology, and the collective knowledge of the world's foremost researchers is expected to produce an acceleration of scientific and medical advancements that will benefit all individuals affected by Down syndrome.

## NATIONAL EYE INSTITUTE

Appropriations, 1997 .....	\$332,597,000
Budget estimate, 1998 .....	340,431,000
Committee recommendation .....	357,695,000

The Committee recommends an appropriation of \$357,695,000 for the National Eye Institute [NEI]. This is \$17,264,000 more than the budget request and \$25,098,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NEI is the Nation's Federal resource for the conduct and support of basic and clinical research, research training, and other programs with respect to blinding eye diseases, visual disorders, mechanisms of visual function, preservation of sight, and the special health problems and needs of individuals who are visually impaired or blind. In addition, the NEI is responsible for the dissemination of information, specifically public and professional education programs aimed at the prevention of blindness.

The NEI has reported exciting progress in developing treatments for age-related macular degeneration [AMD] in the areas of cell transplantation, inhibition of abnormal growth of blood vessels, and, potentially, gene therapy. The Committee was pleased to hear that the NEI is completing its sixth strategic program planning effort. The Committee would be pleased to receive a summary of this plan during the hearings on the fiscal year 1999 budget.

*Age-related eye disease study.*—The Committee is especially pleased to learn that this study, a multicenter natural history study and clinical trial of AMD and cataract, is proceeding with over 4,700 patients already recruited. The Committee encourages the NEI to broaden the assessment of the nutrients involved in the study and to give research on this disease an even higher priority in the future, including support of more clinical trials, natural history studies, and clinical research training.

The impact of age-related eye diseases such as glaucoma, cataract, diabetic retinopathy, and AMD, will multiply several fold in the 21st century as our population ages. The Institute is urged to develop research programs that will evaluate these new eye care delivery challenges, assess current efforts at providing eye care, and fostering the development of innovative approaches to eye care for the future.

*Alternative research resources.*—The Committee supports the expansion of existing alternative resources to the use of animals, particularly through ensuring increased access by researchers to human tissues and organs for research purposes. The Committee encourages the Director to give consideration to participating in a multi-Institute initiative geared to increase support in this area and respond to the research community's growing need for human tissues and organs.

## NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

Appropriations, 1997 .....	\$308,487,000
Budget estimate, 1998 .....	319,907,000
Committee recommendation .....	331,969,000

The Committee recommends an appropriation of \$331,969,000 for the National Institute of Environmental Health Sciences [NIEHS]. This is \$12,062,000 more than the budget request and \$23,482,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The mission of the NIEHS is to define how environmental exposures affect our health, how individuals differ in their susceptibility to these effects, and how these susceptibilities change with time. This knowledge, coupled with prevention and communication programs, can lead to a reduction in environmentally associated diseases and dysfunctions.

*Parkinson's disease.*—The Committee notes the recent findings, such as the study linking metals exposure to increased Parkinson's incidence, which supplement the significant body of data linking environmental exposures and this devastating disorder. The Committee urges the Institute to continue to build on its past initiatives, such as its 1995 workshop, by increasing its intramural and extramural program in this area. The Committee encourages the NIEHS to coordinate such efforts with other NIH initiatives into other factors contributing to Parkinson's incidence, including the efforts of the NHGRI and the NINDS on the genetic links to the disease.

*Volcanic emissions.*—The Committee continues to be concerned about the public health aspects of volcanic emissions [VOG] in Hawaii and urges the Institute to continue to collaborate with NINR in the multidisciplinary approach to this problem. The Committee appreciates the initial efforts of NIEHS to work with the University of Hawaii.

*Marine and freshwater biomedical science centers.*—The Committee commends the research that NIEHS has conducted on ocean environment-related diseases. The theme of World Expo 1998 is the "Oceans: A Heritage for the Future" and the U.S. pavilion will have exhibit areas for visitors to walk on the ocean floor. The Committee supports the NIEHS partnership with the U.S. pavilion at World Expo 1998 to develop exhibits on ocean environment-related diseases. The Committee encourages NIEHS to lend its expertise in this area to the United States exhibit at World Expo 1998 in Lisbon, Portugal, which relates to the ocean environment. Given the increase provided to NIEH, the Committee encourages the Institute to allocate resources to this project.

*Children's health.*—The Committee is pleased that the NIEHS in collaboration with the Centers for Disease Control and Prevention and the Environmental Protection Agency, intends to develop centers of achievement targeted in children's health, with a focus in the areas of asthma and respiratory diseases. These programs will be multidisciplinary, community-based research programs to better understand, intervene, and ultimately prevent childhood environmental exposures related to asthma, other respiratory diseases, and other environmentally induced diseases. The Committee encourages the Institute to continue these programs.

*Green links.*—The Committee encourages the Institute to give consideration to supporting the green links environmental research and development network. This 5-year program is expected to dem-

onstrate a cost-effective transfer methodology to assure that the results of millions of dollars expended by the U.S. Government on research, new technology development, and innovative programming reaches our communities and our small- and medium-sized businesses.

*Environmental health sciences centers.*—The Committee continues to support the Institute’s centers program and believes that a vibrant centers program is critical to carrying out the expanding mission of the NIEHS. The Committee encourages the Institute to consider increasing support for current center grantees to bring them up closer to peer reviewed levels.

*Marine toxins.*—The Committee remains aware of the importance of the research on natural marine toxins and their effect on the human body, and notes the unique work being performed at a Miami, FL-based NIEHS center. The Committee continues to recommend that NIEHS advance the establishment of a comprehensive center of excellence focusing on natural marine toxins and their impact on the human body, to assist both HHS and FDA with their mandate to develop standards and conduct research on marine toxins and dietary risk and human disease.

*Superfund Basic Research Program.*—The Committee supports the Superfund Basic Research Program which is administered by the National Institute of Environmental Health Sciences [NIEHS] and funded by a passthrough by the Environmental Protection Agency [EPA]. The Committee believes this research program plays an integral role in the Superfund hazardous waste cleanup program. The primary purpose of this research program is to provide the scientific basis needed to make accurate assessments of the human health risks at hazardous waste sites and to develop better methods for remediating hazardous waste sites. It is the only university-based scientific research program focused on health and cleanup issues for these sites. The Committee encourages EPA and NIEHS to work together to ensure the continuation of this important research program.

*National Toxicology Program.*—The Committee continues to support the National Toxicology Program [NTP] which was established to provide information to health, regulatory, and research agencies, and the general public about potentially toxic chemicals, as well as to strengthen the science base of toxicology. NIEHS-supported research has shown the health effects of lead, leading to the reduction of many sources of environmental lead. The Committee is pleased that researchers are now expanding their efforts to better understand why some people are more susceptible to environmental exposures than others. In addition, the Committee supports NIEHS’ efforts, under the auspices of the NTP, to develop new mouse models to more efficiently test the toxicity of chemicals.

NATIONAL INSTITUTE ON AGING

Appropriations, 1997 .....	\$485,806,000
Budget estimate, 1998 .....	497,076,000
Committee recommendation .....	520,705,000

The Committee recommendation includes \$520,705,000 for the National Institute on Aging [NIA]. This is \$23,629,000 more than the budget request and \$34,899,000 more than the fiscal year 1997

appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NIA conducts biomedical, behavioral, and social research related to the aging process to prevent disease and other problems of the aged, and to maintain the health and independence of older Americans. Research in aging over the last two decades demonstrates that aging should not be equated with inevitable decline and disease.

*Alzheimer's disease.*—Over the past several years, the Committee has called special attention to the fact that Alzheimer's disease and related disorders present one of the greatest threats to the health and economic security to generations of Americans. Left unchecked, this devastating illness will defeat all of our best efforts as a Nation to control the costs and assure the quality of health care in general, and of public programs such as Medicare and Medicaid. The Committee urges NIA to maintain the priority status of Alzheimer's disease. The Committee also expects that a portion of the increase provided be devoted to finding effective treatments to delay the onset and progress of the disease, and develop techniques for presymptomatic diagnosis.

*Cardiovascular aging research.*—Heart attack, congestive heart failure, stroke, and other cardiovascular diseases remain America's No. 1 killer of older men and women and a main cause of disability. The Committee urges the Institute to make cardiovascular research a priority and to expand into innovative extramural and intramural cardiovascular research programs.

*Demographic research.*—The Committee believes that NIA's demography programs play a vital role in understanding many of the Nation's important health, social and economic issues. The Committee encourages NIA's initiative to study disability trends, as well as its research on the impact of the aging baby boom generation. Coordinated efforts in providing data for present and future studies are encouraged, as are sufficient funds for training and recruiting the professionals necessary to undertake such studies.

*Royal centers for research on applied gerontology.*—The Committee encourages NIA to continue to place a high priority on funding for the Royal centers. The Royal centers are designed to improve the quality of life of older adults by translating the results from basic behavioral and social research on aging into practical outcomes that will benefit the lives of older people.

*Bone diseases.*—The Committee notes the growth of research on osteoporosis, Paget's disease, and osteogenesis imperfecta and encourages the Institute to consider further expansion and intensification of its research programs on these bone diseases.

*Rural aging.*—The Committee is aware that the West Virginia University's Center on Aging, in cooperation with the United Nations, is planning a Year 2000 International Conference on Rural Aging. The Committee supports this initiative and urges the NIA to give careful consideration to provide assistance to this important effort.

*Minority populations.*—The Committee encourages the Institute to consider efforts targeted toward minority populations. These efforts are necessary to meet the challenges facing an increasingly diverse senior population. The Committee is aware of organizations,

such as the National Asian Pacific Center on Aging, that are equipped to reach some of the fastest growing, yet underserved and isolated, senior groups and urges the NIA to work with these organizations in targeting research efforts toward these important minority populations.

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES

Appropriations, 1997 .....	\$257,003,000
Budget estimate, 1998 .....	263,242,000
Committee recommendation .....	272,631,000

The Committee recommends an appropriation of \$272,631,000 for the National Institute of Arthritis and Musculoskeletal and Skin Diseases [NIAMS]. This is \$9,389,000 more than the budget request and \$15,628,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NIAMS conducts and supports basic and clinical research and research training, and the dissemination of health information on the more than 100 forms of arthritis; osteoporosis and other bone diseases; muscle biology and muscle diseases; orthopedic disorders, such as back pain and sports injuries; and numerous skin diseases. The research agenda of the NIAMS includes many devastating and debilitating diseases that afflict millions of Americans. These diseases of the joints, muscles, bones, connective tissues, and skin, in the aggregate, will affect nearly every American at some point in their lives, causing tremendous human suffering and costing the Nation billions of dollars in both health care and lost productivity. The research activities of this Institute serve the concerns of many different special populations; these include women, minorities, children, and the elderly.

*Growth plate injuries.*—Fifteen percent of all children’s fractures reportedly involve the growing part of the bone. Damage to the growth plate results in deformities and shortened limbs. The Institute is urged to support research directed toward controlling and understanding bone growth and the damage to the growing bone, and treatment modalities, such as leg lengthening. The Committee also recommends that the NIAMS and the NICHD ensure that information is available to practitioners and parents regarding the possibility of damage to the growth plate as a result of injury.

*Musculoskeletal growth and development conditions in children.*—The Committee is very pleased with the progress being made by NIAMS to focus attention on conditions that prevent normal musculoskeletal growth and development in children. NIAMS is urged, in conjunction with NICHD, to continue to invest in research to discover cures and treatments for conditions that damage muscles, nerves, and bones in children.

*Bone diseases.*—The Committee is pleased with the important strides that have been made with the establishment of an osteoporosis and related bone disease national resource center under the Musculoskeletal Disease Program. The Committee urges the NIAMS to build upon this initiative by expanding support for the resource center’s activities in order to allow the center to continue to broaden its information services. The Committee also notes

the growth of research on osteoporosis, Paget's disease, and osteogenesis imperfecta and encourages the Institute to further expand and intensify its research programs on these bone diseases.

*Lupus.*—Lupus is a serious autoimmune disease that mainly affects women of child bearing age. Lupus can lead to severe organ injury and often the treatment is as devastating as the disease itself. African-American women are three times more likely to have the diseases than white women. The Committee is encouraged by recent NIAMS research success. Working at gaining understanding of the factors associated with the high prevalence of lupus in minorities and development of new and innovative treatments is of great importance to the Committee.

*Chronic fatigue and immune dysfunction syndrome [CFIDS].*—The Committee encourages the Institute to provide additional support for extramural grants focused on promising areas of CFIDS biomedical research, particularly those investigations which will define the pathophysiology of the illness and identify diagnostic markers.

*Fibromyalgia.*—Fibromyalgia syndrome [FMS] is a clinically diagnosed disorder which is poorly understood and difficult to treat. It is a syndrome of debilitating, chronic, widespread pain, fatigue, sleep disturbance, and other associated disorders. The Committee encourages NIAMS, specifically, and NIH, generally, to give consideration to taking additional appropriate steps, including a new RFA on fibromyalgia, to increase the research that is carried out on this widespread and debilitating disease.

*Incontinence in women.*—The Committee encourages the NICHD to collaborate with the NIDDK to enhance fundamental basic and clinical research that will find the causes as well as new solutions for the problem of incontinence in women.

*Osteoporosis.*—The Committee notes that osteoporosis occurs in 37 percent of the population. Hip and vertebral fractures add significant costs to Medicare, and preventative measures identified in the study of osteoporosis could greatly reduce those costs and improve the well-being of millions of people afflicted with this disorder. The Committee encourages the Institute to support research, including the identification of risk factors for the disease and the development of public education strategies to decrease the prevalence of osteoporosis. The Committee further encourages the NIAMS to collaborate with the Agency for Health Care Policy and Research to initiate planning of definitive studies, including epidemiologic studies, that would better integrate patient outcomes with basic research, screening, and preventative measures.

*Vulvodynia.*—Hundreds of thousands of women suffer from vulvodynia, a painful and often debilitating disorder of the female reproductive system. Despite its prevalence very little attention has been paid to the disorder by health professionals or researchers. However, in April NIH convened an international symposium to exchange information and develop a research agenda. The Committee is concerned about the lack of attention to this important women's health problem and has included sufficient funds to carry out research on the prevalence, causes and treatment of vulvodynia.

*Scleroderma.*—Scleroderma is a chronic, degenerative disease which causes the overproduction of collagen in the body's connec-

tive tissue. The Committee was encouraged to learn that the NIAMS is planning a symposium on scleroderma progress and urges the Institute to encourage the participation of relevant institutes of the NIH in the symposium. The Committee also requests that the Institute aggressively pursue an active research program on this devastating disorder.

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION  
DISORDERS

Appropriations, 1997 .....	\$188,345,000
Budget estimate, 1998 .....	194,221,000
Committee recommendation .....	200,428,000

The Committee recommends an appropriation of \$200,428,000 for the National Institute on Deafness and Other Communication Disorders [NIDCD]. This is \$6,207,000 more than the budget request and \$12,083,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NIDCD funds and conducts research and research training in the normal and disordered processes of human communication, specifically in the areas of hearing, balance, smell, taste, voice, speech, and language. The Institute addresses the special biomedical and behavioral problems of people who have communication impairments or disorders, is actively involved in health promotion and disease prevention, and supports efforts to create devices that substitute for lost and impaired sensory and communication functions.

*Dysphonia.*—Spasmodic dysphonia is a voice disorder that affects women predominantly, and usually renders a person difficult to understand because of uncontrolled voice and pitch breaks. The Committee is pleased with continued NIDCD intramural and extramural study into spasmodic dysphonia and encourages continued effort in this promising scientific area.

*Communication skills.*—The Committee recognizes that, as the communications revolution intensifies into the 21st century, many Americans who lack communication and language skills will fall behind socially and economically. Underlying speech and language disorders often affect the development of good communication skills, placing those individuals at a disadvantage in the workplace. These underlying disorders are often not diagnosed or treated in children from disadvantaged backgrounds. The Committee recommends that the Institute hold a national factfinding workshop on this issue, including representatives of the Departments of Labor and Education and that the Director be prepared to report on their findings of that workshop during next year's appropriation hearings.

*Infant screening.*—The Committee is concerned that millions of infants are not receiving appropriate screening for hearing loss. NIDCD is completing a large-scale multiyear study on the best methods of carrying out infant hearing screening. The Committee recommends that NIDCD develop an action plan as to steps it can take to increase consumer and health professional awareness of the importance of and most effective method of infant screening and

asks that it reports its recommendations to the Committee by March 1, 1998.

*Environmental causes of hearing loss.*—The Committee is concerned that many Americans lack information about the risk to their hearing of exposure to high decibel noises. Hearing loss associated with this type of exposure is clearly preventable. Therefore, the Committee urges NIDCD to consider holding a consensus conference along with NIEHS, NIOSH, and the private sector as to steps that can be taken to increase awareness and reduce the incidence of this preventable form of hearing loss.

NATIONAL INSTITUTE OF NURSING RESEARCH

Appropriations, 1997 .....	\$59,721,000
Budget estimate, 1998 .....	61,052,000
Committee recommendation .....	64,016,000

The Committee recommends an appropriation of \$64,016,000 for the National Institute of Nursing Research [NINR]. This is \$2,964,000 more than the budget request and \$4,295,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NINR supports research and training in the biological and behavioral aspects of critical national health problems. Research seeks to reduce the burden of illness and disability by understanding and easing the effects of acute and chronic illness; to improve quality of life by preventing or delaying the onset of disease or slowing its progression; to establish better approaches to promoting health and preventing disease; and to improve clinical environments by testing interventions that influence patient health outcomes and reduce costs and demand for care.

*Managing pain.*—Research into the causes and management of pain is a critical area of investigation, and the Committee commends the NINR for its strong focus on this area of research. The Committee further applauds the important contributions of NINR-supported work that explores the biological and behavioral parameters of pain. The Committee encourages the Institute to actively investigate the role that cultural differences play in various aspects of pain management.

*Community-based interventions for underserved populations.*—Research is needed on the specific problems facing rural populations, as well as on how to ensure that the outcomes of research will benefit our Nation’s diverse racial and ethnic populations. The Committee commends the NINR for its strong commitment to community-based information strategies. The Committee encourages the Institute to ensure that research efforts extend to the diverse health care needs of racial and ethnic populations, such as, native Hawaiians. The Committee also calls attention to Malma, an innovative, culturally sensitive community partnership program which addresses the prenatal care needs of minorities in Hawaii.

*Telehealth.*—The Committee encourages the Institute to explore the relationship between telehealth, nursing, and increased access to care for prevention and treatment. The Committee is aware that there is limited data on the efficacy of telehealth nursing interven-

tions and would be interested in the results of any research efforts in this area.

*Managing symptoms of chronic neurologic conditions.*—The Committee urges the NINR to continue its collaborations with the NINDS to address symptoms of chronic neurological conditions, such as Parkinson's disease, multiple sclerosis, stroke, and spinal cord injury. This is especially important since two of three Americans seek treatment for a condition involving the brain or nervous system each year, at tremendous cost on the health care system.

*Traumatic brain injury.*—The Committee agrees that there is a critical need for nursing research in the area of traumatic brain injury, which hospitalizes 500,000 patients each year. The Committee urges NINR to continue research on preventing the progressive deterioration of the brain and to expand its research on promising therapies to prevent the progressive deterioration of the brain resulting from the initial trauma. The Committee also encourages NINR to collaborate with NICHD on the treatment and rehabilitative needs of children with head trauma.

*Quality of life in organ transplantation.*—The Committee understands that technological advances have permitted an estimated 12,000 Americans to benefit from an organ transplant each year. The Committee supports NINR in undertaking research to improve the quality of life for patients with organ transplantations in collaboration with NIAID, NIKKD, NIA, and NHLBI.

*Extending advances in cardiovascular risk management to high-risk populations.*—The Committee recognizes that the basis of adult cardiovascular disease often is traced back to childhood, and that interventions early in life are key to achieving a healthy adulthood. The Committee supports the important work of nurse researchers aimed at reducing cardiovascular risk factors that can be tested in high-risk and underserved populations.

*Chronic illness and caregiving.*—The Committee is well aware that chronic illnesses, such as Alzheimer's disease and related dementias, affect almost 100 million people in the United States. The Committee strongly endorses NINR's collaboration with the NIA to prevent or reduce disabilities associated with chronic diseases and, supports NINR's strong focus on developing effective caregiving strategies.

*End-of-life issues.*—The Committee strongly supports NINR activities, in collaboration with other NIH Institutes, related to end-of-life issues by studying palliative care, end-stage symptoms, such as pain and depression, and measuring relief of symptoms.

*Ethical use of genetic knowledge.*—Genetic tests are becoming a component of medical and public health practice. The Committee urges NINR to continue its close collaboration among NCI and NHGRI to strengthen the program in nursing research in the field of genetics.

*Career development in support of nursing research.*—The Committee recognizes that the continued vitality in the field of nursing research depends upon the experienced researchers dedicated to active, long-term research programs. The Committee believes that because of the unique patient-oriented research emphasis of NINR, such increases in the number of experienced nurse researchers are essential to securing further benefits to human health.

## NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

Appropriations, 1997 .....	\$211,870,000
Budget estimate, 1998 .....	219,346,000
Committee recommendation .....	228,585,000

The Committee recommends an appropriation of \$228,585,000 for the National Institute on Alcohol Abuse and Alcoholism [NIAAA]. This is \$9,239,000 more than the budget request and \$16,715,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NIAAA conducts biomedical and behavioral research for improving prevention and treatment and reducing or eliminating the associated health, economic, and social consequences. NIAAA provides leadership in the country's effort to combat these problems by developing new knowledge that will decrease the incidence and prevalence of alcohol abuse and alcoholism and associated morbidity and mortality. NIAAA addresses these questions through an integrated program of biomedical, behavioral, and epidemiologic research on alcoholism, alcohol abuse, and related problems. This broad-based program includes various areas of special emphasis such as medications development, fetal alcohol syndrome [FAS], genetics, and moderate drinking.

*Fetal alcohol syndrome.*—Fetal alcohol syndrome is the leading known cause of mental retardation in the United States and the leading preventable cause of birth defects in the Western World. The Committee urges NIAAA to increase research support to better understand preventing and treating fetal alcohol syndrome. Equally important is the need to identify instructional conditions that must be in place in order to help FAS children develop competent academic and social skills. The Committee commends the Institute for creating an interagency coordinating committee of all the relevant agencies within the Department to exchange information and begin to develop research, prevention, and treatment proposals relating to FAS. The Committee was pleased to learn that the NIAAA has issued a program announcement on education, prevention, and intervention strategies to reduce alcohol consumption by women of childbearing age in high-risk populations. This initiative along with the appropriate funding is essential in view of the recent and alarming findings that alcohol consumption by pregnant women is increasing.

*Behavioral science.*—The Committee is pleased to learn that NIAAA is exploring ways to expand and strengthen its behavioral science portfolio and in particular that it has been investigating the potential contributions of research in such areas as behavioral genetics, responses to stress, developmental psychology, human learning and cognitive science, social psychology, organizational behavior, evaluation and methodology, and motivation and craving.

*Genetic vulnerability.*—The Committee is pleased with NIAAA's leadership in the area of genes and alcoholism. The Committee understands that NIAAA held a successful 2-day conference at NIH on how genes and the environment affect complex diseases, including alcoholism. The genetic research conducted by NIAAA researchers has identified several genetic loci associated with alcohol de-

pendence on several human chromosomes. NIAAA should continue to take the initiative in pursuing collaborative discussions with NIMH to strengthen and increase the power of current data bases and to gain information on the genetics of psychiatric disorders which may coexist with alcoholism.

*Neuroscience.*—The Committee is aware that NIAAA investigators have been using cutting-edge techniques in cell biology, molecular biology, and physiology to explore the mechanisms underlying alcohol dependence and alcohol-associated brain damage. The recent identification of genes that govern the development of alcohol withdrawal convulsions is one example of how molecular genetic and behavioral methods can be combined to learn how alcohol affects the brain. The Committee encourages the NIAAA to bring together neuroscientists from around the country to present their findings and map out new directions for research on alcohol and the brain. The development of a specific research plan in this area would be most useful in charting a course for future research.

*Medications development.*—The development of medications for alcoholism requires an improved understanding of how alcohol changes brain function to produce craving, loss of control, tolerance, and the alcohol withdrawal syndrome. The Committee understands that NIAAA has identified at least two other potentially effective medications besides naltrexone and is pursuing clinical trials to determine which patients are most responsive to these medications and the benefits and side effects of long-term use. The Committee encourages the Institute to expand support for developing new medications that prevent alcohol induced liver damage, cardiomyopathy, and damage to other tissues.

*Alcohol advertising study.*—The Committee is concerned about the prevalence of underage use of alcohol and encourages the NIAAA to support studies to review the impact of alcohol advertising on our Nation's youth and to develop recommendations on potential options to combat the effect of alcohol advertising on young people.

*Moderate drinking.*—The Committee supports funding by the NIAAA of studies of the benefits and risks of moderate alcohol consumption and the impact of alcohol consumption on human health. The Committee looks forward to learning more about the Institute's efforts in this area during the hearings on the fiscal year 1999 budget.

#### NATIONAL INSTITUTE ON DRUG ABUSE

Appropriations, 1997 .....	\$489,160,000
Budget estimate, 1998 .....	521,915,000
Committee recommendation .....	531,751,000

The Committee recommends an appropriation of \$531,751,000 for the National Institute on Drug Abuse [NIDA]. This is \$9,836,000 more than the budget request and \$42,591,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—Created in 1974, NIDA supports about 85 percent of the world's biomedical research in the area of drug abuse and addiction. The Committee commends NIDA for demonstrating

through research that drug use is a preventable behavior and addiction is a treatable disease of the brain. NIDA's basic research plays a fundamental role in furthering knowledge about the ways in which drugs act on the brain to produce drug dependence and contributes to understanding how the brain works. In addition, NIDA research identifies the most effective pharmacological and behavioral drug abuse treatments. NIDA conducts research on the nature and extent of drug abuse in the United States and monitors drug abuse trends nationwide to provide information for planning both prevention and treatment services. An important component of NIDA's mission is also to study the outcomes, effectiveness, and cost benefits of drug abuse services delivered in a variety of settings.

*Behavioral and cognitive science.*—The Committee agrees that research should inform the Nation's policies on treating and preventing drug abuse and commends NIDA for its aggressive pursuit of an expanded behavioral science research portfolio to investigate such critical questions as why people initiate drug use and why some become dependent on drugs. The Committee commends NIDA's recent efforts to increase the number of cognitive scientists studying issues relating to drug abuse.

*Putting research to work for drug abuse prevention.*—The Committee congratulates NIDA for its recently released research based guide. The Committee is pleased that the guide is being distributed to schools and community groups nationwide.

*Sobriety programs.*—The Committee is very concerned by the high incidence of alcoholism and alcohol abuse among children and adolescents of Native Alaskan and native Hawaiian descent. The Committee encourages NIDA to work with existing native American organizations to assess and increase their effectiveness.

*Information dissemination and education.*—The Committee is pleased that NIDA continues to reach out to communities across the country to provide research-based information to scientists, practitioners, policymakers, and the public. The Committee encourages NIDA to continue to develop culturally appropriate research-based materials, work with local community-based networks and hold town meetings at various locations to present the latest scientific information available to prevent and treat drug abuse and addiction.

*Methamphetamine initiative.*—Recognizing that methamphetamine abuse is a growing problem of alarming proportions in the Western United States, the Committee is very pleased that NIDA sponsored a regional meeting in San Francisco to bring together scientists, practitioners, policymakers, and members of the community to discuss the most current research on methamphetamine effects and to identify those research areas that are the most promising.

*Treatment initiative.*—Behavioral therapies are often the only available treatments for drug problems where no medication yet exists. The Committee applauds NIDA's treatment initiative which is directed toward transplanting the knowledge in behavioral science into new and useful therapies and for laying the groundwork for the integration of both behavioral and pharmacotherapies.

*Genetic research.*—Great strides have been made in understanding of human genetics. The Committee encourages NIDA to continue working to identify genes that contribute to individual vulnerability to drug addiction. This research may ultimately lead to the development of new and more effective prevention and treatment strategies.

*Children and adolescents.*—Addiction affects every segment of American society, but nowhere is it more devastating in its consequences than among our Nation's youth. The Committee recognizes that NIDA's research is providing critical insights into the factors that place young people at particular risk for drug abuse. NIDA is also identifying those characteristics that protect against drug abuse, and it is providing the foundation on which to build effective, research-based drug abuse prevention strategies. The Committee is pleased that NIDA has launched a special initiative on children and adolescent research to speed progress in this important area.

#### NATIONAL INSTITUTE OF MENTAL HEALTH

Appropriations, 1997 .....	\$701,107,000
Budget estimate, 1998 .....	728,249,000
Committee recommendation .....	753,334,000

The Committee recommends an appropriation of \$753,334,000 for the National Institute of Mental Health [NIMH]. This is \$25,085,000 more than the budget request and \$52,227,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The research programs of the Institute lead the Federal effort to identify the causes of—and the most effective treatments for—mental illnesses, which afflict more than one in five Americans. Severe mental illnesses affect 2.8 percent of the U.S. adult population annually, approximately 5 million people. These individuals suffer from disorders such as schizophrenia, manic-depressive illness, major depression, panic disorder, and obsessive-compulsive disorder. One result of the Federal research investment has been a growing awareness that undiagnosed and untreated mental illness, in all its forms and with all of its consequences, is as damaging as physical illness is to the Nation's well-being.

*Rural mental health.*—The Committee notes that the stigma associated with seeking behavioral and mental health services is particularly strong in rural areas and believes that an effective way of providing those services may be through an established and accepted rural institution such as the Extension Service. The Committee is aware of the successful use of this model in Florida following Hurricane Andrew and in North Dakota following the recent floods. The Committee, therefore, encourages the Institute to initiate a workshop and give consideration to supporting an additional service delivery research center to further develop this approach.

*Elderly suicide.*—The Committee is concerned that the rate of elderly suicide has increased by 9 percent between 1980 and 1992. The Committee has also learned from information provided by CDC that many older Americans who commit suicide have contacted a physician in the month before the suicide. The Committee, there-

fore, requests the NIMH to study the extent of this problem and make recommendations on how to address the problem, including the need for primary care physicians to make appropriate referrals. The Committee recommends that the NIMH consider seeking input from the Substance Abuse and Mental Health Services Administration on this problem.

*Aging.*—The Committee is supportive of increased attention to mental health research on our aging population. This group of individuals is the fastest growing segment of our population and proactive efforts are necessary to meet the challenges of the future.

*Reorganization.*—The Committee is aware that NIMH is undergoing a reorganization to improve connections between basic and clinical research, connections between disciplines, and to reflect promising new directions in mental health research. The Committee applauds this approach. The Committee looks forward to the NIMH Director's update on these issues of interest to the Committee.

*Eating disorders.*—The Committee encourages the Institute to provide additional funding for direction to the research for prevention of eating disorders (defined as anorexia nervosa, bulimia, and binge eating disorder), including research on the development of psychosocial and behavioral interventions and strategies aimed at reducing the incidence of eating disorders.

*Children and adolescents.*—The Committee is pleased that NIMH is placing a high priority on research to better understand childhood and adolescent mental disorders. Too little is known about the emotional development of children and adolescents, and even less about preventive interventions. The Committee encourages NIMH to increase its research about all childhood mental disorders, including a full range of preventive interventions and treatment based on behavioral approaches as well as medications. The Committee would appreciate a progress report during next year's hearing.

*Prevention.*—The Committee is pleased that a workgroup of NIMH Advisory Council is examining the current state of NIMH prevention research. The Committee places a high priority on prevention research, particularly with respect to mental disorders among children and adolescents. In addition, the Committee encourages NIMH to magnify its efforts to address the critical shortage of researchers in the area of prevention.

*Social work research.*—The Committee commends NIMH for funding its fifth social work research development center, and urges NIMH to support an expanded research program in this area.

*Fundamental neuroscience.*—The Committee encourages the Institute to continue to support research to understand the brain, how it functions, and how those functions go wrong in mental illness. The Committee maintains its interest in the human brain project, which, in supporting research that combines neuroscience and advanced informatics research, and has spawned the new scientific area of inquiry called neuroinformatics.

*Bipolar disorder.*—Bipolar disorder is a severe, chronic brain disorder which affects an estimated 4 million Americans. The Committee is concerned about funding for research on bipolar disorder and

requests that the Director give consideration to developing a national research plan for bipolar disorder. The Committee also requests that the Director be prepared to report at next year's hearings on the level of funding for this research and on the Institute's plans to support and enhance this effort.

*Autism.*—The Committee recognizes that research into the genetics of autism is being supported by several Institutes at the NIH. Given the difficulty of recruiting multiplex families, the Committee requests that researchers be strongly encouraged to collaborate and share this important resource. To that end, the Committee recommends the NIMH consider supporting a collaborative autism gene bank and notes that one is already in existence, the autism genetic resource exchange.

*Program reviews.*—The Committee notes the active steps taken by the Director in his first year to review critical Institute activities. These have included independent reviews of the Institute's intramural research program, its program of psychiatric genetics research, its prevention portfolio, its overall communications activities, and of a major study of the prevalence of, and service systems for, child and adolescent mental disorders, UNOCCAP. The Committee believes that such periodic indepth assessments of the Institute's research programs and opportunities assures the most productive use of the Institute's resources.

*Mental health parity.*—The Committee read with interest the interim report on "Parity in Coverage of Mental Health Services in an Era of Managed Care," and looks forward to seeing additional reports on this topic as more data from throughout the country become available. The Committee further requests that the National Advisory Mental Health Council provide, as a fundamental part of its next report on this topic, what is known about the impact of managed care on access to mental health services, and on the quality of the care that is made available. The Committee requests that such a report be prepared under section 406(g) of the Public Health Service Act, and that it be submitted before next year's hearings.

#### NATIONAL CENTER FOR RESEARCH RESOURCES

Appropriations, 1997 .....	\$415,095,000
Budget estimate, 1998 .....	410,921,000
Committee recommendation .....	455,805,000

The Committee recommends an appropriation of \$455,805,000 for the National Center for Research Resources [NCR]. This is \$44,884,000 more than the budget request and \$40,710,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NCRR develops and supports critical research technologies and shared resources that underpin research to maintain and improve the health of our Nation's people. The NCRR programs develop a variety of research resources; provide biomaterial and resources for complex biotechnologies, clinical research, and specialized primate research; develop research capacity in minority institutions; and enhance the science education of precollege students and the general public.

*Extramural facilities.*—The Committee has included \$20,000,000 for extramural biomedical facility renovation and construction, \$16,000,000 above the amount requested by the administration. These funds are to be awarded on a competitive basis consistent with sections 481(A) of the Public Health Service Act.

The Committee notes that the University of Colorado Health Sciences Center has the only NCI-designated cancer center in the Rocky Mountain west region. It serves more than 6 million people in a seven-State region. The cancer center research and clinical facilities are being colocated in Aurora, CO, as part of the conversion and redevelopment of the Fitzsimons Army Medical Center. The Committee strongly urges the NIH to consider a proposal from the UCHSC for this project.

The Committee encourages that every appropriate consideration be given to support the Florida-based Batchelor Children's Research Center to develop a comprehensive children's biomedical research, training, and treatment facility dedicated to at-risk children in Miami's urban core. The center will focus on oncology and unique blood transplantation and genetic epidemiological work critical to the needs of African-American and Hispanic populations, as well as pediatric critical care, including AIDS, cystic fibrosis, asthma, and other respiratory diseases and neonatology.

The Committee also is aware of a proposal from the School of Pharmacy at the University of Montana. The Committee urges the Director to give full and fair consideration of a proposal from this institution.

*IdeA grants.*—The Committee has provided \$5,000,000 for the Institutional Development Award [IDeA] Program authorized by section 402(g) of the Public Health Service Act. This is \$2,400,000 over both fiscal year 1997 and the budget request. The program is intended to broaden the geographic distribution of NIH funding of biomedical research through enhancing the competitiveness of institutions that conduct biomedical and behavioral research which historically have had low rates of success in obtaining funding. The Committee intends that the increase is to be used in eligible States to cofund high quality applications for shared instrumentation and RO-1 proposals that would otherwise not receive support under the normal peer-review cycle. The Committee believes that the existing Shannon Awards Program can serve as the model for deciding which grants should be selected by NCRB for funding under the expanded IdeA Program.

*Clinical research.*—In its 1994 report on clinical research, the Institute of Medicine of the National Academy of Sciences describes the GCRC's as a nationwide resource that could be used to increase the number of scientific advances that are translated to the bedside. As such, the GCRC's are critical to the NIH's ability to fulfill its mission and should be the highest priority within the budget for the NCRB. The Committee is concerned about dwindling private sector support for clinical research and reductions made in GCRC grants below the advisory council-approved budgets. The Committee requests a report from the NCRB Director by February 1, 1998, as to the funding that would be necessary to support the current number of GCRC's at levels approved by the advisory council. The Committee also requests information as to whether grants have

been received and favorably reviewed for the establishment of additional GCRC's. In the interim, the Committee has provided funds sufficient for a \$10,000,000 increase in the GCRC program.

*Research centers in minority institutions.*—The Committee recognizes the continued importance of the minority institutions in addressing the health research and training needs of our minority populations. The Research Centers in Minority Institutions [RCMI] Program continues to impact significantly on these problems. The Committee encourages NIH to evaluate the budgetary requirements of this program and additional funding as required.

The Committee recognizes the health research and training needs of Alaska Natives and Aleuts and requests that the National Center for Research Resources recognize the University of Alaska as a minority school for purposes of qualifying for support under its Research Centers in Minority Institutions Program.

*Biomedical research support grants.*—The Committee recognizes the value of maintaining research facilities and equipment and providing initial support for young investigators and bridge support for established researchers. For years, the NIH utilized the biomedical research grants program to provide flexible funds to strengthen and stabilize NIH-supported researchers and research programs and academic health centers redirected portions of clinical revenues to make up for research shortfalls. Since 1992, however, no funds have been requested for the BRSG program. In addition, the Committee has received testimony from the extramural research community that the transformation of the health care system to a market-driven, managed-care system, has greatly stressed the research programs at academic medical centers where much of NIH-supported research is performed. The Committee requests that the NIH study the feasibility of reestablishing a revised biomedical research support grants program or creating another mechanism which would assist with unmet needs in this area. The Committee would expect that funds would be provided for direct costs only, would be rigorously peer-reviewed at the institutional level, and would be administered with full accountability.

*Research equipment.*—The Committee is aware of a request of the Children's Hospital and Medical Center of Seattle for Federal assistance for its large medical laboratory equipment needs to support NIH-funded research at eight research laboratories within the hospital and at the new pediatric clinical research center. The Committee requests that every appropriate consideration be given to a grant proposal submitted from this Institute within the normal competitive review process.

The Committee recognizes the importance of the shared instrumentation grants program to providing academic research centers with opportunities to purchase equipment needed to better understand, diagnose, and treat disorders, such as severe mental illness. The Committee encourages the Director to give consideration to supporting grants for facilities and advanced instrumentation equipment, including magnetic resonance brain scanning devices, at sites performing research on the causes and treatment of severe mental illness.

*Alternative research resources.*—The Committee supports the expansion of existing alternative resources to the use of animals, par-

ticularly through ensuring increased access by researchers to human tissues and organs for research purposes. The Committee is aware of the centers support for human tissue repositories. The Committee urges the Director to expand its support for these alternative resources, including giving strong consideration to a multi-Institute initiative geared to increase support in this area and respond to the research community's growing need for human tissues and organs.

NATIONAL HUMAN GENOME RESEARCH INSTITUTE

Appropriations, 1997 .....	\$189,529,000
Budget estimate, 1998 .....	205,187,000
Committee recommendation .....	218,851,000

The Committee recommendation includes \$218,851,000 for the National Human Genome Research Institute [NHGRI]. This is \$13,664,000 more than the budget request and \$29,322,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The NHGRI coordinates extramural research and research training for the NIH component of the human genome project, an international effort to determine the location and sequence of the estimated 100,000 genes which constitute the human genome. The division of extramural research supports research in genetic and physical mapping, DNA sequencing and technology development, data base management and analysis, and studies of the ethical, legal, and social implications of human genome research. The division of intramural research [DIR] focuses on applying the tools and technologies of the human genome project to understanding the genetic basis of disease and developing DNA-based diagnostics and gene therapies. Since its establishment in 1993, the intramural program has developed a strong research program and forged collaborative ties with several of the NIH research institutes to unravel the complexities of genetic diseases such as diabetes, breast and colon cancer, and melanoma.

*Primary immune deficiency diseases.*—Of the 70 diseases that are categorized as primary immune deficiencies, scientists have identified the genetic basis of about one-third. Continued emphasis on these diseases is important because of the role they play in understanding many other diseases. In addition, the Committee notes that the only successful gene therapy experiments to date have involved children with primary immune deficiencies, suggesting that these diseases might teach researchers a great deal about this evolving area of medicine. The Committee urges NHGRI to maintain its focus on this important category of diseases and to continue to seek the genetic causes of each one as a means to further its mission of the identification of disease-related gene mutations.

JOHN E. FOGARTY INTERNATIONAL CENTER FOR ADVANCED STUDY IN  
THE HEALTH SCIENCES

Appropriations, 1997 .....	\$26,557,000
Budget estimate, 1998 .....	27,168,000
Committee recommendation .....	28,468,000

The Committee recommends an appropriation of \$28,468,000 for the Fogarty International Center [FIC]. This is \$1,300,000 more than the budget request and \$1,911,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The primary function of the FIC is to improve the health of the people of the United States and other Nations through international cooperation in the biomedical sciences. In support of this mission, the FIC pursues the following four goals: mobilize international research efforts against global health threats; advance science through international cooperation; develop human resources to meet global research challenges; and provide leadership in international science policy and research strategies.

*Global tuberculosis [TB].*—The Committee has become increasingly concerned with the growing global health threat posed by TB and understands that there exists a serious shortage of trained TB health professionals capable of setting up model in-country TB control programs. The Committee commends the FIC for its cooperation and collaboration with the International Union Against Tuberculosis and Lung Disease [IUATLD], and encourages the Center work with the IUATLD to further develop a training program for TB professionals.

*Emerging infectious diseases.*—In recent years, epidemics have surfaced that threaten public health in the United States and abroad; examples are hantavirus, dengue, ebola virus, cholera, tuberculosis, malaria, and HIV/AIDS. The Committee recognizes the continuing need for international efforts to detect and contain diseases before they become global epidemics and commends the FIC's efforts in initiating a program that addresses global emerging and reemerging infectious diseases. The Committee encourages the Center to expand its efforts in the international training and research program in emerging infectious diseases.

*Global priorities.*—The Committee notes the importance of efforts to address other global priorities, such as population and health, environmental and occupational health, and biodiversity. FIC programs that address these issues provide opportunities to improve maternal and perinatal health through biomedical research and increase demographic and behavioral research capabilities. The Committee has included additional funding above the President's request for the furtherance of these important efforts.

*Bioinformatics.*—The Committee encourages the FIC, in cooperation with the National Library of Medicine, to establish a training program in bioinformatics and medical librarianship to link United States scientists and health professionals with counterparts in developing nations and the former Soviet Union.

*International Center for Health Research.*—The Committee is concerned with the dramatic increase in the past two decades of emerging and reemerging infectious diseases, including the high rate of AIDS and tuberculosis among minority populations in densely populated areas. The Committee is especially concerned with the introduction of these and other diseases from air travelers and migration from Latin America and the Caribbean. The Committee is, therefore, encouraged by the research conducted at the

University of Miami's International Center for Health Research to help control the emergence and migration of infectious diseases and encourages consideration be given to providing funding for this important work.

NATIONAL LIBRARY OF MEDICINE

Appropriations, 1997 .....	\$150,828,000
Budget estimate, 1998 .....	155,968,000
Committee recommendation .....	162,825,000

The Committee recommends an appropriation of \$162,825,000 for the National Library of Medicine [NLM]. This is \$6,857,000 more than the budget request and \$11,997,000 more than the 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

*Mission.*—The National Library of Medicine is the Federal institution that for more than 150 years has collected, organized, preserved, and disseminated the world's output of biomedical literature in all forms. As a result of this activity the Library is the world's largest library of the health sciences, its holdings numbering more than 5,000,000 items. The NLM, as part of the National Institutes of Health, has pioneered in creating innovative methods to disseminate bibliographic information. Basic to the mission of the NLM is a wide-ranging research program to improve how medical information is communicated. This responsibility is aided by a grants program and by specialized services in toxicology, environmental health, and biotechnology.

*High-performance computing and communications.*—The Committee has been impressed with NLM's stewardship of health projects related to the High-Performance Computing and Communications Program. The recent series of awards to develop and evaluate telemedicine test-bed networks is well conceived and will provide much valuable data for future health care efforts. The Committee is pleased that NLM is now one of six Government agencies involved in the NGI initiative and has increased the NLM budget above the President's request to demonstrate new HPCC-related health applications. Specifically, to demonstrate new HPCC-related health applications the Committee has provided an additional \$7,000,000.

*Outreach.*—The Committee encourages NLM to continue its special outreach program to the Nation's health professionals and, to the extent possible, to the public. Enlarging the scope of the NLM outreach program is now feasible because of the increasing use of the Internet and World Wide Web by the public to find health-related information. Recently, members of the Committee were pleased to participate in the announcement of free MEDLINE access over the World Wide Web. This will be of inestimable value not only to the Nation's health professionals, but to the public at large. The resulting access to high-quality health information would be an important step to improving the public health and would build upon the national investment already made in telecommunications connectivity.

## OFFICE OF THE DIRECTOR

Appropriations, 1997 .....	\$286,810,000
Budget estimate, 1998 .....	270,159,000
Committee recommendation .....	292,196,000

The Committee recommends an appropriation of \$292,196,000 for the Office of the Director [OD]. This is \$22,037,000 more than the budget request and \$5,386,000 more than the fiscal year 1997 appropriation. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research. The recommendation also includes \$40,266,000 within the Office of the Director to support the activities of the OAR as proposed in the budget request.

*Mission.*—The Office of the Director provides leadership and direction to the NIH research community, and coordinates and directs initiatives which crosscut the NIH. The Office of the Director is responsible for the development and management of intramural and extramural research and research training policy, the review of program quality and effectiveness, the coordination of selected NIH-wide program activities, and the administration of centralized support activities essential to operation of the NIH.

*The Office of Research on Women's Health.*—The Office of Research on Women's Health [ORWH] works to coordinate, refine, and expand the programs and activities of the NIH to address the inclusion of women in clinical research and to promote biomedical careers for women. In addition, the ORWH is charged with developing new collaborative initiatives to address continuing gaps in knowledge about women's health which affect both mortality and morbidity.

*Women's health initiative.*—This initiative is a large cross Institute study regarding the prevention of conditions afflicting a large number of women, such as, breast cancer, heart disease, and osteoporosis. There are three components of the study: a clinical trial, an observational study, and a community prevention study. In fiscal year 1998, funds will be used to support continued activities in the coordinating center and the participating clinical centers.

*Office of Research on Minority Health.*—The Office of Research on Minority Health [ORMH] is the coordinating office for minority health research and research training efforts at the NIH. ORMH programs strive to improve the health status of all minorities across the lifespan and to increase the numbers of minorities pursuing careers in the biomedical sciences. Additional activities of the ORMH include providing supplemental support to ICD projects, developing programs to increase minority participation in clinical trials, initiating and supporting infrastructure development projects at minority institutions, and developing programs to increase the competitiveness of grant applications submitted by minority researchers.

The poor health outcomes of minority populations, particularly those who are low-income, is well documented. To improve the health outcomes of all minorities, the Committee urges the ORMH to work collaboratively with individual NIH Institutes and outside organizations to advance research on psychosocial care and inter-

vention among lower socioeconomic minority groups and to support research training opportunities for minority social work researchers.

The Committee encourages the Director to give full and fair consideration to a proposal received from the Seattle Indian Health Board's American Indian Family Practice Residency Program. This collaborative effort involves a 3-year program that recruits and trains family practice physicians into service to American Indian and Native Alaska populations.

*Minority health initiative.*—The minority health initiative [MHI] is tailored to improve the overall health of minorities through expanded research and to provide training to more minority biomedical researchers. The goals of the MHI include continuing initiatives in collaboration with several Institutes, addressing newly emerging areas of research such as: health and behavioral effects of lead exposure in childhood in inner-city neighborhoods and the health of minority women. In addition, MHI funds will support all minority research training efforts.

*Office of Behavioral and Social Sciences Research [OBSSR].*—The Committee is pleased that OBSSR is fulfilling its mission to coordinate behavioral and social sciences research at NIH and leveraging its modest budget to ensure that cross-directorate research and training initiatives are more easily funded. The Committee is particularly interested in two recent projects of the Office, the request for applications on innovative initiatives for behavior change, and the interdisciplinary training initiative. The Committee requests a brief report on each of these initiatives, including which Institutes are contributing, how many applications are received, and summaries of applications that are ultimately funded. In particular, the Committee encourages OBSSR to develop proposals for methodological research that would follow up on the successful conference, "The Science of Self Report." The Committee also encourages NIH to evaluate the possibility of realigning OBSSR within an existing Institute such as the National Institute for Nursing Research.

The Committee understands that the Office of Behavioral and Social Sciences Research is providing additional support to individual Institutes to supplement their National Research Awards [NRSA's] for behavioral science researchers. The Committee is encouraged by this initiative, and sees it as a step in a broader, NIH-wide strategy for implementing the recommendations of the National Academy of Sciences.

*Clinical research.*—In 1995 and again last year, the Committee recommended that the NIH Director move forward with implementation of the recommendations of the Institute of Medicine report on careers in clinical research. Further the Committee urged the Director to improve the peer review of clinical research grant proposals. The Committee is extremely concerned about the state of clinical and translational research. NIH efforts to address issues related to large-scale clinical trials are commendable, but do not sufficiently respond to this Committee's repeated expressions of concern about investigator-initiated clinical/translational research. The NIH cannot fulfill its mission to improve human health if the Nation's clinical research capacity continues to deteriorate. Accord-

ingly, the Committee recommends that the Director initiate new programs to train and provide stable funding for extramural clinical/translational researchers. The Committee requests a report from the Director by January 31 on specific initiatives undertaken to enhance extramural clinical research training and project support in the extramural program.

*Pediatric research.*—The Committee recommendation provides sufficient funds to allow for the expansion of the pediatric research initiative to at least \$20,000,000 in fiscal year 1998. The Committee intends that the Office of the Director continue to work with the Institutes to coordinate this high priority research related to the illnesses and conditions affecting children.

The Committee recognizes that a specific focus often has been needed to assure that biomedical research addresses illnesses and conditions affecting children. The Committee, therefore, encourages the NIH to strengthen its portfolio of basic, behavioral, and clinical research for children overall. It also encourages the NIH to continue its progress toward increasing the participation of children in NIH-supported clinical research trials, including the expeditious implementation of the policy revisions in fiscal year 1997.

*Diabetes.*—In light of the enormous human and economic costs of diabetes and the cross-Institute nature of diabetes research at the NIH, the Committee urges the Director, in collaboration with the Director of the NIDDK, to consider the establishment of a diabetes research working group to develop a comprehensive plan for NIH-supported diabetes research. Members of the working group could include: high-level representatives from those Institutes that have diabetes research portfolios; leading diabetes researchers; representatives from industry; and leaders of organizations that represent people with diabetes. The Director of the NIDDK and the Diabetes Mellitus Interagency Coordinating Committee should work closely with the working group in the development and implementation of the diabetes research plan.

*Chronic fatigue and immune dysfunction syndrome.*—The Committee encourages the Director to consider identifying appropriate NIH advisory committees for CFIDS representation and ensuring appointment of appropriate persons thereon. The Committee is pleased that the CFS program announcement issued by NIH last year demonstrated a cross-Institute commitment to funding promising CFIDS research, but notes that it did not include participation by the National Institute on Child Health and Human Development. The commitment made by NIH at the May 29, 1997, CFS Coordinating Committee meeting to hold a workshop on pediatric CFIDS is a positive step and the Committee strongly urges NIH to involve other relevant agencies, such as the Centers for Disease Control and Prevention and the Health Resources and Services Administration, in the planning and execution of that workshop.

*Office of Dietary Supplements.*—The Committee continues to strongly support the important work of this Office. Use of dietary supplements has increased significantly among Americans who want to improve their health and prevent disease. There is a great need for additional research to better inform consumers of the health benefits of supplements. The President's Commission on Dietary Supplements recently recommended that the Office be funded

at its fully authorized level to meet this need. While overall funding limits prevent the Committee from fully meeting this request, the Committee has included sufficient funds to raise support for ODS in fiscal year 1998 and encourages the Director to expand the staffing of the Office to a level sufficient to meet its statutory mission.

*Neurodegenerative and brain disorders initiative.*—The Committee recommendation provides sufficient funds to allow for the expansion of the neurodegenerative initiative begun in fiscal year 1996 to \$17,000,000 in fiscal year 1998. The Committee intends that the Office of the Director continue to work with the relevant institutes to coordinate this high-priority research related to costly conditions, such as Parkinson's disease, Alzheimer's disease, and ALS.

*Sleep disorders.*—The Committee encourages the NIH Director to continue leadership activities in facilitating the implementation of the national sleep disorders research plan, and collaboration between NIH Institutes.

*Hepatitis C.*—The Committee notes that the March 1997 Hepatitis C [HCV] Consensus Conference made significant new research recommendations that impact several NIH Institutes and, therefore, requests that the Office of the Director coordinate the necessary research in order to most effectively respond to the HCV epidemic.

*Young investigators.*—The Committee is pleased that three Institutes, NIMH, NIDA, and NIA, have established small grant mechanisms for young investigators in behavioral science research. The Committee continues to encourage other National Institutes to develop mechanisms similar to these behavioral science track award for rapid transition [B/START] programs.

*Disadvantaged populations.*—The Committee has provided adequate funding for the continuation and growth of a variety of competitive programs at NIH that emphasize improving the health status of disadvantaged populations, including racial and ethnic minorities. The Committee has placed a special emphasis on MARC, MBRs, RCMI, and ORMH programs, and expects these programs to continue to be supported at a level consistent with that of the overall increase for NIH.

*Autoimmune disease.*—Autoimmunity is the root of a family of over 80 interrelated major diseases that cut across the Institutes at the NIH. The Committee is aware of a recommendation to establish a coordinating council on autoimmune disease research to improve the use of existing research funds and facilitate the application of important findings among the many research programs dealing with autoimmune diseases at the NIH. The Committee requests that the Director give careful consideration to the creation of such a committee.

*Nutrition science.*—The Committee urges NIH to reaffirm its commitment to nutrition science as a major cross cutting research priority, which enables understanding of the relationship of diet to cancer, diabetes, child development, heart disease, and hypertension. The Committee is particularly concerned with the integration of basic science, such as molecular genetics, and clinical science; and believes that clinical nutrition research units, obesity

centers and similar program project grants are an important method of advancing nutrition science through the integration of basic and clinical science and through training programs which permit nutritional scholars to develop training in molecular genetics and clinical science.

*Clinical depression and the elderly.*—The Committee is concerned that the rate of elderly suicide has increased by 9 percent between 1980 and 1992. It is recognized that elderly suicide is a preventable public health tragedy, as the majority of victims have major depression, and most have visited their primary care physician within 1 month prior to their suicide. The Committee encourages the expansion of research efforts, including the further study of the psychiatric, psychological, social, and medical risk factors associated with suicide, and understanding why so few depressed elderly, receive appropriate treatment. The Committee recommends that NIH study the extent of this problem, including the need for primary care physicians to make appropriate referrals and expects a report on this subject by February 15, 1998.

*Child abuse and neglect research.*—The Committee recognizes the magnitude and significance of the problem of child abuse and neglect. The Committee applauds NIH, under the leadership of NIMH, for convening a working group of its component organizations to facilitate collaborative and cooperative efforts on child abuse and neglect research and urges the continuation of the working group. In addition, the Committee encourages the working group to hold a conference on child abuse and neglect and to assess the state-of-the-art science and make recommendations for a research agenda in the field, and include in this conference other Federal agencies, relevant outside organizations and experts in the field. The Committee requests that NIH be prepared to report on current and proposed NIH efforts in this area at the fiscal year 1999 hearings.

*National Foundation for Biomedical Research.*—Funds provided to the Office of the Director include \$500,000 to support the National Foundation for Biomedical Research as authorized by section 499 of the Public Health Service Act. Funds were first provided for the NFBR in fiscal year 1997; these additional funds will allow NFBR to hire staff and begin projects in support of the NIH mission. It is the intention of the Committee that the NFBR become self-sufficient as quickly as possible.

*Research management and support review.*—The Committee is aware that the NIH has undertaken a review of the agency's research management and support activities and costs with the view toward further streamlining the agency's administrative practices. Given the out-year budget constraints laid out in the balanced budget agreement, the Committee believes this is a timely and critical review. The identification of greater efficiencies will be essential to maintaining a vibrant extramural and intramural research program over the next 5 years. The Committee looks forward to the examination of this review later this year and working with the Director in the implementation of the recommendations.

*Cancer in minorities study.*—The Committee is concerned about the slow progress in moving forward with the Institute of Medicine Study of the status of research into cancer among minorities and

the medically underserved. The Committee finds it difficult to understand why it has taken over 9 months to get this study underway. The Committee requests that the NIH move without delay to ensure that study arrangements are concluded within 30 days or provide notification to the Committee of the reasons for further delay.

*National High Magnetic Field Laboratory.*—The Committee commends NIH for responding to its recommendation in fiscal year 1997 on NIH participation in the National High Magnetic Field Laboratory. The Committee intends that NIH more fully explore an interagency financial and research participation agreement with the laboratory so the research can be more fully shared with NIH and applied to NIH research initiatives. The Committee encourages the Director to participate in negotiations on an appropriate interagency participation agreement.

*Office of Alternative Medicine.*—The Committee continues to strongly support the work of the Office of Alternative Medicine [OAM] and has included \$13,000,000 to support the work of this office. This is \$1,000,000 over the level provided for 1997 and \$5,500,000 over the budget request. The Committee directed NIH to establish this Office in 1992 with the intent of assuring objective rigorous review of alternative therapies to provide consumers reliable information. However, it is now clear that without greater authority to initiate research projects and develop its own peer review panels, alternative therapies will not be adequately reviewed and inefficiencies will remain. Currently, much time and resources are wasted because the Office must work through an Institute in order to carry out research projects. The Committee encourages the authorizing committee to give consideration to enhancing the Office's authority during the reauthorization process for the National Institutes of Health.

In addition, the Committee is very concerned that despite repeated instructions OAM has not completed even one field investigation of an alternative therapy. The Committee, therefore, directs OAM to undertake field investigations to investigate and validate promising alternative and complementary therapies and to implement an aggressive program for the collection and evaluation of outcome data on promising alternative therapies. The Committee also is concerned that despite the existence of unfunded and underfunded OAM initiated projects, OAM expended a significant portion of its appropriated funds to supplement existing projects already funded through other Institutes. The Committee urges OAM to use appropriated funds for OAM initiated projects. The existing centers and the field investigation/outcome data initiatives should receive high priority for these funds.

*Pain research.*—The Committee remains interested in research on complementary methods such as chiropractic care to treat low back pain. A report released by the Agency for Health Care Policy and Research estimates that the total annual societal costs of back pain range from \$20,000,000,000 to \$50,000,000,000. Recent research also indicates that spinal manipulation is an effective form of initial treatment for acute low back problems. The Committee has included sufficient funds to increase support for the Center on Chiropractic Health Care and Manipulative Methods.

The Committee commends the NIH for the creation of the pain consortium. While the consortium is a positive development, the Committee remains concerned about the overall commitment to pain research. The Committee also remains concerned about the extent to which the consortium is integrating its efforts with research initiatives outside the NIH. The Committee encourages the NIH to involve other relevant agencies in the work of the consortium, particularly those where a considerable amount of pain research is being conducted.

#### BUILDINGS AND FACILITIES

Appropriations, 1997 .....	\$200,000,000
Budget estimate, 1998 .....	190,000,000
Committee recommendation .....	211,500,000

The Committee recommends an appropriation of \$211,500,000 for buildings and facilities [B&F]. This is \$21,500,000 more than the budget request and \$11,500,000 more than the fiscal year 1997 appropriation.

*Mission.*—The buildings and facilities appropriation provides for the NIH construction programs including design, construction, and repair and improvement of the clinical and laboratory buildings and supporting facilities necessary to the mission of the NIH. This program maintains physical plants at Bethesda, Poolesville, Baltimore, and Frederick, MD; Research Triangle Park, NC; Hamilton, MT; Perrine, FL; New Iberia, LA; and Sabana Seca, PR.

*Clinical research center.*—The recommendation includes \$90,000,000 in fiscal year 1998 for the third year of funding for the new Mark O. Hatfield Clinical Research Center. This is in addition to \$113,000,000 appropriated in fiscal years 1996–97. The recommendation does not include the advance appropriation requests totaling \$130,000,000 as proposed in the budget request. This Center will replace the aging research hospital and related clinical laboratory facility and serve as the heart of the NIH intramural research program. The new clinical research center is currently being designed. To date, development of the detailed program requirements has been substantially completed; detailed design is being developed for the relocation of the existing clinical center entrance; and the verification of the project budget estimate based on the preliminary design concept and schematic drawings is being finalized. The Committee requests that the Director provide notification of any revised project cost estimate that exceeds the current projected cost of \$310,000,000.

*AIDS vaccine lab building.*—The recommendation includes funding to construct a laboratory to house the newly established Vaccine Research Center at the NIH. The Center, which will be a joint venture of the National Cancer Institute and the National Institute of Allergy and Infectious Diseases, will begin by incorporating a core of NIH scientists with interest and expertise in immunology, virology, and HIV vaccine research. The primary focus for the Center will be to stimulate multidisciplinary research from basic and clinical immunology and virology through to vaccine design. Construction of this state-of-the-art facility will help in both the recruitment of accomplished scientists from outside the NIH ranks

and in accelerating progress in developing a safe and effective AIDS vaccine.

OFFICE OF AIDS RESEARCH

Appropriations, 1997 .....	
Budget estimate, 1998 .....	\$1,540,765,000
Committee recommendation .....	

The Committee recommendation does not include a direct appropriation of \$1,540,765,000 for the Office of AIDS Research [OAR] as proposed in the budget request. Instead, funding for AIDS research is included within the appropriation for each Institute, Center, and Division of the NIH. The recommendation also includes a general provision which directs that the funding for AIDS research, as determined by the Directors of the National Institutes of Health and the OAR, be allocated directly to the OAR for distribution to the Institutes consistent with the AIDS research plan. The recommendation also includes a general provision permitting the Directors of the NIH and the OAR to shift up to 3 percent of AIDS research funding between Institutes and Centers throughout the year if needs change or unanticipated opportunities arise. These modifications to the budget recommendation are consistent with the manner in which funding for AIDS research was provided in fiscal year 1997. The Committee requests that the Director report on the fiscal year 1998 allocation plans for AIDS research within 60 days of enactment and provide notification to the Committee in the event the Directors exercise their 3 percent transfer authority.

The NIH Office of AIDS Research [OAR] coordinates the scientific, budgetary, legislative, and policy elements of the NIH AIDS research program. Congress provided new authorities to the OAR to fulfill these responsibilities in the NIH Revitalization Act Amendments of 1993. The law mandates the OAR to develop an annual comprehensive plan and budget for all NIH AIDS research and to prepare a Presidential bypass budget.

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

Appropriations, 1997 .....	\$2,121,512,000
Budget estimate, 1998 .....	2,155,943,000
Committee recommendation .....	2,126,643,000

The Committee recommends \$2,126,643,000 for the Substance Abuse and Mental Health Services Administration [SAMHSA] for fiscal year 1998. In addition, \$50,000,000 was provided for substance abuse treatment in Public Law 104-121, and \$10,000,000 in section 241, 1 percent evaluation set-aside funds was provided for State level data collection, which brings the program total for SAMHSA to \$2,186,643,000. This is \$15,131,000 more than the fiscal year 1997 level. SAMHSA is responsible for supporting mental health, alcohol abuse, and other drug abuse prevention and treatment services throughout the country, primarily through categorical grants and block grants to States. The Committee has provided funding for the Knowledge, Development, and Application Program to each of three authorities: mental health, substance abuse treatment, and substance abuse prevention. Separate funding is provided for the Children's Mental Health Program, the PATH for-

mula grant, the Protection and Advocacy Formula Grant Program, and for the two block grant programs.

The Committee has included bill language that retains the formula used in fiscal year 1997 for fiscal year 1998 calculations of State allotments of the substance abuse performance partnership block grant and the mental health performance partnership block grant. States would receive the same allotment in fiscal year 1998 as they received in fiscal year 1997. This provision has been included to allow sufficient time for the authorizing committees of Congress to consider legislation to reauthorize the programs of the Substance Abuse and Mental Health Services Administration, including any revisions to the existing formula.

The Committee recognizes the importance of the work of SAMHSA in reducing and treating substance abuse and providing mental health services, especially following the agency's reorganization. The Committee further recognizes the importance of linking an evaluation component with the improvement and dissemination of working strategies among the Nation's urban and rural communities. In establishing the funding levels and priorities for fiscal year 1998, the Committee has sought to accommodate the President's requests for agency activities while addressing congressional areas of concern. To better coordinate the agency's coordination of these priorities, the Committee directs the Secretary to issue, within 60 days of enactment of this bill, a report that details the agency's allocation and operational plans in fiscal year 1998 for administration proposals as well as priorities established by the Committee.

The Committee remains concerned by the disproportionate presence of substance abuse in rural and native communities, particularly for American Indian and Alaska Native communities. The Committee reiterates its belief that funds for prevention and treatment programs should be targeted to those persons and communities most in need of service. Therefore, the Committee has provided sufficient funds to fund projects to increase knowledge about effective ways to deliver services to rural and native communities. Within the funds reserved for rural programs, the Committee intends that \$6,000,000 be reserved for CSAT grants, and \$4,000,000 be reserved for CSAP grants.

Knowledge developed and implemented through the CSAP and CSAT KDA grant systems should be coordinated to the fullest practical extent with the public alcohol and drug prevention and treatment system administered by the State alcohol and drug agencies. The Committee urges the agency to establish stronger linkages between KDA programs and the State network through regular consultation and coordination of effort with the State agencies and through other appropriate steps.

#### CENTER FOR MENTAL HEALTH SERVICES

##### *Mental health, knowledge, development, and application*

The Committee recommends \$57,964,000 for the mental health, knowledge, development, and application program [KDA], the same as the comparable fiscal year 1997 amount and \$68,000 less than the President's request. The following programs are included in the

mental health center KDA: Community Support Program [CSP]; homeless and AIDS demonstrations; and training and AIDS training programs.

Sufficient funds are available to establish a 24-hour crisis-response pilot program that provides expert assistance to local law enforcement officials in clinically identifying and assisting citizens with mental illness, victims of domestic violence, and victims of child abuse. The Committee notes that the Birmingham Alliance for the Mentally Ill Crisis Intervention Task Force of Jefferson County, AL, is especially well suited to operating such a program and urges the agency to grant full and fair consideration of its proposal.

The Committee again restates its belief that mental health and substance abuse services are essential elements of primary care, and its concern about the impact of managed care on access to mental health services, and supports training of behavioral and mental health professionals for work in managed care settings, particularly in rural and underserved communities. The Committee urges the development of standards and guidelines for the delivery of such services in managed care entities, including curricula design and training models. The Committee further encourages CMHS to collaborate with the Health Resources and Services Administration on the development of training protocols for mental health professionals in primary care settings.

The Committee is pleased that the Center for Mental Health Services funds state-of-the-art, peer-run programs that help people with mental illnesses live successfully in the community. These low-cost services have an impressive record of assisting people with mental disorders decrease their dependence on expensive social services and avoid psychiatric hospitalization. Having proved effective, they have been replicated in numerous communities with State and local funding. The Center has also funded two national technical assistance centers that provide training and information to help these groups grow. The Committee has included sufficient funds to continue to support these two clearinghouses.

The Committee is pleased that SAMHSA continues its support of projects which provide outreach and counseling services in rural areas to displaced coal miners, farmworkers, and their families.

The Committee is pleased with the successful collaboration between the Center for Mental Health Services and the Bureau of Health Professions in HRSA to fund interdisciplinary health professions training projects, including training of behavioral and mental health professionals, for practice in managed care/primary care settings and urges that this joint effort be continued. The Committee encourages both agencies to develop technical assistance for use in health professions training programs for the purpose of enhancing primary care interdisciplinary models of practice. These efforts should be focused upon rural native populations that are at-risk for the problems most encountered by these health professionals.

The Committee encourages the agency to encompass high priority system-change grants that show potential for enhancing community-based State and county public mental health programs. Some of these projects include the statewide family network grants,

consumer self-help clearinghouses, and the service system improvement grants.

*Clinical and AIDS training*

The Committee is aware of the need for more trained health providers, including allied health professionals and social workers, to work with people suffering from HIV/AIDS. To the extent that funds are available, the Committee encourages SAMHSA to continue funding existing grants and contracts approved by SAMHSA under the current AIDS Training Program.

The Clinical Training Program trains mental health personnel to deliver services to designated underserved populations in exchange for a repayment through service to underserved or priority populations, including severely mentally ill adults, children, and adolescents with serious emotional disorders, and the elderly. The AIDS Training Program provides training for mental health providers to address the neuropsychiatric aspects of HIV spectrum infection.

The Committee recognizes that clinical training programs such as the Minority Fellowship Program have proven valuable in developing and disseminating new knowledge regarding mental health service delivery to SAMHSA's priority populations. Additionally, it remains a Federal priority to lead knowledge development and dissemination in this area, both for providers in need of in-service training, as well as for pre-service trainees. The Committee urges the agency to fund training projects that foster cultural competencies, a diverse work force, collaboration among disciplines, and that promote the use of interdisciplinary service delivery models especially in rural areas such as Hawaii where the cultural and diversity factors predominate.

*AIDS demonstrations*

This program provides 4 year grants to public and nonprofit private organizations to provide innovative mental health services to individuals who are experiencing severe psychological distress and other psychological sequelae as a result of infection with HIV. One coordinating center is supported to independently evaluate the quality and effectiveness of these services. The Committee again commends CMS for its leadership in working cooperatively in demonstrating the efficacy of delivering mental health services to individuals affected by and living with HIV/AIDS. The Committee encourages the Secretary to maintain these agencies' support for this program.

*Mental health block grant*

The Committee recommends \$275,420,000 for the mental health block grant, the same as the fiscal year 1997 amount and the President's request. States use these funds to support the development and implementation of innovative community-based services and maintain continuity of community programs. Funds are allocated to States by formula.

*Children's mental health*

The Committee recommends \$69,896,000 for the Children's Mental Health Program, the same as the fiscal year 1997 level and

\$31,000 less than the President's request. This program provides grants and technical assistance to support community-based services for children and adolescents with serious emotional, behavioral or mental disorders. States must provide matching funds, and services must involve the educational, juvenile justice, and health systems.

*Projects for assistance in transition from homelessness [PATH]*

The Committee recommends \$20,000,000 for the PATH Program, the same as the fiscal year 1997 amount and the administration request.

PATH is a critical program which provides outreach, mental health, and case management services and other assistance to persons who are homeless and have serious mental illnesses. The PATH Program makes a significant difference in the lives of homeless persons with mental illnesses. PATH services eliminate the revolving door of episodic inpatient and outpatient hospital care. Multidisciplinary teams address client needs within a continuum of services, providing needed stabilization so that mental illnesses and co-occurring substance abuse and medical issues can be addressed. Assistance is provided to enhance access to housing, rehabilitation and training, and other needed supports, assisting homeless people in returning to secure and stable lives.

*Protection and advocacy*

The Committee recommends \$21,957,000 for protection and advocacy, the same as the fiscal year 1997 amount and the President's request. This program helps ensure that the rights of mentally ill individuals are protected while they are patients in treatment facilities and for 90 days following their discharge. Funds are allocated to States according to a formula based on population and relative per capita income.

CENTER FOR SUBSTANCE ABUSE TREATMENT

*Substance abuse treatment knowledge, development, and application*

The Committee recommends \$155,868,000 for the substance abuse treatment knowledge, development, and application program [KDA]. This amount is \$132,000 less than the administration request and the same as the comparable fiscal year 1997 amount.

The Committee has provided sufficient funds to continue all existing residential women and children grants. The Committee has provided funds to continue the supplemental demonstration and evaluation of enhanced children's services as part of the Center for Substance Abuse and Mental Health Centers' Residential Women and Children and Pregnant and Postpartum Women Programs.

The Committee reiterates its concern about the disproportionate impact of substance abuse in rural and native communities, and has included \$6,000,000 for rural CSAT programs, which is \$3,000,000 higher than last year's level. The Committee again acknowledges the severe shortage of services in the State of Alaska, the pressing need to continue support of Alaska programs, and the need to develop knowledge about effective techniques for treating

and preventing substance abuse in native populations. The Committee, therefore, expects that the increase provided will be reasonably allocated between expanding existing programs and initiating new programs, especially in Alaska.

The Committee commends the efforts of independent self-run, self-supported organizations that are dedicated to helping overcome substance abuse and/or alcohol abuse. Entities, such as the Oxford House system, are innovators in developing the concept that recovering individuals can live together and share responsibilities in a living environment which supports the recovery of every resident. The Committee is aware of efforts by Oxford House to expand the self-help concept into unserved areas and urges the agency give full and fair consideration to its proposal.

*Substance abuse block grant*

The Committee recommends \$1,310,107,000 for the substance abuse block grant. In combination with the \$50,000,000 provided for the block grant in Public Law 104-121, a total of \$1,360,107,000 is provided for the block grant, the same as the comparable fiscal year 1997 level and \$10,000,000 less than the administration's request.

The substance abuse block grant provides funds to States to support alcohol and drug abuse prevention, treatment, and rehabilitation services. Funds are allocated to the States according to formula. State plans must be submitted and approved annually.

CENTER FOR SUBSTANCE ABUSE PREVENTION

*Substance abuse prevention, knowledge, development, and application*

The Committee has provided \$151,000,000 for the substance abuse prevention, knowledge, development, and application program, \$4,869,000 less than the comparable fiscal year 1997 amount and the same as the administration's request.

The Committee also provides \$10,000,000 for the purpose of making grants to public and nonprofit private entities for projects to demonstrate effective models for the prevention, treatment, and rehabilitation of drug abuse and alcohol abuse among high risk youth, as authorized by section 517 of the Public Health Service Act as amended. This is a new activity for fiscal year 1998. The Committee is highly concerned about the extent of substance abuse among high risk youth. This population is vulnerable to initiating criminal activity against people and property, especially following the acute and chronic use of illicit substances and the abuse of alcohol. These grants are intended to strengthen local capabilities in confronting the complex interrelationships between substance and alcohol abuse and other activities that may predispose young individuals toward criminal, self-destructive, or antisocial behavior.

In order for the State Incentive Grant Program to be effective it must include mechanisms for communities to develop strategic plans and needs assessments that identify their most pressing problems and the services and programs needs to address them. The Committee expects that States receiving funding under the State Incentive Grant Program will give priority in the use of the

20 percent prevention set-aside in the block grant to: (1) working with community coalitions to develop communitywide strategic plans and needs assessments; and (2) filling program and service gaps identified by these community plans.

The Committee reiterates its concern about the disproportionate impact of substance abuse in rural and native communities, and has included \$4,000,000 for CSAP programs which serve rural communities, which is \$2,000,000 higher than last year's level. The Committee intends this increase to be reasonably allocated between expanding existing programs and initiating new programs, especially in Alaska.

The Committee believes that prevention programs need to start when children are young, and need to continue to help children make successful transitions. The Committee has included sufficient funds for evaluations of established school-based early prevention and transition programs and continues to be supportive of the efforts of the Corporate Alliance for Drug Education [CADE] which has been operating a program providing education and prevention services to 120,000 elementary school-aged children in Philadelphia.

The Committee commends CSAP for recognizing problems created by past use of the phrase, "Alcohol and Other Drugs" [AOD]; however, many constituencies which rely on CSAP for leadership and funding are not aware of the agency's important policy change. The Committee urges CSAP to fully implement its move away from AOD terminology, through direct communications to other Government agencies including the Department of Education, nonprofit organizations, and other CSAP constituencies, without prescribing specific speech to grantees.

Within the funds available, the Committee urges CSAP to continue the national effort to provide alcohol and substance abuse prevention and education to children of native Americans with alcoholism.

#### PROGRAM MANAGEMENT

The Committee recommends \$54,431,000 for program management activities of the agency, \$1,069,000 less than the President's request and the same as the 1997 level.

The program management activity includes resources for coordinating, directing, and managing the agency's programs. Program management funds support salaries, benefits, space, supplies, equipment, travel, and departmental overhead required to plan, supervise, and administer the programs.

The Committee is aware of the administration's proposal to begin the process of sealing off and preservation of the buildings of St. Elizabeth's Hospital, to bring the complex closer toward the standard of care expected of its designation as a national historic landmark. The Committee further expects any additional funds for preservation to be derived from carryover balances from amounts previously appropriated for buildings and facilities.

#### DATA COLLECTION

The administration requested \$28,000,000 to expand the national household survey on substance abuse to facilitate the development

of State-level estimates of substance abuse and the impact of youth prevention programs. The Committee has provided bill language authorizing up to \$10,000,000 for this activity, to be derived from Public Health Service Act section 241, 1 percent evaluation set-aside funds. This amount is sufficient to begin a reasonable expansion of the survey without undue disruption of other funded activities of the agency.

RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS

Appropriations, 1997 .....	\$178,635,000
Budget estimate, 1998 .....	190,739,000
Committee recommendation .....	190,739,000

The Committee provides an estimated \$190,739,000 for retirement pay and medical benefits for commissioned officers of the U.S. Public Health Service. This is the same as the administration request and is \$12,104,000 over the estimated payments for fiscal year 1997.

This account provides for: retirement payments to U.S. Public Health Service officers who are retired for age, disability, or length of service; payments to survivors of deceased officers; medical care to active duty and retired members and dependents and beneficiaries; and for payments to the Social Security Administration for military service credits.

AGENCY FOR HEALTH CARE POLICY AND RESEARCH

Appropriations, 1997 .....	\$143,479,000
Budget estimate, 1998 .....	149,000,000
Committee recommendation .....	142,587,000

The Committee recommends \$77,587,000 in Federal funds for the Agency for Health Care Policy and Research [AHCPR]. In addition, the Committee provides transfers of \$65,000,000 from funds available under section 241 of the Public Health Service Act. Total funding provided for the Agency is \$142,587,000, which is \$892,000 less than fiscal year 1997 funding and \$6,413,000 less than the administration's request.

The Agency for Health Care Policy and Research was established in 1990 to promote improvements in clinical practice and patient outcomes, promote improvements in the financing, organization, and delivery of health care services, and increase access to quality care. AHCPR is the Federal agency charged to produce and disseminate scientific and policy-relevant information about the cost, quality, access, and medical effectiveness of health care. AHCPR provides policymakers, health care professionals, and the public with the information necessary to improve cost effectiveness and appropriateness of health care and to reduce the costs of health care.

The Committee is supportive of AHCPR's efforts to establish a children's health services research agenda. To the extent that resources permit, the Committee encourages AHCPR to consider sponsoring a national conference on developing a national research agenda on quality, effectiveness, and outcomes measures in children's health care. The Committee further encourages the Agency

to work with the Emergency Medical Services for Children Program at HRSA to evaluate the potential impact of managed care on children's access to emergency services.

#### HEALTH CARE SYSTEMS COST AND ACCESS

The Committee provides \$46,685,000 for research on health care systems cost and access, which is the same as the administration request and \$1,677,000 below the 1997 level. Of the amount provided, \$29,515,000 is derived from the section 241, 1-percent evaluation set-aside, which is the same as the administration request.

Research on health care systems cost and access programs examines ways to enhance efficiencies in the health care system by: identifying the most effective means in health care service delivery; determining how the structural and financial aspects of the health care system affects utilization, quality, and costs; and helps translate relevant research findings for the use of the major participants in the health care system.

#### *Rural health services research*

The Committee reiterates its support of the Agency's work in the area of rural health services research, and expects that AHCPR continue to fund five specialized centers for rural health managed care services demonstrations. Many recent health care innovations such as managed care are available in metropolitan areas but are frequently unavailable to rural populations. The centers will conduct demonstrations of innovations in the delivery of health care services in rural areas. The Committee notes that sufficient funding has been provided to continue the rural managed care pilot projects.

#### *Osteoporosis*

The Committee notes that osteoporosis occurs in 37 percent of the population. Hip and vertebral fractures add significant costs to Medicare, and preventative measures identified in this study could greatly reduce those costs and improve the well-being of millions of Americans. Within the funds provided, the Committee encourages the Agency to conduct research, including competitive grants, to identify persons at risk for the disease and provide health education to decrease the prevalence of osteoporosis. The Committee further urges the agency to collaborate with the National Institute of Arthritis and Musculoskeletal and Skin Diseases to initiate planning of definitive studies, including epidemiologic studies, that would better integrate patient outcomes with research, screening and preventive measures.

#### HEALTH INSURANCE AND EXPENDITURE SURVEYS

The Committee provides \$36,300,000 for health insurance and expenditure surveys, which is the same as the administration request and \$8,400,000 less than the 1997 level. Of the amount provided, \$26,300,000 is derived from the section 241, 1-percent evaluation set-aside, which is the same as the administration request.

The health insurance and expenditure surveys obtain information necessary to develop timely national estimates of health care use and expenditures, private and public health insurance cov-

erage, and the extent and costs of private health insurance benefits. The surveys also analyze changes in health care use, expenditures, and insurance coverage resulting from changes in market forces or government policy. To accomplish these functions, AHCPR employs medical expenditure panel surveys [MEPS], an inter-related series of surveys that replace the national medical expenditure survey. The Committee provides the full administration request for MEPS and urges continued efforts by the Agency to identify appropriate savings within MEPS that could be used for other agency research priorities, including health services research.

#### HEALTH CARE OUTCOMES AND QUALITY

The Committee provides \$51,187,000 for research on health care outcomes and quality, which is \$3,000,000 higher than the 1997 level and \$6,413,000 below the administration request. The Committee has included \$9,185,000 from the section 241, 1-percent evaluation set-aside for this activity, which is the same as the administration request.

The health care outcomes and quality programs fund activities to ascertain what works best in medical care by enhancing cost effectiveness and appropriateness of clinical practice; developing tools to measure and evaluate health outcomes, quality of care, and consumer satisfaction; and facilitating translation of information into practical uses through data bases, information technology and provider-to-patient education.

The Committee is supportive of AHCPR's efforts to establish a children's health services agenda. The Committee encourages the Agency to work with schools of nursing to identify high risk areas requiring research to provide better direction in caring for this vulnerable group. The Committee further encourages the Agency to work with the Emergency Medical Services for Children Program at the Health Resources and Services Administration to evaluate the potential impact of managed care on children's access to emergency services.

The Committee has held hearings on the subject of quality of care in the changing Medicare market. As a result, the Committee recommends the Agency should examine new and emerging health care delivery mechanisms, including: the potential effect on quality when a patient's first clinical evaluation is between either a specialist or primary care giver, and the quality assurance potential of a point-of-service product compared to a closed-panel health delivery system.

The Committee continues to be supportive of the Agency working with Hawaii, its unique health insurance plan, and its culturally diverse population.

In its 1997 report, the Physician Payment Review Commission emphasized the need for innovative strategies to improve health care access and quality for the vulnerable, frail elderly. The PPRC report recommended that an Agency such as the AHCPR should develop a research framework toward this objective. The Committee believes that the AHCPR should consider undertaking key elements of the PPRC recommendations.

The Committee commends AHCPR for its work supporting projects focused on improving healthcare quality and outcomes.

The Committee encourages AHCPR to provide conference support for a showcase sponsored by a network of nursing leaders in which professional practitioners can articulate their unique contribution to patient and community healthcare.

*Program support*

The Committee recommends \$2,230,000 for program support. This amount is the same as the 1997 level and the same as the administration request. This activity supports the overall management of the Agency for Health Care Policy and Research.

HEALTH CARE FINANCING ADMINISTRATION

GRANTS TO STATES FOR MEDICAID

Appropriations, 1997 .....	\$75,056,618,000
Budget estimate, 1998 .....	71,530,429,000
Committee recommendation .....	71,602,429,000

The Committee recommends \$71,602,429,000 for grants to States for Medicaid. This amount is \$3,454,189,000 less than the fiscal year 1997 appropriation and \$72,000,000 more than the administration's request. This amount excludes \$27,988,993,000 in fiscal year 1997 advance appropriations for fiscal year 1998. In addition, \$27,800,689,000 is provided for the first quarter of fiscal year 1999, as requested by the administration.

The Committee recommendation includes an additional \$72,000,000 over the budget request for the Medicaid appropriation for fiscal year 1998. The current appropriation request reflects proposed savings of \$72,000,000 for vaccine purchases for the Vaccines for Children Program. These savings were to result from a proposal for an exemption for the payment of excise tax for vaccines purchased with Federal funds, which has not been approved.

The Medicaid Program provides medical care for eligible low-income individuals and families. It is administered by each of the 50 States, the District of Columbia, Puerto Rico, and the territories. Federal funds for medical assistance are made available to the States according to a formula which determines the appropriate Federal matching rate for State program costs. This matching rate, which may range from 50 to 90 percent, is based upon the State's average per capita income relative to the national average.

PAYMENTS TO HEALTH CARE TRUST FUNDS

Appropriations, 1997 .....	\$60,079,000,000
Budget estimate, 1998 .....	63,581,000,000
Committee recommendation .....	63,581,000,000

The Committee recommends \$63,581,000,000 for Federal payments to the Medicare trust funds. This amount is the same as the administration's request and is an increase of \$3,502,000,000 from the fiscal year 1997 appropriation.

This entitlement account includes the general fund subsidy to the supplementary medical insurance trust fund (Medicare part B), plus other reimbursements to the hospital insurance trust fund (Medicare part A), for benefits and related administrative costs which have not been financed by payroll taxes or premium contributions.

The Committee has provided \$63,416,000,000 for the Federal payment to the supplementary medical insurance trust fund. This payment provides matching funds for premiums paid by Medicare part B enrollees. This amount is the same as the administration request, and is \$3,960,000,000 more than the fiscal year 1997 amount.

The recommendation also includes –\$52,000,000 for hospital insurance for the uninsured. This amount is the same as the administration's request and is \$457,000,000 less than the 1997 amount.

The Committee also recommends \$86,000,000 for the Federal uninsured benefit payment. This payment reimburses the hospital insurance trust fund for the cost of benefits provided to Federal annuitants who are eligible for Medicare. This amount is the same as the administration's request and is \$10,000,000 more than the fiscal year 1997 appropriation.

The Committee recommendation includes \$131,000,000 to be transferred to the hospital insurance trust fund as the general fund share of HCFA's program management administrative expenses. This amount is the same as the administration's request and is \$11,000,000 less than the fiscal year 1997 level.

#### PROGRAM MANAGEMENT

Appropriations, 1997 .....	\$1,734,441,000
Budget estimate, 1998 .....	1,774,500,000
Committee recommendation .....	1,719,241,000

The Committee recommends \$1,719,241,000 for HCFA program management. This is \$55,259,000 less than the budget request and \$15,200,000 less than the fiscal year 1997 enacted level.

#### *Research, demonstrations, and evaluation*

The Committee recommends \$47,000,000 for research, demonstration, and evaluation activities. This amount is \$2,000,000 more than the budget request, and \$3,000,000 more than the amount provided in fiscal year 1997.

HCFA research and demonstration activities facilitate informed, rational Medicare and Medicaid policy choices and decisionmaking. These studies and evaluations include projects to measure the impact of Medicare and Medicaid policy analysis and decisionmaking, to measure the impact of Medicare and Medicaid on health care costs, to measure patient outcomes in a variety of treatment settings, and to develop alternative strategies for reimbursement, coverage, and program management.

The recommended funding level of \$47,000,000 for the regular research and demonstration program will provide for continuation of current activities including telemedicine demonstration projects, which should remain a high priority. It will also fund new initiatives. Priority areas for HCFA research include access to high-quality health care, health service delivery systems, and provider payment systems.

The Committee continues to strongly support efforts to test the use of telemedicine to expand access to health care in rural areas. Because HCFA did not develop a Medicare reimbursement policy for these pilot sites until 2 years into a 3-year project, the Committee has included sufficient funds to cover the administrative and

evaluation costs associated with these projects for an additional 24 months. This will ensure that these projects will continue to operate for a full 3 years under a pilot reimbursement program. While the Committee has been pleased with HCFA's work in this area, it is concerned about the limited amount of data that HCFA is collecting under the demonstration and the impact this will have on the timeliness and usefulness of the demonstrations. HCFA is not fully utilizing all of the sites affiliated with these projects. The Committee urges HCFA to include all sites and providers affiliated with the existing demonstration projects in the Medicare reimbursement policy demonstration regardless of whether these affiliated sites are funded by HCFA. The Committee also urges HCFA to evaluate, store, and forward applications as well as telemental health and emergency care services.

The Committee recommends that the Secretary, in conducting the study of the costs and benefits of providing medical nutrition therapy services to Medicare beneficiaries, ensure that the study examine providing such services by registered dietitians in group as well as individual settings to determine the most cost-effective method to provide nutrition therapy. Further, the Committee recommends that the scope of the study include medical conditions ranging from malnutrition to obesity, recognizing that obesity is the second leading preventable cause of death in the United States.

The Committee urges the Secretary of Health and Human Services to conduct a 2-year demonstration project on coverage of medical nutrition therapy by registered dietitians in the part B portion of Medicare. The demonstration should investigate the impact on program costs, savings, and beneficiary health and quality of life. In developing and implementing the demonstration, the Secretary should give strong consideration to the views of registered dietitians. The Secretary is expected to report to the Committee on the status of the demonstration 1 year after its initiation and again at its conclusion.

The Committee strongly supports continued funding for the Temple University Hospital Ventilator Rehabilitation Unit. Demonstration authority for this highly successful project, rated outstanding in the Nation by an independent audit, expired June 30, 1997. The Committee expects, therefore, that the HCFA project, demonstration projects with respect to chronic ventilator-dependent units in hospitals, be extended for 3 years for the ventilator-dependent unit at Temple University Hospital.

The Committee is aware of the need to provide vulnerable populations in low-income settings with the knowledge necessary to access appropriate, effective, and cost-efficient primary health care through managed care plans. The Committee recommendation includes sufficient funds to demonstrate and evaluate model programs developed and managed by nonprofit community and family services organizations, which help vulnerable populations in low-income settings to understand how to use managed care for themselves and their children.

The Committee recommends that HCFA undertake a demonstration program with no fewer than four States to develop collaborative initiatives to provide insurance to uninsured individuals who are not eligible for Medicaid coverage. Under this demonstration

program, States would be permitted to allow hospitals to utilize funds used to reimburse hospitals for the costs of medical care for the uninsured, to provide assistance to low-income individuals for the purchase of health coverage. States selected to participate in this demonstration project should coordinate with local private entities for planning and implementation, and initially may restrict the project to a limited geographic area. The Administrator should permit multiple States to jointly develop a program for metropolitan statistical areas that cross State boundaries. The Committee is aware of an initiative by St. Louis 2004, which is located in St. Louis, MO, to provide expanded coverage to uninsured individuals using existing resources in the community including State and Federal dollars already spent for medical care for the uninsured; the Committee urges full and fair consideration of this group's effort.

The Committee believes that HCFA research efforts should focus on strategies for assuring health care access and quality for the vulnerable, frail elderly. For those with chronic conditions, the Physician Payment Review Commission has recommended the use of case management services. The Committee encourages HCFA to continue to pursue demonstration projects that would test the use of case management and aid in the development of appropriate fee-for-service payment methodologies for Medicare. The Committee encourages HCFA to support research to develop cost-effective models for end-of-life care for Medicare beneficiaries suffering from chronic, fatal illnesses who do not qualify for the hospice benefit. The Committee also encourages research on appropriate ways to recognize, in Medicare payment methods, the extra time and complexity associated with care for the frail elderly.

As in the past, the Committee encourages that research and demonstration activities include the concept of nurse-run clinics and the utilization of advanced practice nurses as primary care providers. As Medicare moves into the managed care arena it is important that the most effective health care delivery systems be identified and utilized. Health promotion and prevention initiatives which are integral functions of nursing will play a significant role in the future healthcare of our aging population.

Within the amount provided, the Committee has included sufficient funds to continue an existing grant to the National Indian Council on Aging that increases Indian elder awareness and participation in the public policy issues that have direct impact on all of Indian country.

The Committee urges the consideration of activities which would develop, test, and evaluate health education and outreach methodologies targeted toward isolated and difficult to reach minority populations. The Committee also encourages initiatives that address health insurance, managed care, and the impact of public policy changes upon legal immigrants. The Committee is further aware of a proposal by the National Asian Pacific Center on Aging and recommends that this proposal receive full and fair consideration.

The Committee is aware of the numerous advances made in diagnostic imaging technology that have the potential to reducing overall expenditures in the Medicare population, especially for heart disease. The Committee encourages the agency to consider under-

taking evaluations of promising new generation imaging technology, such as coronary artery scanning by ultrafast computerized tomography, and their potential impact on Medicare expenditures.

The Committee is aware of the Mercy Hospital of Philadelphia proposal to HCFA for disease management for predual (Medicaid/Medicare) eligible and dual-eligible minority populations in west Philadelphia. This proposed intervention program focuses on disease prevention, early detection and disease management of common chronic diseases affecting middle-aged and older adult minority men and women. Centered on primary care provider based screening and treatment protocols, the program promotes health, disease prevention, and disease management. The Committee recommends that HCFA provide additional funds for this demonstration project to address the access, delivery system, and financing issues related to predual eligible and dual-eligible minority adults.

The Committee is aware of the interest of Wills Eye Hospital, serving the Philadelphia area, to establish a graduate medical education demonstration project in ophthalmology at the hospital's ambulatory surgery center network, and urges full and fair consideration of a proposal from this organization.

The Committee recommends that up to \$100,000, be utilized by the Bureau of Data Management of the Health Care Financing Administration to prepare and make available a statistical analysis of its patient data base, to determine the correlation between the occurrence of multiple sclerosis and the occurrence of gout. Important research is currently being performed to determine whether uric acid, which occurs at elevated levels in gout patients, may inhibit the development of multiple sclerosis, and the foregoing statistical analysis may lead research to develop means of providing important public health benefits.

#### *Medicare contractors*

The Committee recommends a program level of \$1,723,000,000 for Medicare contractors, which is the same as the administration's request, and \$75,800,000 more than comparable fiscal year 1997 appropriation. This includes funding of payment safeguards at \$500,000,000 as part of recently enacted health insurance reform legislation, which converts funding to a mandatory basis. For claims processing activities, the Committee recommendation includes the budget request level of \$824,200,000.

The Committee recommendation for Medicare claims processing operations reflects the expectation of a continuing trend of cost reductions. In part, recent savings have come from the increased use of electronic filing. While the Committee encourages this trend, its recommendation also takes into account the fact that some small providers, particularly in rural areas, still will need to file hard copy claims, and the Committee urges the Administrator to avoid creating hardships for such providers as it expands the use of electronic filing.

The Committee is concerned about adequately funding claims processing activities, which are the first line of defense against fraud and abuse in Medicare. The Committee strongly urges HCFA not to use the claims processing budget for unrelated functions such as the "Medicare Handbook."

Furthermore, the Administrator is expected to report to the Committee in the event there is a reduction greater than 5 percent in unit cost payments from the 1997 levels for Medicare contractors; this report should include information about unit cost claims processing for all the contractors.

The Committee notes that the budget request provides an increase from \$75,000,000 in fiscal year 1997 to \$89,000,000 in fiscal year 1998 for the Medicare transaction system [MTS]. However, the Committee recommendation provides \$55,000,000 for MTS funding, which the Committee understands is sufficient to fund necessary single system transitions. Bill language has been included permitting unexpended MTS funds to remain available for the subsequent fiscal year.

The Committee is very concerned with the poor management of the development and implementation of the Medicare transaction system. This major undertaking has been subject to considerable cost overruns and implementation delays. The Committee expects to receive a comprehensive budget and justification for completion of the project and asks that it be consulted before any additional funds are allocated for this project.

The Committee is very concerned that the Department of HHS has inadequate plans for assuring that by the end of 1999 computer software used by its contractors and fiscal intermediaries has been adjusted to not malfunction because of the shift to the year 2000. Without appropriate corrective action, Medicare payments could be significantly delayed and could result in significant loss of confidence among beneficiaries and a reduction of providers willing to accept Medicare patients.

The Committee agrees that contracts with States for health advisory services programs for Medicare beneficiaries is an allowable activity under the Medicare contractor beneficiary services budget, and recommends \$10,000,000 for this activity in fiscal year 1998. These contracts would provide assistance, counseling, and information activities relating to Medicare matters as well as Medicare supplemental policies, long-term care insurance, and other health insurance benefit information.

Medicare contractors, who are usually insurance companies, are responsible for reimbursing Medicare beneficiaries and providers in a timely fashion and a fiscally responsible manner. These contractors also provide information, guidance, and technical support to both providers and beneficiaries.

The Committee recommends that, in the event that unexpended fiscal year 1997 funds are available in this account, the Secretary use these funds, prior to the end of the fiscal year, to address the need of expanding efforts to prevent and collect Medicare mispayments as identified in the recent CFO audit. The Committee recommends further that these additional funds be used to increase the number of prepayment reviews and postpayment audits as well as to pay for a statistical analysis contractor to provide national program and integrity data analysis for each program integrity contractor targeting patterns of abuse. The Committee also urges that a significant portion be used to cover the cost of additional appeals, overpayment recoveries, provider, and beneficiary inquiries.

The Committee requests that it be consulted before final obligation of these funds occurs.

*State survey and certification*

Survey and certification activities ensure that institutions and agencies providing care to Medicare and Medicaid beneficiaries meet Federal health, safety, and program standards. Onsite surveys are conducted by State survey agencies, with a pool of Federal surveyors performing random monitoring surveys.

The Committee recommends \$158,000,00 for Medicare State survey and certification activities. This is \$10,000,000 more than the request and the same as the 1997 enacted level.

The fiscal year 1996 appropriations bill included language which extended the intervals for surveying Medicare-certified home health agencies. According to the Congressional Budget Office, this amendment increases the funds available for Medicare survey and certification by \$8,000,000 in fiscal year 1998. Therefore, the total amount of funds available for these activities is \$166,000,000.

*Federal administration*

The Committee recommends a total of \$325,241,000 for Federal administrative costs. This is \$33,259,000 less than the administration's request and the same as the fiscal year 1997 appropriation.

The Committee has been informed that very young children often have vision problems which go undetected for a variety of reasons. The problems, when left untreated, lead to learning difficulties and other maladies which, if discovered at an early stage, can be treated. Accordingly, the Committee urges HCFA to review its Medicaid reimbursement policy for pediatric visual screening, including evaluation to assess conditions which can preclude normal visual development. The Committee requests that the evaluation include, but not be limited to, cycloplegic retinoscopy, photo screening, and visually evoked potentials. Further, the Committee recommends that the evaluation be carried out utilizing a method which employs a photo refractive technique.

The Committee understands that the Health Care Financing Administration proposes to reduce Medicare reimbursement for radiosurgery, to begin October 1, 1997. Concerns have been expressed that severe reductions in Medicare gamma knife reimbursement could force many patients back to traditional surgical approaches at high cost to the Government and potentially resulting in harm to patients due to complications from needless surgical intervention. The Committee urges the Health Care Financing Administration to fully investigate these concerns prior to imposing reductions in reimbursement rates.

The Committee is concerned that HCFA has not complied with last year's appropriations bill/law requiring it to reassess each variation of lung volume reduction surgery based upon all of the available data, and, therefore, expects HCFA to do so and issue its complete report with recommendations for coverage no later than September 30, 1997.

The Committee remains extremely concerned with the amount of money lost every year to fraud, waste and abuse in the Medicare Program. The Committee has held many hearings and taken other

corrective actions over a 9-year period to expose and reduce these losses. The Senate passed balanced budget act contains a number of important reforms derived from Committee hearings. The Committee urges HCFA to promptly utilize these new authorities for competitive bidding, inherent reasonableness, and improved beneficiary information so that savings to Medicare will accrue as quickly as possible.

GAO found that billions of dollars could be saved if Medicare carriers utilized commercially available software to detect and stop billing abuse. HCFA has not complied with the Committee's directive last year to implement such cost saving technology. The Committee again directs HCFA to take this step to modernize technology.

The Administrator is strongly urged to take a leadership role in resolving the outstanding difficulties facing States attempting to develop Medicaid capitated managed care or primary care case management [PCCM] arrangements that enroll beneficiaries with chronic conditions or special health care needs. The Administrator is asked to develop and document strategies that may be used by States seeking to design successful plans. The Committee urges the Administrator to convene representatives from States, managed care organizations, beneficiaries with special health care needs, experts in specialized health care, and others to be actively involved in developing these strategies.

The Committee would like the strategies to address issues of particular interest to people with special health care needs and chronic conditions enrolled in Medicaid capitated managed care or PCCM plans. Some examples of such issues are: risk adjustment, medical necessity definitions, quality controls, and adequacy of provider networks. Participants in the development of the guidelines are urged to expand this list as necessary. By September 1, 1999, the Administrator should report the results of this project to the Committee and to Congress.

The Committee expects that no funds be used for the implementation of or planning for future implementation of the Medicare/Medicaid data bank.

ADMINISTRATION FOR CHILDREN AND FAMILIES

FAMILY SUPPORT PAYMENTS TO STATES

Appropriations, 1997 .....	\$11,758,000,000
Budget estimate, 1998 .....	.....
Committee recommendation .....	.....

The Committee concurs with the budget request in not recommending further appropriations for family support payments to States, which has been replaced by a new block grant, temporary assistance to needy families [TANF]. Funding for this new block grant was provided in Public Law 104-193 (the Personal Responsibility and Work Opportunity Reconciliation Act of 1996).

PAYMENTS TO STATES FOR JOBS

Appropriations, 1997 .....	\$300,000,000
Budget estimate, 1998 .....	.....
Committee recommendation .....	.....

The Committee concurs with the budget request in not recommending further appropriations for payments to States for AFDC work programs. This program has been consolidated under the newly created temporary assistance to needy families block grant [TANF], previously funded under Public Law 104-193, the Personal Responsibility and Work Opportunity Act of 1996.

LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

Appropriations, 1997 .....	\$1,000,000,000
Budget estimate, 1998 .....	1,000,000,000
Committee recommendation .....	1,000,000,000

The Committee recommends that \$1,000,000,000 be made available in fiscal year 1998 for the Low-Income Home Energy Assistance Program [LIHEAP], the same as the regular appropriation for fiscal year 1997 as well as the budget request.

The Committee recommendation also includes a \$1,200,000,000 advance appropriation for fiscal year 1999, \$200,000,000 more than the budget request. The advance appropriation, as authorized by law, gives States greater opportunity for effective program planning, including sound allocation of resources among the various components of the program.

LIHEAP grants are awarded to the States, territories, and Indian tribes to assist low-income households in meeting the costs of home energy. States receive great flexibility in how they provide assistance, including direct payments to individuals and vendors and direct provision of fuel. LIHEAP grants are distributed by a formula defined by statute, based in part on each State's share of home energy expenditures by low-income households nationwide.

The Committee recommendation includes an emergency allocation of up to \$300,000,000 to be made available, only upon submission of a formal request designating the need for the funds as an emergency as defined by the Budget Enforcement Act. This is the same level as the emergency allocation available in fiscal year 1997.

The Committee intends that up to \$25,000,000 of the amounts appropriated for LIHEAP for fiscal year 1998 be used for the leveraging incentive fund, which will provide a percentage match to States for private or non-Federal public resources allocated to low-income energy benefits. Of the fiscal year 1999 advance appropriation, up to \$30,000,000 is recommended for the leveraging fund.

REFUGEE AND ENTRANT ASSISTANCE

Appropriations, 1997 .....	\$412,076,000
Budget estimate, 1998 .....	392,332,000
Committee recommendation .....	392,332,000

The Committee recommends \$392,332,000 for refugee and entrant assistance, a decrease of \$19,744,000 below the level appropriated for fiscal year 1997 and the same as the budget request.

Based on an estimated refugee admission ceiling of 90,000, compared to 110,000, 2 years earlier, this appropriation, together with bill language allowing prior-year funds to be available for 1998 costs, will enable States to continue to provide at least 8 months of cash and medical assistance to needy refugees.

The Refugee Assistance Program is designed to assist States in their efforts to assimilate refugees into American society as quickly and effectively as possible. The program funds State-administered cash and medical assistance, the voluntary agency matching grant program, employment services, targeted assistance, and preventive health.

In order to carry out the program, the Committee recommends \$227,138,000 for transitional and medical assistance, including State administration and the voluntary agency program; \$110,882,000 for social services; \$4,835,000 for preventive health; and \$49,477,000 for targeted assistance. The total available for transitional and medical assistance, with the inclusion of bill language making available an estimated \$3,300,000 in carryover funds, is \$230,438,000.

The Committee agrees that \$19,000,000 is available for assistance to serve communities affected by the Cuban and Haitian entrants and refugees, the same as the amount contained in last year's appropriation; these funds are included in the social services line item.

The Committee is aware of the valuable work the Voluntary Agency Assistance Program is doing to resettle immigrants, especially Russian Jews, in the United States. The Committee expects \$39,000,000 will be used to support grants for the Voluntary Agency Grant Program.

The Committee is concerned that the current policy of the Office of Refugee Resettlement prohibiting the use of a portion of refugee social services and targeted assistance formula grant funds for refugees who have been in the United States for more than 5 years deprives some counties and States of the ability to give employment-related assistance to many of their refugee welfare recipients. The Committee urges the ORR to be flexible in considering waiver requests of the 5-year policy.

Section 412(a)(7) of title IV of the Immigration and Nationality Act authorizes the use of funds appropriated under this account to be used to carry out monitoring, evaluation, and data collection activities to determine the effectiveness of funded programs and to monitor the performance of States and other grantees.

CHILD CARE AND DEVELOPMENT BLOCK GRANT

Appropriations, 1997 .....	\$953,762,000
Budget estimate, 1998 .....	1,000,000,000
Committee recommendation .....	963,120,000

The Committee recommends \$963,120,000 for the child care and development block grant, an increase of \$9,358,000 over the 1997 program level. Of this amount, the Committee recommendation includes \$2,000,000 for child development scholarships. In addition, \$1,000,000,000 is recommended as an advance appropriation for fiscal year 1999, the same as the budget request.

These funds provide grants to States to provide low-income families with financial assistance for child care; for improving the quality and availability of child care; and for establishing or expanding child development programs. The funds are used to both expand the services provided to individuals who need child care in order to work or attend job training or education and allow States to con-

tinue funding the activities previously provided under the consolidated programs. In addition, the Committee notes that child care entitlement funding under welfare reform legislation will provide \$2,067,000,000 in fiscal year 1998, an increase of \$100,000,000 over the fiscal year 1997 enacted level.

The bill provides that \$19,120,000 of the amount appropriated shall become available for obligation on October 1, 1998. Of this amount, \$6,120,000 is derived by transfer, the same as in the fiscal year 1997 enacted legislation. The Department is instructed to obligate these funds immediately for the purposes of supporting resource and referral programs and before and afterschool services. This represents the Federal commitment to the activities previously funded under the dependent care block grant. The Committee further expects that these funds will not supplant current funding dedicated to resource and referral and school age activities provided by the child care and development block grant. The Committee strongly encourages States to address the matters of before and afterschool care and the establishment of resource and referral programs with the funds provided in this program.

SOCIAL SERVICES BLOCK GRANT

Appropriations, 1997 .....	\$2,500,000,000
Budget estimate, 1998 .....	2,380,000,000
Committee recommendation .....	2,245,000,000

The Committee recommends an appropriation of \$2,245,000,000 for the social services block grant. The recommendation, due to budget constraints, is \$135,000,000 less than the budget request and \$255,000,000 below the 1997 enacted level.

Social services block grant funds are distributed to and used by States and territories to fund a wide variety of social services for the purpose of preventing or reducing dependency, and assisting individuals to achieve self-sufficiency. Activities include child and adult day care, child and adult abuse and neglect prevention, home-based services, and independent living services. Many of these activities are funded by separate appropriations elsewhere in the bill.

CHILDREN AND FAMILIES SERVICES PROGRAMS

Appropriations, 1997 .....	\$5,336,061,000
Budget estimate, 1998 .....	5,498,900,000
Committee recommendation .....	5,585,094,000

The Committee recommends an appropriation of \$5,585,094,000 for the "Children and families services programs" account, which is \$86,194,000 more than the administration request and \$249,033,000 more than the fiscal year 1997 appropriation.

This appropriation consists of programs for children, youth, and families, the developmentally disabled, and native Americans, as well as Federal administrative costs.

*Head Start*

Head Start provides comprehensive development services for low-income children and families, emphasizing cognitive and language development, socioemotional development, physical and mental health, and parent involvement to enable each child to develop and

function at his or her highest potential. At least 10 percent of enrollment opportunities in each State are made available to children with disabilities.

The Committee recommends \$4,305,000,000 for the Head Start Program, an increase of \$324,454,000 above the 1997 level and the same as the budget request.

Recent research findings at NIH have demonstrated the importance of the first 3 years of life. This research emphasizes the importance of high-quality day care and other supportive services for the growing numbers of working mothers of very young children. The Committee bill doubles the set-aside of funds for the early Head Start 0-3 Program out the fiscal year 1998 funding increase provided. In addition, the Committee strongly encourages the Department to target the entire remaining increase to expanding Head Start services for 3-year-olds. The recommendation also includes \$326,000 to enable the Central Montana Head Start Program to secure donations of surplus property, and \$1,000,000 for a Charlotte-Mecklenburg schools prekindergarten initiative for startup costs and renovations.

The Committee bill includes funding for expansion of the Head Start Program in an amount consistent with the bipartisan balanced budget agreement. These expansion funds shall be used in a manner which is responsive to the needs of each community as identified in individual needs assessments. In addressing the needs of families returning to work under welfare reform, the Committee expects the Department of Health and Human Services to focus expansion efforts on providing full-day, full-year services to children and families in need who are presently enrolled in the program. In allocating expansion funds, the Department shall not establish a priority system which favors any one type of collaborative effort on the part of individual programs over any or all others.

The Committee is pleased to learn of the Head Start Bureau's efforts to improve staff development by promoting and disseminating an early intervention teacher training program through the training and technical assistance program. The Committee urges the Bureau to continue this effort through additional dissemination, and to continue to collaborate with private organizations with proven track records in teacher training to ensure that the training tools are used effectively by grantees.

#### *Runaway and homeless youth*

The Committee recommends \$58,602,000 for this program, the same as the fiscal year 1997 level. The Committee has also provided an additional \$15,000,000 from the crime prevention trust fund for runaway youth activities, an increase of \$7,000,000 over the fiscal year 1997 level.

This program addresses the crisis needs of runaway and homeless youth and their families through support to local and State governments and private agencies. The Runaway and Homeless Youth Act requires that 90 percent of the funds be allocated to States for the purpose of establishing and operating community-based runaway and homeless youth centers, on the basis of the State youth population under 18 years of age in proportion to the national total. The remaining 10 percent funds networking and re-

search and demonstration activities including the National Toll-Free Communications Center. Consolidated within this line item is the transitional living for homeless youth program, which awards grants to public and private nonprofit entities to address the shelter and service needs of homeless youth. Grants are used to develop or strengthen community-based programs which assist homeless youth in making a smooth transition to productive adulthood and social self-sufficiency; and to provide technical assistance to transitional living programs for the acquisition and maintenance of resources and services.

The Committee notes that there are a few model projects that provide coordinated substance abuse treatment, job training, transitional housing, and independent living to homeless youth who are pregnant or have small children and are recovering from substance abuse problems. Priority should be placed on supporting these projects such as House of Mercy in Des Moines, IA, where they have substantial promise for promoting self-sufficient and independent living.

#### *Child abuse prevention programs*

The Committee has included \$35,180,000 for child abuse and neglect prevention and treatment activities, including \$21,026,000 for State grants and \$14,154,000 for discretionary activities, and the same as the fiscal year 1997 level. No funding is provided for the Advisory Board on Child Abuse and Neglect. These programs seek to improve and increase activities at all levels of government which identify, prevent, and treat child abuse and neglect through State grants, technical assistance, research, demonstration, and service improvement.

#### *Abandoned infants assistance*

The Committee concurs with the budget request in recommending an appropriation of \$12,251,000 for abandoned infants assistance, the same as the 1997 level. This program provides financial support to public and private entities to develop, implement, and operate demonstration projects that will prevent the abandonment of infants and young children. Grants provide additional services such as identifying and addressing the needs of abandoned infants, especially those who are drug exposed or HIV positive; providing respite care for families and care givers; and assisting abandoned infants and children to reside with their natural families or in foster care.

The Committee is aware of studies that show that as many as 80,000 children will be orphaned by the AIDS epidemic by the year 2000, and is concerned about the level of cooperation and coordination between the Abandoned Infants Assistance Program and pediatric/family AIDS programs supported under title IV of the Ryan White CARE Act. The Committee expects that ACF will collaborate through inter-agency agreements with the Health Resources and Services Administration to ensure that the child welfare and permanency planning needs of families affected by AIDS are expanded at title IV project sites.

*Child welfare*

The Committee recommends an appropriation of \$291,989,000 for child welfare services, the same as the fiscal year 1997 appropriation and the administration request. This program helps State public welfare agencies improve their child welfare services with the goal of keeping families together. State services include: preventive intervention, so that, if possible, children will not have to be removed from their homes; reunification so that children can return home if at all possible; and development of alternative placements like foster care or adoption if children cannot remain at home.

For child welfare training, the Committee recommends \$8,000,000, an increase of \$4,000,000 over the fiscal year 1997 level. Under section 426, title IV-B discretionary grants are awarded to public and private nonprofit institutions of higher learning to develop and improve education/training programs and resources for child welfare service providers. These grants upgrade the skills and qualifications of child welfare workers.

This program also provides teaching and traineeship grants to school of social work to train social workers in the specialty of child welfare. The Committee recognizes the increasing need for trained, skilled, and qualified child welfare protection personnel. This becomes even more urgent as more children enter the child protective system as a result of welfare reform. The Committee continues its interest in the national applicability of the University of Hawaii Center on the Family's use of Hawaii's ethnically diverse population to develop policies and programs to strengthen the family and provides \$500,000 for this purpose. The Committee supports the Center's work directed to family resiliency and the building and reinforcement of family strengths. It is especially interested in the development of educational materials that promote self-help programs that contribute to containment of social program cost; and, the development of culturally sensitive educational programs with existing community services agencies.

The Committee recommends that of amounts appropriated, \$130,000 should be made available to colleges and universities that have enrolled American Indian and/or Alaska Natives in masters degree programs in social work for purposes of providing 20 field practicum placements of masters degree candidates in Indian reservations and rural Indian community settings.

Based on the long-term emotional harm of child sexual abuse, the Committee recognizes the need for treatment programming that effectively addresses the needs of both the abused child and family who struggle with this traumatic experience. The Committee encourages the Administration for Children and Families to develop a demonstration program to evaluate the effectiveness of a family-centered model for the treatment of child-sexual abuse like the one operated by Family Place in Louisville, KY.

The Committee is aware of the work of the Institute for Responsible Fatherhood and Family Revitalization, building bridges between the generations, and creating environments that are father friendly, children friendly, and family friendly. The Committee recommendation includes \$300,000 to replicate the Institute's successful model program started in Cleveland, to other cities in the Unit-

ed States, and urges full and fair consideration of a proposal from this organization.

Prior to the advent of welfare reform, millions of dollars in Federal funds have been provided to State governments for the development of the necessary infrastructure to administer federally-funded welfare programs. While welfare reform has now vested authority in Indian tribal governments to administer welfare programs for eligible Indian citizens, no funding has been authorized to assist tribal governments in developing the necessary administrative structure. Under new provisions of Federal law, tribal governments must submit a plan for the provision of temporary assistance to needy families [TANF] to the Secretary of the U.S. Department of Health and Human Services and receive approval of a plan in order to administer welfare programs.

Through the field practicum placement of 20 American Indian and/or Alaska Native masters degree in social work candidates in Indian Reservation or rural Indian community settings, tribal governments will have the professional assistance of second year social work masters degree candidates in the development of TANF plans, while masters degree candidates acquire critical experience in the field in which they will ultimately be applying their professional skills. The field practicum placements will also hold the potential for assuring the recruitment of native people with masters degrees in social work to serve the community. Funds made available under this authority would be provided to universities and colleges that have American Indians and Alaska Natives enrolled in masters degree programs in social work. The college or university would enter into a contract with a tribal government specifying the nature of the field practicum experience with the tribal community, and upon submittal of the contract to the Secretary of the Department of Health and Human Services, funds to cover living and travel expenses and tuition costs for a 15-week period would be made available to the college or university.

The Committee has previously recommended that the Department utilize CAPTA resources for community-based child abuse prevention through Parents Anonymous, Inc. The authorizing committee included in the reauthorization of the Child Abuse Prevention and Treatment Act both bill language (section 105(a)(2) of CAPTA) and report language urging the Secretary to award a grant to a nonprofit organization such as Parents Anonymous to assist in the maintenance of a national network of mutual support and self-help programs to strengthen families and their communities in the fight against child abuse. The Committee again strongly urges the Department to implement this recommendation. To clarify its intent, the Committee has included bill language specifically citing appropriations authority under section 105(a)(2) of CAPTA.

#### *Adoption opportunities*

The Committee recommends \$13,000,000 for adoption opportunities, the same as the fiscal year 1997 level and the administration request. This program eliminates barriers to adoption and helps find permanent homes for children who would benefit by adoption, particularly children with special needs. Since the Committee rec-

ommendation exceeds \$5,000,000, grants for placement of minority children and postlegal adoption services, as well as grants for improving State efforts to increase placement of foster children legally free for adoption, should be made, as required by law. This program also funds the national adoption clearinghouse, a national adoption information exchange system. Funding is not recommended for a new adoption initiative recommended by the administration, as the Committee intends to concentrate scarce resources on existing activities.

#### *Social services research*

The Committee recommends \$21,000,000 for social services and income maintenance research, for which \$44,000,000 were provided in fiscal year 1997. A number of the projects for which funds were provided in 1997 were one-time only, reducing the amount needed in 1998. The administration requested \$18,043,000 for this activity. Remaining funds are for grants and contracts for a national random sample study of child welfare, and for research, evaluations, and national studies.

The Committee recommendation also includes funding to carry out activities authorized by section 429A(e) and 413(h)(3) of the Social Security Act, relating to surveys and research activities.

#### *Family violence prevention programs*

For programs authorized by the Family Violence Prevention and Treatment Act, the Committee concurs with the budget request to delete line item funding. Instead, increased resources are concentrated under violent crime reduction programs, as described later in this report.

#### *Community-based resource centers*

The Committee recommends \$32,835,000, the budget request, for community-based resource centers. This represents level funding at the fiscal year 1997 level for a consolidation of the community-based family resource program and the temporary child care and crisis nurseries program. This program is intended to assist States in implementing and enhancing a statewide system of community-based, family-centered, family resource programs, and child abuse and neglect prevention through innovative funding mechanisms and broad collaboration with educational, vocational, rehabilitation, health, mental health, employment and training, child welfare, and other social services within the State. The temporary child care and crisis nurseries serve thousands of families with children who have a disability or serious illness, and families that are under stress, including families affected by HIV/AIDS, homelessness, violence, family crisis, and drugs and alcohol.

#### *Developmental disabilities*

The Committee recommends \$115,529,000 for developmental disabilities programs, which is \$1,297,000 more than the request, and the fiscal year 1997 appropriation. The Administration on Developmental Disabilities supports community-based delivery of services which promote the rights of persons of all ages with developmental disabilities. Developmental disability is defined as severe,

chronic disability attributed to mental or physical impairments manifested before age 22, which causes substantial limitations in major life activities.

*State councils*

For State councils, the Committee recommends \$65,574,000, an increase of \$771,000 over the 1997 level and the administration request. In 1987, the Developmental Disabilities Act changed the focus of State councils from services provision and demonstration to planning and services coordination directed to effecting systems change. Since that time, the States have been shifting away from their original role of services provision to their current mission to effect system change on behalf of persons with developmental disabilities.

*Protection and advocacy grants*

For protection and advocacy grants, the Committee recommends \$27,036,000, which is \$318,000 more than the administration request and the fiscal year 1997 level. This formula grant program provides funds to States to establish protection and advocacy systems to protect the legal and human rights of persons with developmental disabilities who are receiving treatment, services, or rehabilitation within the State.

*Special projects*

The Committee recommends \$5,250,000, which is the same as the request and the fiscal year 1997 appropriation. This program funds grants and contracts providing nationwide impact by developing new technologies and applying and demonstrating innovative methods to support the independence, productivity, and integration into the community of persons with developmental disabilities.

*University-affiliated programs*

For university-affiliated programs, the Committee recommends \$17,669,000, which is \$208,000 more than the 1997 level and the administration request. This program provides operational and administrative support for a national network of university-affiliated programs and satellite centers. Grants are made annually to university-affiliated programs and satellite centers for interdisciplinary training, exemplary services, technical assistance, and information dissemination activities.

*Native American programs*

The Committee concurs with the budget request in recommending \$34,933,000 for native American programs, the same as the 1997 level. The Administration for Native Americans [ANA] assists Indian tribes and native American organizations in planning and implementing long-term strategies for social and economic development through the funding of direct grants for individual projects, training and technical assistance, and research and demonstration programs.

The Committee notes the sharp increase in efforts to preserve native American languages through the native American languages program, which provides funds to tribes and native organizations.

Accordingly, the Committee urges increased funding for the native American languages program. The Committee further recommends continued funding of the native Hawaiian revolving loan program.

The Committee notes that the May 1994 final report of the Joint Federal-State Commission on Policies and Programs Affecting Alaska Natives found that many Alaska Native individuals, families, and communities were experiencing a social, cultural, and economic crisis marked by rampant unemployment, the lack of economic opportunity, alcohol abuse, depression, and morbidity and mortality rates that were described by health care professionals as approaching those of Third World countries. To address these problems the Alaska Natives Commission adopted recommendations that raise important policy questions which are unresolved in Alaska and which require further study and review before Congress considers legislation to implement these recommendations. The Committee encourages the Department to use \$350,000 for the Alaska Federation of Natives to conduct a study and provide recommendations to Congress on further approaches to implement recommendations of the Alaska Natives Commission.

*Community services block grant*

The Committee recommends an appropriation of \$492,600,000 for the community services programs. This is \$3,000,000 more than the fiscal year 1997 level and \$77,880,000 higher than the administration request.

The community services block grant [CSBG] makes formula grants to States and Indian tribes to provide a wide range of services and activities to alleviate causes of poverty in communities and to assist low-income individuals in becoming self-sufficient. The Committee recommendation recognizes the increased demand by the low-income population for services provided by CSBG-funded community action agencies.

The Committee bill again contains a provision requiring that carryover CSBG funds remain with the local grantee. This is the same language that was contained in the fiscal year 1997 appropriations bill.

The Committee again expects fiscal year 1998 CSBG funding to be allocated to the States in a timely manner. In addition, the Committee again expects the Office of Community Services to inform the State CSBG grantees of any policy changes affecting carryover CSBG funds within a reasonable time after the beginning of the Federal fiscal year.

Several discretionary programs are funded from this account. Funding for these discretionary programs is recommended at the following levels for fiscal year 1998: community economic development, \$27,332,000; rural community facilities, \$3,500,000; national youth sports, \$12,000,000; and community food and nutrition, \$4,000,000. The Committee reiterates its expectation that national youth sports funds to be awarded competitively. The Committee has again included \$5,500,000 from within this account for the job creation demonstration authorized under section 505 of the Family Support Act of 1988. This program has been very successful in moving people off welfare and into work. As in past years, the Committee expects that this program will be administered by the

Office of Community Services and that a priority be given to community development corporations.

*Program administration*

The Committee recommends \$138,343,000 for program administration, a decrease of \$4,718,000 below the fiscal year 1997 appropriation and \$4,772,000 below the administration request. This reduction reflects the increased availability of mandatory appropriations available for administrative activities, under terms of recently enacted welfare reform legislation.

This "Program administration" account funds Federal administration costs for the Administration for Children and Families [ACF]. The Committee is mindful of the many changes taking place among the programs administered by the Administration for Children and Families. The Committee has included what it believes are sufficient funds to permit ACF to carry out its important mission of improving the lives of America's children and families. The Committee recognizes that ACF will have to reallocate administrative resources within its budget to accommodate its changing workload and program mix. In particular, the Committee encourages ACF to utilize resources no longer needed to administer programs which the Congress has reduced, eliminated, or reformed to carry out its increased responsibilities in other important programmatic areas, such as child support enforcement, and in expanded activities to ensure program accountability, promote effective practices, and measure the effectiveness of new approaches to assisting families in need.

*Rescissions*

The Committee has included bill language rescinding a total of \$21,000,000 made available in recently enacted welfare reform legislation for surveys and research activities. These are activities that have been historically funded in appropriations bills, not through authorizing legislation. Funds for social services research activities are included elsewhere in this account.

*Crime reduction programs*

The Committee recommends \$93,000,000 for violent crime reduction programs, \$60,200,000 above the fiscal year 1997 appropriation and \$6,000,000 below the administration request. The Committee notes that an additional \$48,220,000 for crime bill activities is provided under the Centers for Disease Control and Prevention, which is \$7,220,000 above the 1997 level and \$3,220,000 over the budget request.

For the community schools youth services and supervision program, the Committee recommends no funding.

For the runaway youth prevention program, the Committee recommends \$15,000,000, which is \$7,000,000 above the fiscal year 1997 appropriation and the same as the administration request. This is a discretionary grant program open to private nonprofit agencies for the provision of services to runaway, homeless, and street youth. Funds may be used for street-based outreach and education, including treatment, counseling, provision of information,

and referrals for runaway, homeless, and street youth who have been subjected to or are at risk of being subjected to sexual abuse.

For the national domestic violence hotline, the Committee recommends \$1,200,000, which is the same as the fiscal year 1997 appropriation and the administration request. This is a cooperative agreement which funds the operation of a national, toll-free, 24-hours-a-day telephone hotline to provide information and assistance to victims of domestic violence.

The Committee recommends \$76,800,000 for the grants for battered women's shelters program, \$4,000,000 above the fiscal year 1997 program level and \$6,800,000 above the administration request. This is a formula grant program to support community-based projects which operate shelters for victims of domestic violence. Emphasis is given to projects which provide counseling, advocacy, and self-help services to victims and their children.

FAMILY SUPPORT AND PRESERVATION

Appropriations, 1997 .....	\$240,000,000
Budget estimate, 1998 .....	255,000,000
Committee recommendation .....	255,000,000

The Committee recommends \$255,000,000 for fiscal year 1998, the same as the amount requested by the administration and \$15,000,000 above the fiscal year 1997 level. These funds will support: (1) community-based family support services to assist families before a crisis arises; and (2) innovative child welfare services such as family preservation, family reunification, and other services for families in crisis. These funds include resources to help with the operation of shelters for abused and neglected children, giving them a safe haven, and providing a centralized location for counseling.

PAYMENTS TO STATES FOR FOSTER CARE AND ADOPTION ASSISTANCE

Appropriations, 1997 .....	\$4,445,031,000
Budget estimate, 1998 .....	4,311,000,000
Committee recommendation .....	4,311,000,000

The Committee recommends \$4,311,000,000 for this account, which is the same as the budget request and \$134,031,000 less than the 1997 comparable level. Also included is the administration's request of \$1,111,000,000 for an advance appropriation for the first quarter of fiscal year 1999. The Foster Care Program provides Federal reimbursement to States for: maintenance payments to families and institutions caring for eligible foster children, matched at the Federal medical assistance percentage [FMAP] rate for each State; and administration and training costs to pay for the efficient administration of the Foster Care Program, and for training of foster care workers and parents.

The Adoption Assistance Program provides funds to States for maintenance costs, and the nonrecurring costs of adoption, for children with special needs. The goal of this program is to facilitate the placement of hard-to-place children in permanent adoptive homes, and thus prevent long, inappropriate stays in foster care. As in the Foster Care Program, State administrative and training costs are reimbursed under this program.

## ADMINISTRATION ON AGING

Appropriations, 1997 .....	\$830,131,000
Budget estimate, 1998 .....	838,168,000
Committee recommendation .....	854,074,000

The Committee recommends an appropriation of \$854,074,000 for aging programs, \$23,943,000 more than the 1997 appropriation and \$15,906,000 above the amount requested by the administration.

The Committee recommends a legislative provision which would prevent any State from having its administrative costs under title III of the Older Americans Act reduced by more than 5 percent below the fiscal year 1995 level. This provision was included in the fiscal year 1996 omnibus appropriations bill.

*Supportive services and senior centers*

The Committee recommends an appropriation of \$305,556,000 for supportive services and senior centers, an increase of \$14,181,000 above the amount requested by the administration and \$5,000,000 more than the amount appropriated in fiscal year 1997. This State formula grant program funds a wide range of social services for the elderly, including multipurpose senior centers and ombudsman activities. State agencies on aging, award funds to designated area agencies on aging who in turn make awards to local services providers. All individuals age 60 and over are eligible for services, although, by law, priority is given to serving those who are in the greatest economic and social need, with particular attention to low-income minority older individuals. The basic law States have the option to transfer up to 20 percent of funds appropriated between the senior centers program and the nutrition programs which allows the State to determine where the resources are most needed.

*Ombudsman/elder abuse*

The Committee has earmarked \$4,449,000 for the ombudsman services program and \$4,732,000 for the prevention of elder abuse program within the funds for "Supportive services and senior centers" account. The amounts recommended are the same amount provided for these programs in fiscal year 1997. Both programs provide formula grants to States to prevent the abuse, neglect, and exploitation of older individuals. The ombudsman program focuses on the needs of residents of nursing homes and board and care facilities, while elder abuse prevention targets its message to the elderly community at large.

*Preventive health services*

The Committee recommends \$15,623,000 for preventive health services, the same amount as the budget request and the amount appropriated in fiscal year 1997. Funds appropriated for this activity are part of the comprehensive and coordinated service systems targeted to those elderly most in need.

*Congregate and home-delivered nutrition services*

For congregate nutrition services, the Committee recommends an appropriation of \$368,716,000, an increase of \$4,181,000 over the amount appropriated in 1997 and an increase of \$8,906,000 over

the budget request. For home-delivered meals, the Committee recommends \$110,064,000, the amount recommended by the administration and \$4,725,000 more than the fiscal 1997 appropriation. These programs address the nutritional need of older individuals. Projects funded must make home-delivered and congregate meals available at least once a day, 5 days a week, and each meal must meet one-third of the minimum daily dietary requirements. While States receive separate allotments of funds for congregate and home-delivered nutrition services and support services they are permitted to transfer up to 30 percent of funds between these programs.

The Committee has included a provision carried in last year's bill which requires the Assistant Secretary to provide the maximum flexibility to applicants who seek to take into account subsistence, local customs, and other characteristics that are appropriate to the unique cultural, regional, and geographic needs. The provision clarifies that applicants who serve American Indian, native Hawaiian, and Alaska Native recipients in highly rural and geographically isolated areas are permitted to continue to tailor nutrition services that are appropriate to the circumstances associated with the served population. In addition, in an effort to meet the needs of the native Hawaiian elderly population sufficiently, the Committee urges the native Hawaiian grantee to coordinate with the Lunalilo Home, the only care facility for aged native Hawaiians.

#### *Title VII*

The Committee recommendation does not include \$9,181,000 for line-item funding of the elder abuse and ombudsman programs, authorized under title VII of the Older Americans Act; these activities are earmarked within the "Supportive services" account, the same as was done in the fiscal year 1997 appropriation.

#### *In-home services for frail older individuals*

The Committee recommends \$9,263,000 for in-home services for the frail elderly, the same as the fiscal year 1997 enacted level and the budget request. In-home services include homemaker and home health aides, visiting and telephone reassurance, chore maintenance, in-home respite care for families, and minor home modifications.

#### *Aging grants to Indian tribes and native Hawaiian organizations*

The Committee recommends \$20,057,000 for grants to Indian tribes, an increase of \$4,000,000 over the budget request and fiscal 1997 level. Under this program awards are made to tribal and Alaskan Native organizations and to public or nonprofit private organizations serving native Hawaiians which represent at least 50 percent Indians or Alaskan Natives 60 years of age or older to provide a broad range of services and assure that nutrition services and information and assistance services are available.

#### *Aging research and training*

The Committee recommends \$10,000,000 for aging research, training, and discretionary programs, \$6,000,000 more than the fiscal year 1997 enacted level and the budget request. These funds

support activities designed to expand public understanding of aging and the aging process, test innovative ideas and programs to serve older individuals, and provide technical assistance to agencies who administer the Older Americans Act. Of the funds provided, the Committee expects the Department to use at least \$2,000,000 to fund a national program of statewide senior legal services hotlines and related elder rights projects and \$800,000 to continue and expand the Family Friends Program. Additional funds for the Family Friends Program may be used to initiate two new sites and for the National Council on Aging to continue to provide training and technical assistance to existing and new sites. The recommendation includes \$2,000,000 to continue the initiative begun last year, with funds transferred from the Health Care Financing Administration, to test different models designed to train retirees in local communities in detection and reporting of Medicare waste and abuse. Although this second year funding is provided directly to the Administration on Aging, the Commissioner is expected to continue consultation with other affected agencies, including the Office of Inspector General and the General Accounting Office.

Within the funds provided, the Committee has included \$260,000 for the National Asian Pacific Center on Aging to continue an existing grant directed to developing, strengthening, and expanding linkages of a rapidly growing Asian Pacific aging community with local, State, and national community service providers and organizations.

Within the amount provided for the National Indian Council on Aging, the Committee has included sufficient funds to continue an existing grant to increase Indian elder awareness and participation in the public policy issues that directly impact all of Indian country.

The Committee recommendation includes funding for the pension counseling demonstration projects authorized under title IV of the Older Americans Act to both continue existing projects and create additional projects in other regions of the country. Pension counseling projects provide information, advice, and assistance to workers and retirees about pension plans, benefits, and pursuing claims when pension problems occur. The Committee recommendation also includes sufficient funding for a program that focuses on educating spouses across America on the importance of savings and retirement security. The Committee urges that full and fair consideration be given to a proposal from the Women's Institute for a Secure Retirement in this regard.

The Committee urges the Secretary to provide \$1,000,000 for social research into Alzheimer's disease care options, best practices, and other Alzheimer's research priorities, including respite care, assisted living, the impact of intervention by social service agencies on victims, and related needs. The Committee recommends this research utilize and give discretion to municipalities with aged populations (over the age of 60) of over 1 million with preference given to the largest population. The Committee also recommends that unique partnerships to effect this research be considered. Alzheimer's disease afflicts 10 percent of Americans over the age of 65, and as many as 47 percent of Americans over the age of 85, and has no effective treatment or cure.

*Program administration*

The Committee recommends \$14,795,000 to support Federal staff that administer the programs in the Administration on Aging, the same amount as the budget request and \$37,000 more than the 1997 appropriation. These funds provide administrative and management support for programs administered by the Department. No funds have been included for the requested Alzheimer's initiative; instead, the Committee has funded an Alzheimer's program within the Health Resources and Services Administration.

*Native Americans*

The Committee is aware that the Administration on Aging has only provided support for the first 3 years of the 4-year cooperative agreements. Therefore, the Committee strongly urges the Assistant Secretary on Aging to provide \$350,000 from existing funds for each of the national resource centers serving native American elders in fiscal year 1998.

## OFFICE OF THE SECRETARY

## GENERAL DEPARTMENTAL MANAGEMENT

Appropriations, 1997 .....	\$178,033,000
Budget estimate, 1998 .....	163,177,000
Committee recommendation .....	180,439,000

The Committee recommends \$180,439,000 for general departmental management [GDM]. This is \$17,262,000 more than the administration request and \$2,406,000 more than the fiscal year 1997 level. Within this amount, the Committee includes the transfer of \$5,851,000 from Medicare trust funds, which is the same as the administration request and the fiscal year 1997 level.

This appropriation supports those activities that are associated with the Secretary's role as policy officer and general manager of the Department. It also supports certain health activities that were previously performed in the former Office of the Assistant Secretary of Health, including the Office of the Surgeon General. GDM funds support the Department's centralized services carried out by several Office of the Secretary staff divisions, including personnel management, administrative and management services, information resources management, intergovernmental relations, legal services, planning and evaluation, finance and accounting, and external affairs.

The Office of the Surgeon General, in addition to its other responsibilities, provides leadership and management oversight for the PHS Commissioned Corps, including the involvement of the Corps in departmental emergency preparedness and response activities.

As was done last year, the Committee provides funds to the Office of the Secretary to administer the Office of Emergency Preparedness, the Office of Disease Prevention and Health Promotion, and the Office of Research Integrity. These offices were consolidated within the Office of the Secretary in conjunction with the elimination of the Office of the Assistant Secretary for Health. Sufficient funds are provided so that, if the Secretary so chooses, each

of the above offices may be supported at or near the previous fiscal year's level.

The Committee has provided \$1,000,000 to support the activities of the United States-Mexico Border Health Commission as authorized by Public Law 103-400. This is a new activity. The Commission is authorized to assess and resolve current and potential health problems that affect the general population of the United States-Mexico border area. The United States representatives of the Commission include the Secretary and the health commissioners of the States of Arizona, California, New Mexico, and Texas. The Committee expects the Commission to build upon ongoing binational activities and to pursue cooperative activities that improve the health of residents in the border area.

The Committee has encouraged the CDC to support multidisciplinary, collaborative efforts in health sciences and other relevant disciplines to examine the various aspects of health risk assessment. These efforts would identify individuals and groups at risk for adverse conditions, including genetic risks, and would develop interventions to address such risks. In this regard, the Committee recognizes the demonstrated excellence and collaborative efforts of the University of Miami and Florida State University consortium, and encourages full and fair consideration of support by the Office of Public Health and Science for this partnership.

The Committee is again aware of the Public Health Service's sensitivity to the health needs of Hawaii, including the assignment of senior programmatic personnel, and is appreciative of these efforts.

The Committee is aware of differences in the honoraria paid to nongovernment employees participating in the Department's objective review of grants and contracts. The Committee requests that it be informed prior to next year's testimony by the Secretary as to steps taken to correct any major discrepancies in this area.

For several years, the Committee has supported efforts to relocate and revitalize the National Museum of Health and Medicine. The Committee is pleased to learn that the museum and its foundation are working with representatives of the Centers for Disease Control and Prevention and the National Institutes of Health to explore the potential for the museum to communicate information about activities currently underway at CDC and NIH in the areas of health promotion, disease prevention, and medical research.

The Committee has again provided \$500,000 from this account for the continuation of the human services transportation technical assistance program. In many cases, particularly in rural areas, human services transportation providers are the only source of public transportation for the elderly, people with physical and developmental disabilities, and the economically disadvantaged. As in the past, this program is to be administered by a national membership organization with expertise in working with local transit organizations. The program provides assistance to these organizations on coordination and management, and on meeting requirements of the Americans with Disabilities Act. With the biggest obstacle to gaining employment in many rural areas is obtaining transportation to centers of employment, the Committee expects a continued emphasis on assisting communities with welfare reform-related transportation issues involving jobseekers. The Committee com-

mends the technical assistance provided by the Community Transportation Association of America.

The Committee has received testimony supporting the need for improved public understanding of the history of medical ethics in order to contribute to contemporary public knowledge of controversial medical ethics issues. The Committee is aware of the work of the Office of Public Health History, and of a proposal to establish a private Center for the History of Medical Ethics. The Committee encourages the Office of Public Health History to support efforts to maintain and interpret for the public important national archives associated with the history of medical ethics.

Last year, the Committee urged all necessary steps be taken to protect the safety of the U.S. blood supply and blood products. While the Department initiated a blood safety committee in response to the Institute of Medicine report regarding contamination of the blood supply, the Committee also outlined a series of steps to be taken by CDC, NIH, and FDA, to reduce the risk of viral and pathogenic contamination of blood and blood products. The Committee believes that the frequency of recent incidents of blood product contamination further demonstrates the urgency of moving forward on these efforts. The Committee urges the Secretary to develop an implementation plan to improve the safety of the U.S. blood supply and blood products and to address the vulnerability of persons with bleeding disorders and transfusion recipients to blood contaminants.

The Committee requests the Secretary to issue a report by March 1, 1998, on the U.S. Public Health Service Commissioned Corps that includes historical trends on direct and indirect costs of maintaining the Corps as well as the current funding level, numbers of Corps personnel assigned to the individual agencies of the PHS and other Federal agencies and to international organizations, the expenditures by agency on Corps personnel and operations, current organizational structure, and other analytical information. The Committee expects that this report include an evaluation of the overall strategic direction and rationale of the Corps, and an assessment of the cost effectiveness of maintaining the Corps in its present form compared to conducting similar activities within the civil service personnel system.

The Committee remains supportive of the Department's Chronic Fatigue Syndrome Coordinating Committee [CFSCC] and is aware of the CFSCC's recommendations to the Secretary, including formation of a subcommittee to consider renaming the illness and other workshops.

The Committee is aware of the efforts of the Public Health Service to enhance the value to a broad audience of its professional journal, *Public Health Reports*, and encourages the pursuit of all necessary means to attain the journal's fiscal stability, including cosponsorship with outside associations.

The health status of children living in the Bronx section of New York City is particularly worrisome with sociodemographic and health status indicators which underscore a need for improved health services. The Committee is aware of plans to establish a state-of-the-art children's hospital in the Bronx to address the critical needs of its pediatric population. To enhance current Federal

child health care programs in the area, the Committee encourages the Department to assist in the planning of this new facility and its potential programs.

*Medicare fraud, waste, and abuse*

The Committee is aware of the results of an extensive chief financial officer audit of claims paid by Medicare last year, and understands that the audit revealed that up to \$23,000,000,000 or over 14 percent of processed fee-for-service payments last year may have been lost as a result of mispayments. The Committee is very concerned over the lack of an adequate plan for the recovery of these projected losses or for the prevention of future losses. The Committee requests that the Secretary submit a comprehensive action plan to the Committee within 60 days of enactment of this bill. The Committee further asks to be briefed regularly on progress made in implementing this plan. Finally, the Committee expects that the Secretary, working in cooperation with the Office of Inspector General, will conduct a similar audit this fiscal year.

Only 3 out of every 1,000 certified providers is subject to a comprehensive audit for overpayments in 1 year. In an effort to assure increased capacity to audit for, project, and collect overpayments due to the Government within the budget provided, the Committee urges the Secretary to test the imposition of a fee in cases where providers, physicians, or suppliers reject statistically valid overpayment projections and request a second audit with a larger sample. The fee would cover the cost of the more extensive audit requested by the provider. Funds recovered from agencies to cover the costs of a more extensive audit should be available to the Secretary to defray the cost of the audit. The Committee expects that this test will last no longer than 2 years and expects to receive a report on its results promptly after its conclusion.

*Medicare transaction system*

The Committee is very concerned with the poor management of the development and implementation of the Medicare transaction system. This major undertaking has been subject to considerable cost overruns and implementation delays. The Committee expects to receive a comprehensive budget and justification for completion of the project and asks that it be consulted before any additional funds are allocated for this project.

*Adolescent family life*

The Committee has provided \$19,209,000 for the Adolescent Family Life Program [AFL]. This is \$5,000,000 more than the administration request and \$5,003,000 higher than the fiscal year 1997 appropriation.

AFL is the only Federal program focused directly on the issue of adolescent sexuality, pregnancy, and parenting. Through demonstration grants and contracts, AFL focuses on a comprehensive range of health, educational, and social services needed to improve the health of adolescents, including the complex issues of early adolescent sexuality, pregnancy, and parenting.

Within the total provided, the Committee has included funds to continue the prevention projects begun in fiscal year 1997, as well

as start new prevention projects. The Committee directs the Department to fund new prevention projects which enable smaller communities to begin the organization and implementation of coalitions to implement abstinence-based education programs. The Committee also directs the Department, when announcing grant competitions, to extend the length of time that applicants are given to complete application packages, provide extensive technical assistance to applicants, with special assistance given to new applicants, and revise the terminology and instructions in grant applications to assure that the information being requested is as clear as possible.

#### *Physical fitness and sports*

The Committee recommends \$998,000 for the Federal staff which supports the President's Council on Physical Fitness and Sports. This is \$2,000 less than the administration request and the same as the fiscal year 1997 appropriation.

The President's Council on Physical Fitness and Sports serves as a catalyst for promoting increased physical activity/fitness and sports participation for Americans of all ages and abilities, in accordance with Executive Order 12345, as amended. The programs sponsored by PCPFS are supported largely through private sector partnerships.

#### *Minority health*

The Committee recommends \$23,600,000 for the Office of Minority Health. This is \$10,984,000 below the fiscal year 1997 appropriation and \$500,000 above the administration request.

The Office of Minority Health [OMH] focuses on strategies designed to decrease the disparities and to improve the health status of racial and ethnic minority populations in the United States. OMH establishes goals, and coordinates all departmental activity related to improving health outcomes for disadvantaged and minority individuals. OMH supports several demonstration projects, including the Minority Community Health Coalition, the Bilingual/Bicultural Service, the Center for Linguistic and Cultural Competency in Health Care, and the Family and Community Violence Prevention Program.

The Committee remains concerned about the high rate of cancer incidence and prevalence among the Nation's minority populations, and is aware of the success of the OMH North Philadelphia Cancer Awareness and Prevention Program at the Albert Einstein Medical Center, which is providing comprehensive cancer education outreach and screening programs targeted to minorities in underserved urban areas. The Committee believes the methods used by this innovative program can be disseminated nationwide to address the critical problem of hypertension among minority communities. The Committee has provided an increase in funding above the administration request to sustain the OMH North Philadelphia Cancer Awareness and Prevention Program at the current level.

The Committee recognizes the need to encourage minority development of family practice physicians and encourages the Office to assist programs designed for the purpose of direct and indirect support of family practice residency programs which focus on training,

recruitment, and retention of minorities, including American Indian and Alaska Natives, as family practice physicians.

The Committee encourages the Office of Minority Health to conduct a study on how managed care and the changing health care marketplace is challenging historically minority health professions schools' ability to fulfill their mission to provide adequate health care services and health care professionals for underserved areas.

The Committee is aware of the ongoing demonstration project at Meharry Medical College of Nashville, TN, that focuses on integrating health delivery systems in an underserved community. The Committee encourages the Department to consider sustaining the project through the Office of Minority Health and other operating divisions.

#### *Office on Women's Health*

The Committee recommends \$18,500,000 for the Office on Women's Health. This is \$6,000,000 more than the administration request and the fiscal year 1997 appropriation.

The PHS Office on Women's Health [OWH] develops, stimulates, and coordinates women's health research, health care services, and public and health professional education and training across HHS agencies. It advances important crosscutting initiatives and develops public-private partnerships, providing leadership and policy direction, and initiating and synthesizing program activities to redress the disparities in women's health.

Moreover, in view of the disparities in women's health research, services, and education and training, the Committee believes that one mechanism through which these inequities can be resolved is through providing support through various mechanisms to academic, consumer, health care professional, and community groups in this important area. To that end, the Committee urges that the PHS OWH develop and support programs to support crosscutting research, services, innovative partnerships, and demonstrations that will advance women's health. The Committee commends the PHS OWH for its leadership in developing new initiatives to improve women's health.

Within the amount provided, the Committee has included \$2,500,000 to support continued implementation of the National Women's Health Information Center. This Center in partnership with the Department of Defense, provides a single access point to Federal information on women's health through a toll-free telephone number and the Internet, and links to over 1,000 private sector resources as well. Consumers, researchers, health professionals, women's health advocates and the media will have access to the wide variety of information and resources on women's health that has been created by the various agencies of the Department of Health and Human Services, in partnership with the Department of Defense and all other agencies in the Federal Government.

The National Centers of Excellence in Women's Health Program, established in fiscal year 1996 by the PHS OWH, through contracts to six academic health centers around the Nation, is developing model health care services, multidisciplinary research, public and health care professional education on women's health, and fostering leadership opportunities for women's health care professionals. Six

new centers are expected to be awarded in fiscal year 1997, along with up to four minority women's health centers of excellence. The Committee has provided \$5,000,000 to continue funding the existing centers established in 1996 and to support additional new centers.

The Committee has also included funds for women's health coordinators. Regional coordinators have been established in the 10 Public Health Service regions around the Nation and link together all of the resources available from the Department of Health and Human Services and coordinate and stimulate women's health activities. They also work with women's groups and health care professionals at the regional, State, and local levels. These additional funds will be used to develop regional women's health activities in each of the 50 States.

The Committee is concerned that cardiovascular diseases, including heart disease and stroke, remain the No. 1 killer of women. Twice as many women die from heart disease as those who die from breast and ovarian cancers. Although cardiovascular disease is commonly assumed to be a disease primarily of men, over one-half of all deaths caused by cardiovascular disease occur among women. The Committee is also concerned that women, especially older women are not properly screened for heart disease and there is little focus on prevention. The Committee is also concerned that traditionally women have not been the focus in prevention and treatment research. As a result, the survival rate for women following the first heart attack is less than for men. The Committee urges the PHS OWH to undertake a comprehensive review of the impact of heart disease on women.

Osteoporosis is today a major health problem that the World Health Organization has characterized as epidemic. Osteoporosis affects 28 million Americans who either have or are at risk of the disease. The direct medical costs amount to \$13,800,000,000 annually and are expected to increase dramatically as the population ages. A task force convened by the Office of Public Health and Science on Women's Health, in conjunction with the National Osteoporosis Foundation has determined that a public education campaign is needed. The campaign will target teenage women, ages 13 to 18, to help them develop positive health behaviors, (for example, diet, exercise, calcium intake) that can have a significant effect on bone strength that can last a lifetime. Within the amount recommended the Committee has included funds to contribute to the launch of this campaign.

The Committee commends the national action plan on breast cancer for its many accomplishments. This important public/private partnership, which catalyzes breast cancer activities across the Federal Government and the private sector, has accomplished a great deal in the war against breast cancer. The Committee has provided sufficient funds within the budget of the National Cancer Institute to support the ongoing activities of the NAPBC which shall continue to be implemented by the PHS OWH.

*Public health emergencies/antiterrorism measures*

The Committee has provided \$13,764,000, which is the same as last year's level and \$3,764,000 more than the President's request,

for activities to counter the adverse health and medical consequences from major terrorist events. Within this amount, sufficient funds are provided for the Office of Emergency Preparedness to staff and administer this program, as well as the other OEP activities specified in the administration's request. The amount provided by the Committee is intended to continue the formation of new metropolitan medical strike teams in key uncovered urban areas of the country.

The Department has lead responsibility for health, medical, and health-related support under the Federal response plan to catastrophic disasters. On behalf of the Department, the Office of Emergency Preparedness assesses the potential health and medical consequences of a terrorist incident and to formulate necessary responses. The funds provided would support activities to build local, State, and Federal capacity to respond to terrorist acts with public health implications. Such activities would include assisting local emergency managers through the MMST system to build an enhanced capability to detect and identify biologic and chemical agents.

The Committee is encouraged by the office's efforts to consult broadly with other Federal-supported agencies and institutions, such as the Institute of Medicine, on planning and program assessment, and further encourages the office to broaden its consultation and shared activities to include nongovernmental organizations, such as the Chemical and Biological Arms Control Institute, with specific expertise in chemical and biological threat reduction and assessment.

OFFICE OF INSPECTOR GENERAL

Appropriations, 1997 .....	\$34,790,000
Budget estimate, 1998 .....	31,921,000
Committee recommendation .....	31,921,000

The Committee recommends an appropriation of \$31,921,000 for the Office of Inspector General. This is the same as the administration request and \$2,869,000 less than the fiscal year 1997 level. The Health Insurance Portability and Accountability Act of 1996 provides no less than \$80,000,000 and no more than \$90,000,000 in funds for the Office of the Inspector General in fiscal year 1998; the total funds provided to the Office by this bill and the authorizing bill would be between \$111,921,000 and \$121,921,000 in fiscal year 1998.

The Office of Inspector General conducts audits, investigations, inspections, and evaluations of the operating divisions within the Department of Health and Human Services. The OIG functions with the goal of reducing the incidence of waste, abuse, and fraud. It also pursues examples of mismanagement toward the goal of promoting economy and efficiency throughout the Department.

The Committee commends the Office of Inspector General for their efforts to reduce waste, fraud, and abuse in Department programs. The OIG CFO audit of the Health Care Financing Administration revealed significant shortcomings in the Department's efforts to prevent Medicare mispayments. The Committee urges the OIG to do further analysis of the results of this audit so that it can provide the Committee with a specific set of recommendations for

reform within the next 6 months. In addition, the Committee further urges the OIG to examine the use by providers of computer programs that are intended to maximize their Medicare payments. The Committee is interested to learn of any correlation between use of these programs and Medicare mispayments.

#### OFFICE FOR CIVIL RIGHTS

Appropriations, 1997 .....	\$19,490,000
Budget estimate, 1998 .....	20,530,000
Committee recommendation .....	19,659,000

The Committee recommends an appropriation of \$19,659,000 in Federal funds for the Office for Civil Rights. This is \$871,000 less than the administration request and \$169,000 more than the fiscal year 1997 level.

The Committee also recommends the transfer of \$3,314,000 from the Medicare trust funds, which is the same as the administration request and \$7,000 above the fiscal year 1997 level.

The Office for Civil Rights is responsible for enforcing civil rights-related statutes in health care and human services programs. To enforce these statutes, OCR investigates complaints of discrimination, conducts program reviews to correct discriminatory practices, and implements programs to generate voluntary compliance among providers and constituency groups of health and human services.

#### POLICY RESEARCH

Appropriations, 1997 .....	\$18,486,000
Budget estimate, 1998 .....	9,000,000
Committee recommendation .....	9,500,000

The Committee recommends an appropriation of \$9,500,000 for policy research. This is \$500,000 higher than the administration request and \$8,986,000 less than the fiscal year 1997 amount.

Funds appropriated under this title provide resources for research programs that examine broad issues which cut across agency and subject lines, as well as new policy approaches outside the context of existing programs. This research can be categorized into three major areas: health policy, human services policy, and disability, aging and long-term care policy.

The Committee encourages the HELP DESK initiative sponsored by the Office of the Assistant Secretary for Planning and Evaluation intended to complement and extend technical assistance provided at the local level to all communities which competed for Federal empowerment zone/enterprise community designation in 1994. This initiative is to be carried out by a nonprofit organization with expertise in providing multisectoral technical assistance at the local level. Sufficient funds are provided within the increase to this account to carry out this initiative. The Committee recommends the program begin in a State with the following characteristics: a large rural population, exceptionally high poverty rates and income transfer rates, and significant redistribution and return migration of African-American and other minorities over the past decade.

The Committee is aware of the Department's March 1995 report entitled "Strategic Elements for Environmental Justice," issued pursuant to the President's Executive Order 12898, which identi-

fied a strategy for addressing the disproportionate environmental and human health burdens in low-income and minority communities. Recent studies on lead poisoning and asthma further indicate the need for additional resources focused on these communities. Therefore, the Committee strongly encourages the Department to place increasing emphasis and resources to support the capacity of community health centers, whose primary mission is to serve low-income minority communities, in conducting research and developing more effective intervention and prevention strategies. The Secretary should be prepared to identify what steps have been taken to address this recommendation at next year's hearings.

#### GENERAL PROVISIONS

The Committee recommendation includes language placing a \$37,000 ceiling on official representation expenses (sec. 201), the same as existing law.

The Committee recommendation includes language from last year's bill limiting assignment of certain public health personnel (sec. 202).

The Committee recommendation retains language carried last year regarding set-asides in the authorizing statute of the National Institutes of Health (sec. 203).

The Committee recommendation retains a provision carried in last year's bill to limit use of grant funds to pay individuals more than an annual rate of \$125,000 (sec. 204).

The Committee recommendation retains language from last year's bill restricting the use of taps (sec. 205) for program evaluation activities by the Secretary prior to submitting a report on the proposed use of the funds to the Appropriations Committee. Section 241 of the Public Health Service Act authorizes the Secretary to redirect up to 1 percent of the appropriations provided for programs authorized under the act for evaluation activities.

The Committee recommendation retains language prohibiting the use of funds for the Federal Council on Aging and the Advisory Board on Child Abuse and Neglect (sec. 206).

The Committee recommendation retains language included in last year's restricting transfers of appropriated funds among accounts and requiring a 15-day notification of both Appropriations Committees prior to any transfer (sec. 207).

The Committee recommendation includes language from last year's bill permitting the transfer of up to 3 percent of AIDS funds among Institutes and Centers (sec. 208) by the Director of NIH and the Director of the Office of AIDS Research of NIH. The recommendation also includes language included in fiscal year 1997 which directs that the funding for AIDS research as determined by the Directors of the National Institutes of Health and the Office of AIDS Research be allocated directly to the OAR for distribution to the Institutes and Centers consistent with the AIDS research plan (sec. 209).

The Committee recommendation includes a new provision to permit funds to be used for the National Institutes of Health to provide transit subsidies in amounts consistent with the transportation subsidy programs authorized under section 629 of the Public

Law 101–509 to non-FTE bearing positions, including trainees, visiting fellows, and volunteers (sec. 210).

TITLE III—DEPARTMENT OF EDUCATION

EDUCATION REFORM

Appropriations, 1997 .....	\$890,973,000
Budget estimate, 1998 .....	1,245,000,000
Committee recommendation .....	1,271,000,000

The Committee has provided \$1,271,000,000 in this account for education reform initiatives. The recommendation includes \$530,000,000 for education reform activities authorized by the Goals 2000: Educate America Act, \$200,000,000 to continue implementation of school-to-work transition systems authorized by the School-to-Work Opportunities Act, and \$425,000,000 for the technology literacy challenge fund, authorized by the Elementary and Secondary Education Act and \$116,000,000 for the technology innovative challenge grants.

*Goals 2000 State grants*

The Committee recommends \$500,000,000 for State and local systemic education improvement grants authorized by title III of the Goals 2000: Educate America Act. This amount is an increase of \$24,000,000 over the fiscal year 1997 appropriation and \$105,000,000 below the administration request.

Goals 2000 funds provide incentives for States to devise their own strategies for comprehensive reform of elementary and secondary education. Grants are distributed to States through a formula based on relative shares each State received in the previous year under titles I and VI of the Elementary and Secondary Education Act. By law, 1 percent is reserved for the outlying areas, schools supported by the Bureau of Indian Affairs and the Alaska Federation of Natives.

*Parental assistance*

The Committee recommends \$30,000,000 for title IV of the Goals 2000: Educate America Act, which authorizes a variety of activities designed to improve parenting skills and strengthen the partnership between parents and professionals in meeting the education needs of their school-age children, including those aged birth through 5. The recommendation is \$15,000,000 more than the administration request and the fiscal year 1997 amount. The increase provided will permit expansion of voluntary parent centers to 12 additional States bringing the total number of States and territories participating in the program to at least 52. Of the \$30,000,000, \$15,000,000 will allow for continuation grants and \$15,000,000 will allow for new grants. The Committee further directs the Department to reopen competition to eligible entities for fiscal year 1998 funds.

It has been brought to the Committee's attention that many of the grantees currently receiving funding under this program are making only minimal efforts to implement Parents as Teachers [PAT] or Home Instruction for Preschool Youngsters [HIPPO] Programs. Therefore, the Committee urges the Department to provide at least 50 percent of each grant award for PAT or HIPPO Programs. The Committee also directs the Department to report to the Committee by April 1, 1998, on steps being taken to assure that the program dollars are being spent in accordance with program requirements.

*School-to-work opportunities*

The Committee supports funds for the School-to-Work Opportunities Act, and has recommended \$200,000,000 for the Department of Education's share of program funding. The amount recommended is \$27,000 more than the 1997 appropriation and the same as the administration request. Together with \$200,000,000 recommended for the Labor Department, \$400,000,000 in direct funding is provided to help States implement their plans for creating systems to improve the transition from school to work.

Local school-to-work programs will include a combination of work-based learning involving job training and school-based learning tied to both occupational skill standards and the voluntary academic standards States establish under Goals 2000. Students who complete a school-to-work program will receive a high school diploma, a certificate recognizing 1 or 2 years of postsecondary education, if appropriate, and a portable, industry-recognized skill certificate.

*Technology literacy challenge fund*

The Committee recommends \$425,000,000 for the technology literacy challenge fund authorized by section 3132 of the Elementary and Secondary Education Act, an increase of \$225,000,000 over the fiscal year 1997 appropriation and the same as the budget request.

The fund helps States put into practice strategies to enable schools to integrate technology into school curricula. Funds are used to enhance students' critical thinking skills, support training for teachers, connect classrooms to the information superhighway, and purchase computers and software. Funds are distributed according to each State's share of title I, part A moneys. To be eligible for funds, States must submit a statewide technology plan describing long-term strategies for financing technology education in the State, including private-sector participation and targeting funds to school districts with the greatest need.

*Technology innovation challenge grants*

The Committee recommends \$116,000,000 for two of the technology programs authorized as part A of title III of the ESEA, an increase of \$31,000,000 above the budget request. In fiscal year 1997, \$266,965,000 was appropriated for this purpose. This year, the administration has requested \$425,000,000 for State-grant activities that were previously funded by this program.

This activity supports partnerships among educators, business and industry, and other organizations in the community to develop

innovative new applications of technology and community plans for fully integrating technology into schools.

The Committee has also included \$10,000,000 to continue the regional consortia, the same amount appropriated in fiscal year 1997 and recommended by the administration. These consortia assist States and local educational agencies in the identification and procurement of resources necessary to implement technology plans, develop training resources for both elementary and secondary and adult education, provide referrals to sources of technical assistance and professional development, and assist institutions of higher education to establish preservice training programs in the appropriate use of educational technology.

The Committee is aware of the growing use of online resources in education, and of the increasing importance of access to computer technology for all educational institutions. Not only are computer resources essential tools for students, but they significantly increase access to global resources available for instruction, provide high performance computing capabilities for research, and create more flexible opportunities for continuous learning. The Committee believes that increasing computer connectivity, joint storage, and data mining capabilities at the regional level has the potential to vastly improve the quality of primary and secondary schools as well as colleges, universities, and the private sector. The Committee, therefore, urges the Department of Education to provide \$10,000,000 for a demonstration project to develop a supercomputing infrastructure with broad-based networking applications for elementary and secondary schools, colleges, and universities. The model should also include access to science and medical technology. The HUBS project (hospitals, universities, businesses, and schools) in the Delaware Valley region of Pennsylvania is currently providing an array of technological services to their students, through e-mail, Internet access, and automated library systems and would be especially suited to conduct a demonstration in this area.

The Committee urges the Secretary, when awarding educational technology grants to give consideration to school districts around the country, such as the Houston Independent School District, that exemplify high concentrations of at-risk youth; empowerment zones and enhanced enterprise communities.

#### *Technology training for educators*

The Committee has included \$30,000,000 within the funds provided for the Technology Innovation Challenge Grant Program for a new competitive grants to consortia that have developed exemplary programs that train new and current teachers, administrators, and other educators, to use advanced technology, and to integrate education technology into teaching methods that improve instruction. The challenge grants program has been effective in developing model programs that can be scaled up through replication, and the program's competitive approach is now needed to expand and improve the investment in the training of educators to use education technology to improve education. Building on this successful approach, the Secretary shall solicit proposals from State departments of education on behalf of consortia dedicated to teacher training in education technology; such consortia to consist of at

least one local education agency, at least one college of education, private sector education technology firms, and nonprofit education organizations. Each State should be allowed to submit no more than one proposal. In forming the consortium for inclusion in its application, each State department of education should select those programs of preservice teacher preparation and professional development for educators that has been proven most effective and innovative. The review of proposals should consider: explicit evidence of innovation and effectiveness; the extent to which the members of the applicant consortium have sought to establish high standards for training in education technology and its use in schools; and specific efforts by applicant State and local education agencies to be publicly accountable for improving education through the use of technology. Awardees should use grant funds to improve, expand, and disseminate these successful models throughout the State and Nation. Recipients of the awards shall be required to share in the cost of the supported activities, from non-Federal sources, in an amount equal to twice the amount of the Federal share awarded.

EDUCATION FOR THE DISADVANTAGED

Appropriations, 1997 .....	\$7,799,573,000
Budget estimate, 1998 .....	8,077,266,000
Committee recommendation .....	7,807,349,000

The Committee recommends an appropriation of \$7,807,349,000 for education for the disadvantaged. This is \$7,776,000 more than the fiscal year 1997 appropriation and \$269,917,000 less than the administration request. In fiscal year 1997, \$1,298,386,000 was made available for this account in the fiscal year 1998 funds. This year, the Committee forward funded this same amount for fiscal year 1999. The Committee took this action because of the severe budget constraints facing the Committee in fiscal year 1998.

Programs financed under this account are authorized under title I (formerly chapter 1) of the Elementary and Secondary Education Act [ESEA] and section 418A of the Higher Education Act. ESEA title I programs provide financial assistance to State and local educational agencies [LEA's] to meet the special educational needs of educationally disadvantaged children, migrant children, neglected and delinquent children in State institutions, and juveniles in adult correctional institutions. In addition, the Even Start Program supports projects that integrate early childhood education with parenting and adult literacy training. Funds for each of these programs, except for Even Start, are allocated through formulas that include the number of eligible children and each State's average per-pupil expenditure. Even Start funds are allocated according to each State's proportion of title I grants to LEA's.

*Grants to local educational agencies*

Title I grants to local educational agencies provide supplemental education funding to LEA's and schools, especially in high-poverty areas, to help low-income, low-achieving students learn to the same high standards as other children. The program currently provides services to more than 9 million children. The formula for basic grants is based on the number of children from low-income families in each county, weighted by per-pupil expenditures for education in

the State. States in turn make suballocations from the county to the LEA level using the best data available on the number of poor children. States are also required to reserve funds generated by counts of children in correctional institutions to make awards to LEA's for dropout prevention programs involving youth from correctional facilities and other at-risk children. By law, 1 percent of the total LEA grant appropriation is set aside for the Bureau of Indian Affairs and the outlying areas.

For title I basic grants, including the amount transferred to the Census Bureau for poverty updates, the Committee recommends an appropriation of \$6,273,712,000. This amount is \$500,000 more than appropriated in fiscal year 1997 and \$82,362,000 more than the budget request.

The Committee has provided no funding for the targeted grants program. The administration requested \$350,000,000 for this program which distributes funds in a manner that provides higher per-children amounts for counties with the highest percentage of poor children.

The Committee recommends \$1,022,020,000 for concentration grants, the same amount appropriated in fiscal year 1997 and \$22,771,000 more than the budget request. Funds under this program are distributed according to the basic grants formula, except that they only go to counties and LEA's where the number of poor children equals at least 6,500, or 15 percent, of the total school-aged population. Approximately 66 percent of counties nationally receive funds.

The Committee has included bill language which provides that in allocating the 1998 appropriations for basic and concentration grants under title I, part A of the Elementary and Secondary Education Act, the Secretary shall apply a 100-percent hold harmless based on total 1997 grants under this part, including supplemental 1997 appropriations provided under Public Law 105-18. The Committee has taken this action because it is very concerned about the accuracy of updated estimates of school-age children in poor families that were released by the Census Bureau in March 1997. In accordance with recommendations in an interim report by an advisory panel of the National Academy of Sciences, these updated population estimates were combined with 1990 population estimates in the allocation of most 1997 appropriations for title I, part A. However, the Committee has been, and remains, concerned about the accuracy of these updated population estimates, in part because the National Academy of Sciences advisory panel has not yet completed its full analysis and report on the estimation process, and in part because of a consistent pattern whereby use of the updates reduces the share of title I, part A funds that is allocated to States with the highest school-age child poverty rates. The Committee understands that the full National Academy of Sciences advisory panel report on the population estimation methods will be made available during the next several months. The Committee directs that when this report is completed, the Secretary shall consult with the Committee on the panel's findings, and on possible ways to use more up-to-date population estimates without reducing the share of title I funds that is allocated to States and local educational agencies with high rates of poverty among school-age children. The Commit-

tee's recommendation of a 100-percent hold harmless for 1998 grants will avoid further shifting of title I funds away from high poverty States while the Committee considers further steps to better target title I aid on States and local educational agencies in greatest need.

*Capital expenses for private school students*

The Committee recommends \$41,119,000 for the Capital Expenses Program, the same as the 1997 appropriation and the budget request.

The Supreme Court's 1985 *Aguilar v. Felton* decision prohibited districts from sending public schoolteachers or other employees to private sectarian schools for the purpose of providing title I services. The Capital Expenses Program has helped districts comply with *Felton* by paying a portion of the additional capital costs associated with serving religious school students outside school premises. Funds are used by districts for noninstructional goods and services such as renting classroom space in neutral sites, renting or purchasing mobile vans for title I instruction, or transporting private schoolchildren to the place of title I instruction.

On June 23, 1997, the Court reversed its earlier ruling, and districts may now provide title I instruction in private schools. However, many school districts will continue, over the short term, to incur costs as a result of the original 1985 decision. For example, some may have entered into multiyear leases for vans, portable classrooms, or other neutral instructional sites. The Committee, therefore, has recommended continuation of this program until an assessment has been made as to what the final costs are for *Felton* compliance.

Funds are allocated to States according to the proportion of non-public school students served under the title I LEA Grants Program in the most recent year for which satisfactory data are available.

*Even Start*

For the Even Start Program, the Committee recommends \$108,000,000, an increase of \$6,008,000 more than the fiscal year 1997 appropriation and the same as the budget request.

The Even Start Program provides grants for family literacy programs that serve disadvantaged families with children under 8 years of age and adults eligible for services under the Adult Education Act. Programs combine early childhood education, adult literacy, and parenting education.

States receive funds on the basis of their proportion of title I LEA grant allocations and make competitive 4-year grants to partnerships of local educational agencies and community-based organizations. Grant funds must be equitably distributed among urban and rural areas and the local share of program costs increases from 10 percent in the first year to 40 percent in the fourth year.

*Migrant*

For the State Agency Migrant Program, the Committee recommends \$305,473,000, the same amount appropriated in fiscal

year 1997. The administration requested \$319,500,000 for this program.

The title I migrant program authorizes grants to State educational agencies for programs to meet the special educational needs of the children of migrant agricultural workers and fishermen. Funds are allocated to the States through a statutory formula based on each State's average per-pupil expenditure for education and counts of migratory children aged 3 through 21 residing within the States. Only migratory children who have moved within the last 3 years are generally eligible to be counted and served by the program. Currently, this program serves approximately 610,000 migrant students.

This appropriation also supports activities to improve interstate and intrastate coordination of migrant education programs.

#### *Neglected and delinquent*

The Committee recommends \$40,333,000 for the title I Neglected and Delinquent Program, an increase of \$1,022,000 over the amount appropriated in 1997 and the same amount recommended by the administration.

This program provides financial assistance to State educational agencies for education services to neglected and delinquent children and youth in State-run institutions and for juveniles in adult correctional institutions.

Funds are allocated to individual States through a formula based on the number of children in State-operated institutions and per-pupil education expenditures for the State.

States are authorized to set aside up to 10 percent of their neglected and delinquent funds to help students in State-operated institutions to make the transition into locally operated programs. Transition activities are designed to address the high failure and dropout rate of institutionalized students and may include alternative classes, counseling and supervisory services, or educational activities in State-supported group homes.

#### *State school improvement grants*

The Committee recommends no funds for State school improvement grants. The administration requested \$8,000,000 for this purpose. No funds were appropriated in fiscal year 1997 for this program. Funds are used to help States stimulate school-based change and hold local educational agencies accountable for making significant progress in the education of disadvantaged children. Funds for this purpose can be sustained through administrative set-asides in the title I program and other State and local funding sources.

#### *Evaluation*

The Committee bill includes \$6,977,000 for title I evaluation activities, the same amount appropriated in fiscal year 1997. The amount recommended is a decrease of \$3,023,000 below the budget request.

Evaluation funds are used to support large-scale national surveys that examine how the title I program is contributing to student performance. The recommended amount will provide sufficient funds to design, implement, and produce multiyear evaluations

that will assess the effects of the changes made in the reauthorization of the title I program.

*High School Equivalency Program*

The Committee bill includes \$7,634,000 for the High School Equivalency Program [HEP]. This amount is \$193,000 above the amount appropriated in fiscal year 1997 and is the same amount requested by the administration.

This program provides 5-year grants to institutions of higher education and other nonprofit organizations to recruit migrant students aged 16 and over and provide the academic and support services needed to help them obtain a high school equivalency certificate and subsequently gain employment, win admission to a postsecondary institution or a job-training program, or join the military. Projects provide counseling, health services, stipends, and placement assistance. HEP will serve about 3,600 migrants in 1997.

*College Assistance Migrant Program*

For the College Assistance Migrant Program [CAMP], the Committee agrees with the House and the administration and recommends \$2,081,000. The amount recommended is \$53,000 above the fiscal year 1997 appropriation.

Funds provide 5-year grants to institutions of higher education and nonprofit organizations for projects that provide tutoring, counseling, and financial assistance to migrant students during their first year of postsecondary education. Projects also may use up to 10 percent of their grants for followup services after students have completed their first year of college, including assistance in obtaining student financial aid. CAMP will serve about 375 students in 1997.

IMPACT AID

Appropriations, 1997 .....	\$730,000,000
Budget estimate, 1998 .....	658,000,000
Committee recommendation .....	794,500,000

The Committee recommends an appropriation of \$794,500,000 for impact aid for the Department of Education. This amount is \$64,500,000 above the 1997 amount and \$136,500,000 above the administration request.

Impact aid provides financial assistance to school districts for the costs of educating children when enrollments and the availability of revenues from local sources have been adversely affected by the presence of Federal activities. Children who reside on Federal or Indian lands generally constitute a financial burden on local school systems because these lands do not generate property taxes—a major revenue source for elementary and secondary education in most communities. In addition, realignments of U.S. military forces at bases across the country often lead to influxes of children into school districts without producing the new revenues required to maintain an appropriate level of education. During the current school year, approximately 2,000 school districts will receive payments on behalf of 1.2 million eligible children.

The Committee has turned down the administration's language as follows: Language specifying that payments shall be made only for children living on Indian lands and children of members of the uniformed services living on Federal property; language overriding the eligibility requirements under section 8003; language specifying the maximum basic support payment for which an LEA is eligible; language overriding the learning opportunity threshold and language overriding the hold-harmless provision of the statute so that all payments would be distributed by formula.

It has come to the Committee's attention that two school districts in Texas and one in New Jersey which receive funding under this subsection have been adversely affected by definitions used by the Department of Education in determining the amount of revenue available for general fund expenditure. The result of this definition problem is that all three school districts will be required to pay back a portion of the funds they have received under this subsection or its predecessor section 3(d)(2)(B) of Public Law 81-874. These are three of the neediest school districts in the impact aid program and, if compelled to make repayment to the Department, would be placed under a tremendous hardship. The Committee requests that the Department review its actions with regard to supplemental payments made to the Killeen Independent School District, the Copperas Cove Independent School District (Texas), and the North Hanover Township public schools (New Jersey).

The Committee is aware of the financial problems that the Centennial School District in Warminster, PA, is experiencing due to the closure of the Warminster Naval Air Warfare Center. In addition, the school district is now responsible for educating children whose parents reside in naval housing, but are assigned to the Naval Air Station Joint Reserves in Willow Grove, located in a neighboring school district. The Committee requests that the Department review its actions with regard to payments made to the Centennial School District and take steps to ensure that the school district is given adequate payments to provide a quality education for all of the district's children, including the 300 children from the Willow Grove Naval Air Station.

It has been brought to the Committee's attention that the Portsmouth School District in Rhode Island has been unsuccessful in its recent application for impact aid payments due to a misinterpretation of changes in the law. The Committee urges the Department to work with the Portsmouth School District to rectify the problem.

*Basic support payments.*—The Committee recommends \$623,500,000 for basic support payments, the same amount appropriated in fiscal year 1996 and \$39,500,000 above the amount recommended by the administration. Under statutory formula, payments are made on behalf of all categories of federally connected children.

*Payments for children with disabilities.*—Under this program additional payments are made for certain federally connected children eligible for services under the Individuals with Disabilities Education Act. The Committee bill includes \$80,000,000 for this purpose, an increase of \$40,000,000 above the 1997 level. The Committee has included this increase due to the rising costs of providing educational services to special needs children.

*Payments for heavily impacted districts.*—These payments provide additional assistance to certain local educational agencies that enroll large numbers or proportions of federally connected children. The Committee recommends \$52,000,000, the same amount appropriated in fiscal year 1997 and an increase of \$32,000,000 over the amount requested by the administration.

*Facilities maintenance.*—This activity provides funding for maintaining certain school facilities owned by the Department of Education. The Committee recommends \$10,000,000 for this purpose in fiscal year 1998, the same as the budget request. No funds were provided for this purpose in fiscal year 1997.

*Construction.*—Payments are made to eligible LEA's to be used for construction and renovation of school facilities, or for debt service related to the construction of school facilities. The Committee recommends \$5,000,000 for this program, the same amount appropriated in fiscal year 1997, and an increase of \$1,000,000 over the budget request.

It has been brought to the Committee's attention that the Lodge Pole Elementary School on the Fort Belknap Reservation in north central Montana was closed due to serious health threats brought about by raw sewage, asbestos, diesel fuel contamination, and bacteria in the drinking water. Students have been temporarily relocated to the another school, creating a serious overcrowding situation. The Committee urges the Department to initiate discussions with the school district concerning the feasibility, construction and design of a facility to accommodate the educational needs of the Lodge Pole students.

*Payments for Federal property.*—These payments compensate local educational agencies in part for revenue lost due to the removal of Federal property from local tax rolls. Payments are made to LEA's that have a loss of tax base of at least 10 percent of assessed value due to the acquisition since 1938 of real property by the U.S. Government. The Committee recommends \$24,000,000 for this activity in 1998, an increase of \$6,500,000 over the fiscal year 1997 amount. No funds were requested by the administration for this activity.

SCHOOL IMPROVEMENT PROGRAMS

Appropriations, 1997 .....	\$1,425,618,000
Budget estimate, 1998 .....	1,299,222,000
Committee recommendation .....	1,482,293,000

The Committee recommends an appropriation of \$1,482,293,000 for school improvement programs. This amount is \$56,675,000 more than the 1997 appropriation and \$183,071,000 more than the administration's request.

*Eisenhower professional development State grants.*—The Committee recommends \$310,000,000 for Eisenhower professional development State grants, the same as the fiscal year 1997 appropriation and a decrease of \$50,000,000 from the amount requested by the administration. This program provides formula grants to States to support sustained and intensive high-quality professional development activities in the core academic subjects at the State and local levels.

*Innovative education program strategies State grants.*—The Committee recommends \$310,000,000 for innovative education program strategies State grants, the same as the fiscal year 1997 appropriation. The administration proposed to eliminate funding for this program. This program makes grants to State and local educational agencies for activities intended to help meet the national education goals and assist in their reform of elementary and secondary education. Funds are awarded to States by a formula based on school-aged population and then to local districts under a State-determined formula. State and local funds may be used for acquisition of instructional materials such as library books, curricular materials, and computer software and hardware; improving educational services to disadvantaged children and dropout prevention; combating illiteracy among children and adults; programs for gifted and talented children; and reform activities consistent with Goals 2000. Teacher training and other related activities in support of any of these purposes is also authorized.

*Safe and drug free schools and communities*

*State grant program.*—The Committee bill provides \$555,978,000 for the safe and drug free schools and communities State grant program. The amount recommended is the same as the fiscal year 1997 amount and \$64,022,000 less than the budget request.

*National programs.*—The Committee has included no funding for the national programs portion of the safe and drug free schools program, a decrease of \$30,000,000 below the amount requested by the administration. In fiscal year 1997, \$25,000,000 was provided for national programs through a reprogramming of funds. These funds are used to promote safety and discipline for students at all educational levels and to prevent violence and illegal use of drugs. The Committee would entertain a reprogramming of funds for this purpose.

*Inexpensive book distribution*

For the inexpensive book distribution program, the Committee provides \$12,000,000, an increase of \$1,735,000 over the 1997 appropriation and the same amount recommended by the administration. This program is operated by Reading Is Fundamental [RIF], a private nonprofit organization associated with the Smithsonian Institution. RIF supports over 4,500 projects at over 15,000 sites to distribute books to children from low-income families to help motivate them to read. In 1997, an estimated 7.2 million books will be distributed to 2.3 million children. This program has been successful in motivating children to read, increasing the use of libraries, increasing parental involvement in schools, and contributing to improved reading achievement.

*Arts in education*

For the arts in education program, the Committee recommends \$10,500,000, an increase of \$1,500,000 over the 1997 appropriation. The administration requested \$9,500,000 for this program. The amount recommended will support two awards: \$5,246,000 for a grant to very special arts [VSA], which supports the development of programs to integrate the arts into the lives of children and

adults with disabilities; and \$4,254,000 for a grant to the John F. Kennedy Center for the Performing Arts, which supports a variety of activities through its education department that promote the arts throughout the Nation. In addition, \$1,000,000 has been provided for very special arts to support the International Very Special Arts Festival to be held in Los Angeles, CA, in May 1999. This event will host over 3,000 artists with disabilities of all ages from around the globe. The festival will be held in conjunction with the Los Angeles Convention and Visitors Bureau and the Mayors Office of Cultural Affairs. The objectives of the festival are the creation of over 100 jobs in art-related fields for individuals with disabilities; the creation of lifelong learning programs through the arts; and the establishment of an international exposition focusing on technology applications particularly relevant to individuals with disabilities in the workplace.

*Magnet schools assistance*

For the magnet schools assistance program, the Committee bill provides \$95,000,000, the same amount recommended by the administration and the 1997 appropriation.

This program supports grants to local educational agencies to establish and operate magnet schools that are part of an approved desegregation plan and are designed to attract substantial numbers of students of different social, economic, ethnic, and racial backgrounds. Grantees may use funds for teacher salaries, purchase of computers, and other educational materials and equipment.

The Committee has also included language, carried in the fiscal years 1996 and 1997 bills, indicating that at least \$3,000,000 of the magnet school appropriation shall be used for continuation costs for innovative programs as described in section 5111 of title V of the Elementary and Secondary Education Act.

The Committee recognizes the positive impact the Magnet Schools Program has had on communities around the Nation. This program supports grants to local educational agencies to establish and operate magnet schools that are part of an approved desegregation plan and are designed to attract substantial numbers of students of different social, economic, ethnic, and racial backgrounds. The Seattle School District has a history of working hard to provide equal opportunities and access to a quality education to all children regardless of their social, economic, ethnic, and racial backgrounds. The Committee also recognizes that the Seattle School District will be submitting a grant application to the Department of Education for funding under the Magnet Schools Assistance Program and asks the Department to look favorably upon this request.

*Education for homeless children and youth*

For carrying out education activities authorized by part B, subtitle B of the Stewart B. McKinney Homeless Assistance Act, the Committee recommends \$28,800,000, an increase of \$3,800,000 over the fiscal year 1997 amount and \$1,800,000 over the budget request.

This program provides assistance to each State to support an office of the coordinator of education for homeless children and youth, to develop and implement State plans for educating home-

less children, and to carry out other activities to ensure that all homeless children and youth in the State have access to the same free, appropriate public education, including a public preschool education, as provided to other children and youth. Grants are made to States based on the total that each State receives under the title I program.

*Women's educational equity*

The Committee recommends \$4,000,000 for the women's educational equity program, an increase of \$2,000,000 over the fiscal year 1997 appropriation and the same as the amount requested by the administration. The program supports projects that assist in the local implementation of gender equity policies and practices.

*Training and advisory services*

For training and advisory services authorized by title IV of the Civil Rights Act, the Committee recommends \$7,334,000, the same as the fiscal year 1997 appropriation and \$7,000,000 below the administration's request.

The funds provided will continue the 10 regional desegregation assistance centers. Funds are used to provide technical assistance, training, and advisory services to school districts in addressing problems associated with desegregation on the basis of race, color, sex, or national origin. No funds are included for civil rights units in State education agencies.

*Ellender fellowships*

For Ellender fellowships, the Committee bill includes \$1,500,000, the same as the 1997 appropriation. The administration recommended no funding for this program. The Ellender fellowship program makes an award to the Close Up Foundation of Washington, DC, to provide fellowships to students from low-income families and their teachers to enable them to participate with other students and teachers for 1 week of seminars on Government and meetings with representatives of the three branches of the Federal Government.

*Education for native Hawaiians*

For programs for the education of native Hawaiians, the Committee bill includes \$20,000,000, which is \$5,000,000 above the 1997 appropriation and the administration request.

The Committee encourages the Department when allocating these funds to provide the following: \$2,500,000 for the curricula development, teacher training, and recruitment program; \$1,000,000 for the community-based education learning centers; \$4,200,000 for the Hawaiian higher education program, including \$500,000 for the support of native language revitalization curricula and the development of educational materials in native languages at the University of Hawaii at Hilo Native Languages College; \$2,100,000 for the gifted and talented program; \$2,100,000 for special education programs; \$500,000 for the Native Hawaiian education council and island councils; and \$7,100,000 for family-based education centers. The Committee notes the disproportionately high numbers of native Hawaiian students who have special edu-

cational needs, who fail to finish high school, who drop out, and who abuse drugs and alcohol. Continued funding must be provided to raise the educational status of native Hawaiians to the national average. The Committee urges the Department to provide \$500,000 for workshops in aquaculture/education for high school students and teachers at the Keahuolu training facilities on the Island of Hawaii.

*Native Hawaiians agriculture partnerships.*—The Committee is aware of the dismal economic and social conditions in the rural areas of Hawaii resulting from the closure of several sugarcane plantations that formerly provided economic and social infrastructure for these communities. The Committee favors the proposed expansion of the successful partnerships between community-based agricultural businesses and cooperating high schools where agricultural and business practices are integrated into the curriculum, resulting in products that are ultimately purchased by the cooperating business. The Hawaii Institute of Tropical Agriculture and Human Resources would be especially suited to assist in the expansion of this program.

*Prisoner education*

The native Hawaiians continue to represent the largest ethnic group in the State's prisons. Recent efforts to actively involve community elders with high-risk juveniles seem to have been notably successful. Accordingly, the Committee urges the Department to support a demonstration project to target this critical population.

*Waste management innovation.*—Preservation of the environment is an important underpinning of Hawaiian culture. However, little is known of historical practices used by the Hawaiian people to deal with waste and over exploitation. It is the Committee's desire that sufficient funds be made available to study and document traditional Hawaiian practices of sustainable waste management and to prepare teaching materials for educational purposes and for demonstration of the use of native Hawaiian plants and animals for waste treatment and environmental remediation. This money should be made available for a partnership between Partners in Development (a Hawaii nonprofit corporation) and an appropriate nonprofit organization with expertise in sustainable waste treatment methods.

*Aquaculture.*—The Committee is pleased with the aquaculture education program developed by the Oceanic Institute of Hawaii and recommends that sufficient funds be provided to continue funding for this program.

*Alaska Native educational equity*

The Committee recommends \$10,640,000 for the Alaska Native Educational Equity Assistance Program, authorized under title IX, part C, of the Elementary and Secondary Education Act. This amount is \$2,640,000 over the 1997 appropriation and the budget request. These funds address the severe educational handicaps of Alaska Native schoolchildren. Funds are used for development of supplemental educational programs to benefit Alaska Natives. Of the amount provided, the Committee has included \$6,500,000 for Native educational planning, \$2,500,000 for Native home-based

education for pre-school children and \$1,640,000 for student enrichment.

It has been brought to the Committee's attention that in urban areas 60 percent of Alaska Natives entering high school do not graduate, and the Alaska Natives test scores are on average 40 percent lower than those of other students. In some districts, none of the Alaska Native elementary students and 40 percent of Native high school students are performing at their grade levels. The funds provided under the Alaska Native Educational Equity Assistance Program will help to address some of the barriers faced by Native Alaskan children and develop programs tailored to the unique needs of these children to improve performance levels.

#### *Charter schools*

The Committee recommends \$50,987,000 for support of charter schools, which is the same as the 1997 appropriation and \$49,103,000 below the budget request.

This program, authorized under title X, part C of the Elementary and Secondary Act of 1965, as amended, provides funds to the Secretary to make awards to State educational agencies, which, in turn, make subgrants to partnerships of developers and local education agencies or other public entities that can authorize or approve a charter school. Grants are limited to 3 years in duration, of which not more than 18 months may be used for planning and program design, and not more than 2 years for the initial implementation of a charter school.

Unlike traditional public schools, charter schools operate under charters or contracts with school districts, State education agencies, or other public institutions. They are designed by groups of parents, teachers, school administrators, other members of the community, and private corporations and are held accountable for student performance under the terms of their contracts. Also, charter schools can operate with considerable autonomy from external controls such as district, State, and union requirements.

#### *Technical assistance for improving ESEA programs*

The Committee recommends \$25,554,000 for the comprehensive regional technical assistance centers. This recommendation is the same as the fiscal year 1997 level. The administration recommended \$34,388,000 for this program. This program supports 15 regional centers that provide support, training, and technical assistance to Department of Education grantees. Of the amount recommended, \$750,000 is for an evaluation to collect performance indicator data that would improve the delivery of technical assistance centers.

#### *Education infrastructure*

The Committee recommends \$40,000,000 for this new program authorized by title XII of the Elementary and Secondary Education Act, that would provide Federal grant funding for the repair, renovation, alteration, and construction of public elementary and secondary school libraries, media centers, and facilities used for academic or vocational instruction.

Infrastructure grants would be made to urban and rural school districts that serve large numbers or percentages of disadvantaged students and that have urgent infrastructure needs. The statute requires the Secretary to give priority to applicants lacking the fiscal resources to undertake the project without Federal support and to projects needed to address conditions that compromise learning, health, or safety.

Grants may be used for the inspection, repair, and upgrade of academic and library facilities; to meet the requirements of section 504 of the Rehabilitation Act of 1973 and the Americans With Disabilities Act of 1990; to remove or contain severely hazardous materials such as asbestos, lead and radon; and to comply with Federal, State, or local building codes.

#### INDIAN EDUCATION

Appropriations, 1997 .....	\$60,993,000
Budget estimate, 1998 .....	62,600,000
Committee recommendation .....	62,600,000

The Committee recommends \$62,600,000 for Indian education programs, an increase of \$1,607,000 above the fiscal year 1997 appropriation and the same as the budget request.

For grants to local education agencies, the Committee recommends \$59,750,000, an increase of \$1,700,000 above the 1997 appropriation and the same as the budget request. These funds provide financial support to reform elementary and secondary school programs that serve Indian students, including pre-school children. Funds are awarded on a formula basis to local educational agencies, the Bureau of Indian Affairs [BIA]-supported schools and BIA operated schools.

The Committee recommends \$2,850,000 for Federal administration, a decrease of \$93,000 below the fiscal year 1997 appropriation and the same as the budget request. These funds pay the salaries and expenses of the Office of Indian Education and the National Advisory Council on Indian Education and support the White House Initiative on Tribal Colleges and Universities.

#### BILINGUAL AND IMMIGRANT EDUCATION

Appropriations, 1997 .....	\$261,700,000
Budget estimate, 1998 .....	354,000,000
Committee recommendation .....	354,000,000

The Committee recommends an appropriation of \$354,000,000 for bilingual and immigrant education. This is \$92,300,000 more than the 1997 appropriation and the same as the administration's request.

The bilingual programs authorized by title VII of ESEA are designed to increase the capacity of States and school districts to provide special instruction to limited-English proficient students.

#### *Instructional services*

The Committee bill includes \$160,000,000 for bilingual instructional programs, an increase of \$18,300,000 above the 1997 level and the same as the President's request.

This activity provides competitive grants, primarily to school districts, to improve the quality of instructional programs for limited-English proficient students. Schools are permitted to select the instructional approach best suited to their students, except that no more than 25 percent of program funds may be used to support instruction that does not make use of the students' native language. Funds may also be used to provide services for preschool children and parents to assist in the education of their children.

#### *Support services*

The Committee has included \$14,000,000 for support services, an increase of \$4,000,000 above the fiscal year 1997 appropriation and the same as the administration's request. This program provides discretionary grants and contracts in four specific areas: research and evaluation; dissemination of effective instructional models; data collection and technical assistance; and a national clearinghouse to support the collection, analysis, and dissemination of information about programs for limited-English proficient students. The Committee strongly encourages school districts to use their overall funding for bilingual education for support services activities. The need for support services increases every year. School personnel, parents, and other organizations rely on these services to understand the needs of students, plan effective instructional services, meet State and Federal legal requirements, and train staff to work with limited-English proficient students.

#### *Professional development*

The Committee recommends \$25,000,000 for professional development, the same as the budget request and \$20,000,000 over the fiscal year 1997 appropriation.

These funds support the training and retraining of bilingual education teachers and teacher aides, graduate fellowships related to fields of bilingual education, and grants to institutions of higher education to improve bilingual teacher training programs.

#### *Immigrant education*

The Committee recommends \$150,000,000 for immigrant education, the same as the administration request and \$50,000,000 over the fiscal year 1997 appropriation.

The Immigrant Education Program provides financial support to offset the additional costs of educating recently arrived immigrant students who often lack proficiency in English and need special services to make the transition to the American education system. Federal dollars flow through State educational agencies to school districts enrolling a minimum of 500 eligible immigrant students or where eligible immigrant children represent at least 3 percent of the enrollment. The Committee agrees with the administration and has included bill language to permit States to allocate all or any part of the funds to LEA's on a discretionary basis.

#### *Foreign language assistance*

The Committee recommends \$5,000,000 for competitive foreign language assistance grants, the same amount appropriated in fiscal year 1997 and requested by the administration.

This activity provides grants to increase the quantity and quality of instruction in foreign languages deemed critical to the economic and security interests of the United States.

#### SPECIAL EDUCATION

Appropriations, 1997 .....	\$4,035,979,000
Budget estimate, 1998 .....	4,210,000,000
Committee recommendation .....	4,958,073,000

The Committee recommends an appropriation of \$4,958,073,000 for special education. This is \$922,094,000 more than the 1997 appropriation and \$748,073,000 above the administration request.

These programs, which are authorized by the Individuals with Disabilities Education Act [IDEA], provide assistance to ensure that all children with disabilities have access to a free, appropriate public education, and that all infants and toddlers with disabilities have access to early intervention services. This assistance is provided through State grants that offset a portion of the costs incurred by States and local educational agencies in educating children with disabilities and in developing and implementing state-wide systems of early intervention services, and through six new programs that will provide a streamlined structure to help States improve educational and early intervention results for children with disabilities.

#### *Grants to States*

The Committee bill provides \$3,941,837,000 for special education grants to States, an increase of \$834,315,000 more than the fiscal year 1997 appropriation and \$701,087,000 above the budget request. This program supports formula grants to States to finance a portion of the cost of providing special education and related services for children with disabilities.

The Committee's recommended funding level represents approximately 11 percent of the estimated average per-pupil expenditure and 10 percent of excess costs, and would provide an estimated \$622 per child for the 5.5 million children expected to receive special education.

Also included in the recommendation is \$8,000,000 for the national assessment carried out under the IDEA and related studies.

#### *Preschool grants*

The Committee recommends \$378,985,000 for preschool grants, an increase of \$18,576,000 over the fiscal year 1997 appropriation and \$4,160,000 over the budget request. The preschool grant program provides formula grants to States based on the amount of funding received in fiscal year 1997, the number of preschool children, aged 3 through 5 years, and the number of preschool children living in poverty.

The amount provided by the Committee is approximately \$655 per child for the 578,600 preschoolers expected to receive special education and related services in the next school year.

States may retain an amount equal to 25 percent of their 1997 allocation, adjusted for inflation, of which 20 percent may be used for administration. These funds may be used for direct and support services for 3- through 5-year-olds; and, at a State's discretion, to

serve 2-year-olds with disabilities who will turn age 3 during the school year; and for other purposes. The remaining funds must be distributed to local educational agencies.

*Grants for infants and families*

The Committee bill provides \$350,790,000 for the part C grants for infants and families program, an increase of \$35,036,000 above the fiscal year 1997 appropriation and \$26,826,000 over the budget request. This program provides formula grants to States to implement statewide systems of coordinated, comprehensive, multidisciplinary interagency programs to make available early intervention services to all children with disabilities, ages birth through 2, and their families.

*State improvement*

For State improvement, the bill provides \$35,200,000, the same as the budget request. This new program supports competitive grants to State educational agencies to assist them, in partnership with parents, teachers, institutions of higher education, interest groups, and others, to improve results for children with disabilities by reforming and improving their educational systems. The funds provided include continuation costs for severe disabilities and secondary and transitional service programs, which have now expired.

*Research and innovation*

The Committee has included \$64,508,000 for research and innovation. This new program supports competitive awards to produce and advance the use of knowledge to improve services and results for children with disabilities.

The Committee is concerned about high levels of unmet need among children with disabilities in rural areas, particularly, the Mississippi River delta, and the lack of adequate support in these areas for parents, schools, child care, and health providers to make effective use of local resources. The Committee urges the Department of Education to provide \$1,800,000 for the purpose of initiating a 3-year, multistate demonstration project in the delta region to provide early intervention and early childhood services to children with disabilities ages birth through 12 years, to assist parents, and to build local capacity to provide and coordinate such services through use of mobile, multidisciplinary teams of professionals (including physical and occupational therapists, speech language therapists, and social workers). These teams should receive initial and periodic centralized training, and nationally coordinated program evaluation and information dissemination support. The Committee believes that this project is of national significance as a rural model for multiagency collaboration and should be implemented by a national nonprofit disability organization with demonstrated expertise in serving rural children with physical and mental disabilities and their families and with existing capacity in the delta region.

The Committee is aware of the valuable service which the National Information Center for Children and Youth with Disabilities has been providing to parents, educators, and health care professionals in disseminating information concerning the options and

services available to treat youth with disabilities. The Committee encourages the Department, as it moves forward to restructure and refine various disability programs, to include information, resources, and knowledgeable guidance regarding funding and delivery systems. The Department should also keep in mind that the families and organizations most directly affected by disabilities are not deprived of the critical information they need to address these concerns.

*Technical assistance and dissemination*

The Committee bill provides \$44,556,000. This new program provides technical assistance and information through competitive awards that support institutes, regional resource centers, clearinghouses, and efforts to build State and local capacity to make systemic changes and improve results for children with disabilities.

Included in the amount provided is \$10,000,000 to support the first year of a 5-year effort to provide training and disseminate information to State and local administrators, teachers, related services personnel, parents of children with disabilities, and other appropriate parties on the implementation of the Individuals with Disabilities Education Act Amendments of 1997. The purpose of this effort is to ensure a common understanding of what needs to be done under the act to improve educational services to and results for children with disabilities. The Committee urges the Department to use peer training and to encourage collaborative efforts among organizations representing different target audiences such as parents and school officials.

*Personnel preparation*

The Committee recommends \$82,139,000 for the new personnel preparation program. Funds support competitive awards to help address State-identified needs for qualified personnel to work with children with disabilities, and to ensure that those personnel have the skills and knowledge they need to serve those children.

The appropriation includes funds to provide personnel preparation grants to high incidence disabilities including grants for graduate support to ensure a proper balance among all authorized grant categories.

*Parent information centers*

The Committee bill provides \$18,535,000 for parent information centers, an increase of \$3,000,000 above the budget request. This new program makes awards to parent organizations to support parent training and information centers, including community parent resource centers. These centers provide training and information to meet the needs of parents of children with disabilities living in the areas served by the centers, particularly underserved parents, and parents of children who may be inappropriately identified.

*Technology and media services*

The Committee recommends \$32,023,000 for technology and media services, an increase of \$2,000,000 over the budget request. This program makes competitive awards to support the development, demonstration, and use of technology, and educational media

activities of educational value to children with disabilities. Included in this amount is \$6,000,000 for recording for the blind and dyslexic which will help to meet the growing need for services to blind, severely dyslexic, and physically disabled students.

The Committee is concerned that hundreds of hours of non-commercial educational instructional programming have been and are being produced for classroom use, but that this programming is not fully accessible through closed captions. The Committee therefore urges the Department to make funds available in the amount of \$750,000 for the captioning of noncommercial educational instructional material.

Also included in the amount provided is \$500,000 for a project to develop, refine, and disseminate information on adaptive technologies. The project would include activities such as conducting research, developing state-of-the-art personnel preparation programs, and developing a pilot project using technology to link parents and their children with disabilities, public school districts, community service providers with the project. The Committee believes that the University of Northern Iowa would be well suited to administer such a project because of its long history of exemplary work in both personnel development and research.

*Readline*

The Committee recommends \$1,500,000 for the Readline Program, authorized by section 687 (b)(2)(G) of the Individuals With Disabilities Education Act, as amended, that would disseminate research conducted by the National Institutes of Health, as well as other research concerning effective teaching strategies, early diagnosis of, and intervention for, young children with reading disabilities. The Greater Washington Educational Telecommunications Association is well-suited to provide information to parents and teachers of young children through the publicly funded telecommunications systems and would be especially qualified to receive such a grant.

REHABILITATION SERVICES AND DISABILITY RESEARCH

Appropriations, 1997 .....	\$2,509,428,000
Budget estimate, 1998 .....	2,583,376,000
Committee recommendation .....	2,591,286,000

The Committee recommends \$2,591,286,000 for rehabilitation services and disability research, \$81,858,000 more than the 1997 appropriation and \$7,910,000 more than the administration request.

*Vocational rehabilitation State grants*

The Committee provides \$2,246,888,000 for vocational rehabilitation grants to States, which is \$70,850,000 more than the fiscal year 1997 appropriation and the same as the budget request.

Basic State grant funds assist States in providing a range of services to help persons with physical and mental disabilities prepare for and engage in meaningful employment. Authorizing legislation requires States to give priority to persons with the most severe disabilities. Funds are allotted to States based on a formula that takes into account population and per capita income, and

States must provide a 21.3-percent match of Federal funds, except the States share is 50 percent for the cost of construction of a facility for community rehabilitation program purposes. Each State is also required to use 1.5 percent of its allotment for innovation and expansion activities.

The Rehabilitation Act requires that no less than 0.5 percent and not more than 1.5 percent of the appropriation in fiscal year 1998 for vocational rehabilitation State grants be set aside for grants for Indians. Service grants are awarded to Indian tribes on a competitive basis to help tribes develop the capacity to provide vocational rehabilitation services to American Indians with disabilities living on reservations.

#### *Client assistance*

The Committee bill recommends \$10,714,000 for the Client Assistance Program, an increase of \$322,000 more than the fiscal year 1997 appropriation and the same amount recommended by the administration request.

The Client Assistance Program funds State formula grants to assist vocational rehabilitation clients or client applicants in understanding benefits available to them and in their relationships with service providers. Funds are distributed to States according to a population-based formula, except each State is guaranteed a minimum grant of \$100,000 if the appropriation exceeds \$7,500,000. States must operate client assistance programs in order to receive vocational rehabilitation State grant funds.

#### *Training*

The Committee provides \$39,629,000 for training rehabilitation personnel, the same as the 1997 appropriation and the administration request.

The purpose of this program is to ensure that skilled personnel are available to serve the rehabilitation needs of individuals with disabilities. It supports training, traineeships, and related activities designed to increase the numbers of qualified personnel providing rehabilitation services. The program awards grants and contracts to States and public or nonprofit agencies and organizations, including institutions of higher education, to pay all or part of the cost of conducting training programs. Long-term, in-service, short-term, experimental, and innovative and continuing education programs are funded, as well as special training programs and programs to train interpreters for persons who are deaf and deaf-blind.

#### *Special demonstration programs*

The Committee bill includes \$20,836,000 for special demonstration programs for persons with disabilities, an increase of \$1,894,000 above the fiscal year 1997 appropriation and \$3,894,000 more than the administration request.

This program awards grants to States and nonprofit agencies and organizations to develop innovative methods and comprehensive services to help individuals with disabilities achieve satisfactory vocational outcomes. Special demonstration programs support projects for individuals with a wide array of disabilities.

*Migratory workers*

The Committee recommends \$2,350,000 for migratory workers, an increase of \$500,000 above the 1997 appropriation and the same level as the budget request.

This program provides a 90-percent Federal match for comprehensive rehabilitation services to migrant and seasonal farm workers with disabilities and their families. Projects also develop innovative methods for reaching and serving this population. The program emphasizes outreach, specialized bilingual rehabilitation counseling, and coordination of vocational rehabilitation services with services from other sources.

*Recreational programs*

The Committee provides \$2,596,000 for recreational programs, the same as the 1997 appropriation and the administration request.

Recreational programs help finance activities such as sports, music, dancing, handicrafts, and art to aid in the employment mobility, and socialization of individuals with disabilities. Grants are awarded to States, public agencies, and nonprofit private organizations, including institutions of higher education. Grants are awarded for a 3-year period with the Federal share at 100 percent for the first year, 75 percent for the second year, and 50 percent for the third year. Programs must maintain the same level of services over the 3-year period.

*Protection and advocacy of individual rights*

The Committee recommends \$7,894,000 for protection and advocacy of individual rights, an increase of \$237,000 more than the 1997 appropriation and the same as the budget request.

This program provides grants to agencies to protect and advocate for the legal and human rights of persons with disabilities.

*Projects with industry*

The Committee bill includes \$22,071,000 for projects with industry, the same as the 1997 appropriation and the administration request.

The Projects With Industry [PWI] Program is the primary Federal vehicle for promoting greater participation of business and industry in the rehabilitation process. PWI provides training and experience in realistic work settings to prepare individuals with disabilities for employment in the competitive job market. Postemployment support services are also provided. The program makes grants to a variety of agencies and organizations, including corporations, community rehabilitation programs, labor and trade associations, and foundations.

*Supported employment State grants*

The Committee bill includes \$38,152,000 for the Supported Employment State Grant Program, the same as the 1997 appropriation and the budget request.

This program assists persons who may have been considered too severely disabled to benefit from vocational rehabilitation services by providing the ongoing support needed to obtain competitive em-

ployment. Short-term vocational rehabilitation services are augmented with extended services provided by State and local organizations. Federal funds are distributed on the basis of population. In 1997 an estimated 39,000 individuals will receive services and it is estimated that approximately 11,000 will achieve an employment outcome.

#### *Independent living State grants*

The Committee recommends \$21,859,000 for independent living State grants, which is the same as the amount appropriated in 1997 and the budget request.

The independent living State formula grants program provides funding to improve independent living services, support the operation of centers for independent living, conduct studies and analysis, and provide training and outreach.

#### *Independent living centers*

For independent living centers, the Committee bill includes \$46,205,000, which is \$2,000,000 above the budget request and \$3,329,000 over the 1997 appropriation.

These funds support consumer-controlled, cross-disability, non-residential, community-based centers that are designed and operated within local communities by individuals with disabilities. These centers provide an array of independent living services.

#### *Independent living services for older blind individuals*

The Committee provides \$11,947,000 for independent living services to older blind individuals, an increase of \$1,995,000 above the 1997 appropriation and the administration request.

This program provides discretionary grants on a competitive basis to State vocational rehabilitation agencies to assist persons aged 55 or older to adjust to their blindness by increasing their ability to care for their individual needs. Services may include the provision of eyeglasses or other visual aids, mobility training, braille instruction, guide services, reader services, and transportation.

#### *Program improvement*

For program improvement activities, the Committee provides \$3,900,000, the same as the budget request and \$1,509,000 more than the 1997 appropriation. In fiscal year 1998, funds for these activities will continue to support technical assistance efforts to improve the efficiency and effectiveness of the vocational rehabilitation program and improve accountability efforts and performance measures. The increase will support demonstration projects designed to increase the capacity of employment and employment training programs to serve individuals with disabilities who are not currently being served by State vocational rehabilitation agencies.

#### *Evaluation*

The Committee recommends \$1,587,000 for evaluation activities, the same as the 1997 appropriation and the administration request.

These funds support evaluations of the impact and effectiveness of programs authorized by the Rehabilitation Act. The Department awards competitive contracts for studies to be conducted by persons not directly involved with the administration of Rehabilitation Act programs.

*Helen Keller National Center*

The Committee bill includes \$7,549,000 for the Helen Keller National Center for Deaf-Blind Youth and Adults, an increase of \$212,000 over the 1997 appropriation and \$21,000 over the budget request.

The Helen Keller National Center consists of a national headquarters in Sands Point, NY, with a residential training and rehabilitation facility where deaf-blind persons receive intensive specialized services; a network of 10 regional field offices which provide referral and counseling assistance to deaf-blind persons; and an affiliate network of 45 agencies. At the recommended level, the center would serve approximately 90 persons with deaf-blindness at its headquarters facility and provide field services to approximately 2,125 persons.

*National Institute on Disability and Rehabilitation Research*

The Committee recommends \$71,000,000 for the National Institute on Disability and Rehabilitation Research [NIDRR], an increase of \$1,010,000 over the amount appropriated in 1997 and the same as the budget request.

NIDRR develops and implements a comprehensive and coordinated approach to the conduct of research, demonstration projects, and related activities enabling persons with disabilities to better function at work and in the community, including the training of persons who provide rehabilitation services or who conduct rehabilitation research. The Institute awards competitive grants to support research in federally designated priority areas, including rehabilitation research and training centers, rehabilitation engineering research centers, research and demonstration projects, and dissemination and utilization projects. NIDRR also supports field-initiated research projects, research training, and fellowships.

It has been brought to the Committee's attention that traumatic brain injury with moderate to severe characteristics affects about 2 million people with lifetime costs estimated at \$37,000,000 per case. It is the No. 1 cause of death and disability among children and young people. The Committee has included \$2,500,000 for traumatic brain injury, an increase of \$700,000 over the fiscal year 1997 amount to provide models of comprehensive services for traumatic brain injury. The increase provided will expand the number model system to permit more regions of the country to be served by a program. The increase is consistent with the goals of the Traumatic Brain Injury Act of 1996.

It has been brought to the Committee's attention that a possible breakthrough in voice recognition technology has the potential to be of tremendous assistance to millions of Americans living with the effects of stroke, cerebral palsy, multiple sclerosis, or other diseases that severely impair speech. A new voice recognition system based upon frequency analysis research that recognizes each voice

command as a unique sound has proven to correctly interpret even the softest of sounds which greatly enhances the applications for elderly and those finding vocal projection difficult. The Committee, therefore, requests the Department to provide funds to field test this new voice recognition technology.

The Committee urges the Department to provide \$850,000 to establish a rehabilitation engineering research center. This center could operate in cooperation with an institution of higher education that is a national leader in rehabilitation medicine and engineering research, training, and services to focus on the unique rehabilitation needs of landmine survivors, including the development of inexpensive replacement limbs, the development and dissemination of educational materials on prosthetics, and other appropriate prosthetic, orthotic, or assistive technology devices, and the training of health care providers in effective methods of assistance to this population. The Committee urges the Department to submit a detailed plan for the use of these funds and create a timetable to begin and implement such a program no more than 120 days following enactment of this bill. The Department's efforts should be coordinated with the Department to Defense.

The Committee believes that techniques such as state-of-the-art electronic technology can be used to develop new assisted living programs in neighborhood settings. Computers and other electronic features could provide the disabled consumer with the maximum amount of individual freedom, safety, and productive work stations for private sector employment. The Committee urges the Department to provide \$1,000,000 to support new assisted living programs that develop and demonstrate state-of-the-art electronic technology. The Good Shepherd Rehabilitation Hospital in Lehigh County, PA, would be especially suited to conduct a model demonstration in this area.

*Technology assistance*

The Committee bill provides \$36,109,000 for technology assistance, the same as the budget request and fiscal year 1997 appropriation and the same as the House allowance.

The Technology Assistance Program is designed to improve occupational and educational opportunities and the quality of life for people of all ages with disabilities through increased access to assistive technology services and devices. It provides grants to States to develop comprehensive, consumer responsive statewide programs that increase access to, and the availability of, assistive technology devices and services. The National Institute on Disability and Rehabilitation Research administers the program.

SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

AMERICAN PRINTING HOUSE FOR THE BLIND

Appropriations, 1997 .....	\$6,680,000
Budget estimate, 1998 .....	6,680,000
Committee recommendation .....	7,906,000

The Committee recommends \$7,906,000 for the American Printing House for the Blind [APH], an increase of \$1,226,000 above the budget request and the 1997 appropriation.

This appropriation helps support the American Printing House for the Blind, which provides educational materials to students who are legally blind and enrolled in programs below the college level. The Federal subsidy provides about 40 percent of APH's total sales income. Materials are distributed free of charge to schools and States through per capita allotments based on the total number of students who are blind. Materials provided include textbooks and other educational aids in braille, large type, and recorded form and microcomputer applications.

#### NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

Appropriations, 1997 .....	\$43,041,000
Budget estimate, 1998 .....	43,041,000
Committee recommendation .....	44,141,000

The Committee recommends an appropriation of \$44,141,000 for the National Technical Institute for the Deaf [NTID], an increase of \$1,100,000 over the budget request and 1997 appropriation.

The Institute, located on the campus of the Rochester Institute of Technology, was created by Congress in 1965 to provide a residential facility for postsecondary technical training and education for persons who are deaf. NTID also provides support services for students who are deaf, trains professionals in the field of deafness, and conducts applied research.

#### GALLAUDET UNIVERSITY

Appropriations, 1997 .....	\$79,182,000
Budget estimate, 1998 .....	79,182,000
Committee recommendation .....	81,000,000

The Committee recommends \$81,000,000 for Gallaudet University, an increase of \$1,818,000 above the amount appropriated in 1997 and the administration request.

Gallaudet University is a private, nonprofit institution offering college preparatory, undergraduate, and continuing education programs for students who are deaf, as well as graduate programs in fields related to deafness for students who are hearing-impaired. The university conducts basic and applied research related to hearing impairments and provides public service programs for the deaf community.

The Model Secondary School for the Deaf serves as a laboratory for educational experimentation and development, disseminates models of instruction for students who are deaf, and prepares adolescents who are deaf for postsecondary academic or vocational education. The Kendall Demonstration Elementary School develops and provides instruction for children from infancy through age 15.

#### VOCATIONAL AND ADULT EDUCATION

Appropriations, 1997 .....	\$1,486,517,000
Budget estimate, 1998 .....	1,565,966,000
Committee recommendation .....	1,486,698,000

The Committee recommendation includes a total of \$1,486,698,000 for vocational and adult education, consisting of \$1,132,147,000 for vocational education, and \$354,551,000 for adult education.

## VOCATIONAL EDUCATION

The Committee recommendation of \$1,132,147,000 for vocational education is \$39,819,000 less than the administration's request and \$181,000 more than the fiscal year 1997 amount.

*Basic grants.*—The Committee has included \$1,015,550,000 for basic grants, the same as the 1997 appropriation and \$28,000,000 less than the administration request.

Funds provided under the State grant program assist States, localities, and outlying areas, in expanding and improving their programs of vocational education and providing equal access to vocational education for populations with special needs. Persons assisted range from secondary students in prevocational courses through adults who need retraining to adapt to changing technological and labor market conditions. Funds are distributed according to a formula based on State population and State per capita income.

Under the Indian and Hawaiian natives programs, competitive grants are awarded to federally recognized Indian tribes or tribal organizations and to organizations primarily serving and representing Hawaiian natives for services that are in addition to services such groups are eligible to receive under other provisions of the Perkins Act.

*Tech-prep education.*—The Committee recommends \$100,000,000 for tech-prep programs. This is the same as the 1997 appropriation and \$5,000,000 less than the administration request. This program is designed to link academic and vocational learning and to provide a structured link between secondary schools and postsecondary education institutions. Funds are distributed to the States through the same formula as the basic State grant program. States then make planning and demonstration grants to consortia of local educational agencies and postsecondary institutions to develop and operate model 4-year programs that begin in high school and provide students with the mathematical, science, communication, and technological skills needed to earn a 2-year associate degree or 2-year certificate in a given occupational field.

*Tribally controlled postsecondary vocational institutions.*—The Committee has provided \$3,100,000 on a current-funded basis for tribally controlled postsecondary vocational institutions. This is an increase of \$181,000 over the fiscal year 1997 appropriation and the administration request. This program provides grants for the operation and improvement of tribally controlled postsecondary vocational institutions to ensure continued and expanded educational opportunities for Indian students. Grantee institutions may use the funds for costs connected with training teachers, providing instructional services, purchasing equipment, administration, and operating and maintaining the institution.

The Committee is concerned that, when awarding grants, the Department has not adhered to the statutory requirements concerning equitable distribution of funding and equal educational opportunity for all Indian students served. The Committee urges the Department to follow all statutory requirements under section 388 of the act, including the provision that the "per capita payment for any fiscal year shall be determined by dividing the amount available for

grants to tribally controlled postsecondary vocational institutions under this part for such program year by the sum of the Indian student counts for such institution for such program year.”

The Committee requests the Department to submit to the Committee no later than September 1, 1997, the per capita enrollment data it uses to calculate grants made under this program.

The Committee commends the Department for its intention to establish an office on tribal colleges and universities and has provided sufficient funds for this purpose within the program administration budget.

*National programs, research.*—The Committee recommends \$13,497,000 for national research programs, the same as the 1997 appropriation and \$7,000,000 less than the administration request.

The National Center for Research in Vocational Education is the only federally funded center charged with the responsibility to conduct research and provide technical assistance to vocational educators. The results of the applied research done by the Center are converted into technical assistance to reform and improve vocational education instruction in our schools and colleges. The Committee believes that the work of the Center is critically important to provide state-of-the-art job-related instruction that, in turn, will strengthen our Nation’s economy.

Within the funds provided, the Committee urges the Department to use \$1,500,000 for a demonstration program to design and implement a comprehensive project to develop work force skills for the Nation’s rapidly expanding audio-visual communications industry. The program should identify appropriate work force career paths, skills for the audio-visual industry; determine appropriate opportunities for applied educational experiences; and establish new vocational and academic programs at community colleges to help strengthen the level of industry certification. The Educational Communications Foundation, in partnership with seven nationwide community colleges, would be especially suited to carry out a demonstration such as the one described above.

#### ADULT EDUCATION

The Committee has included \$354,551,000 for adult education, \$39,449,000 less than the administration request and the same as the 1997 appropriation.

*Adult education State programs.*—For adult education State programs, the Committee recommends \$340,339,000, which is \$41,661,000 less than the administration request and the same as the 1997 appropriation. These funds are used by States for programs to enable economically disadvantaged adults to acquire basic literacy skills, to enable those who so desire to complete a secondary education, and to make available to adults the means to become more employable, productive, and responsible citizens.

*National programs, evaluation, and technical assistance.*—The Committee has included \$4,998,000, the same as the 1997 appropriation and a decrease of \$1,002,000 below the administration request.

*National Institute for Literacy.*—The Committee recommends \$4,491,000 for the National Institute for Literacy, authorized under section 384(c) of the Adult Education Act, the same amount appro-

priated in 1997 for this purpose and \$1,509,000 less than the budget request. The Institute provides leadership and coordination for the national literacy effort by conducting research and demonstrations on literacy, providing technical assistance through a State capacity building grant program, establishing and maintaining a national center for adult literacy and learning disabilities, and awarding fellowships to outstanding individuals in the field to conduct research activities under the auspices of the Institute.

*Literacy programs for prisoners.*—The Committee provides \$4,723,000 for literacy programs for prisoners, the same as the 1997 appropriation. The administration recommended no funds for this purpose. This program provides funds to State and local correctional agencies to establish programs that, to the extent possible, use advanced technologies to assist persons incarcerated in prison, jail, or detention centers to achieve functional literacy and life skills. The Committee urges the Department to consult with correctional personnel to ensure that activities carried out under this authority address the most urgent needs of incarcerated individuals.

STUDENT FINANCIAL ASSISTANCE

Appropriations, 1997 .....	\$7,560,407,000
Budget estimate, 1998 .....	9,263,407,000
Committee recommendation .....	8,557,741,000

The Committee recommends an appropriation of \$8,557,741,000 for student financial assistance, an increase of \$997,334,000 over the fiscal year 1997 appropriation and \$705,666,000 below the administration request.

*Federal Pell Grant Program*

For Pell grant awards in the 1998–99 academic year, the Committee recommends \$6,910,334,000.

Pell grants provide need-based financial assistance that helps low- and middle-income students and their families pay the costs of postsecondary education and vocational training. Awards are determined according to a national need analysis formula that takes into account a student’s family income and assets, household size, and the number of family members attending postsecondary institutions. Pell grants are considered the foundation of the Federal postsecondary student aid system and students must apply for a Pell grant before receiving a Federal family education loan.

This funding amount, when coupled with carryover funding is sufficient to raise the maximum Pell grant to \$3,000 the highest level in the program’s history and an increase of \$300 over the maximum grant for 1997.

*Federal supplemental educational opportunity grants*

The Committee recommends \$634,407,000 for Federal supplemental educational opportunity grants [SEOG], an increase of \$51,000,000 above the 1997 appropriation level and the budget request.

This program provides funds to postsecondary institutions for need-based grants to undergraduate students. Institutions must contribute 25 percent of SEOG awards, which are subject to a max-

imum grant level of \$4,000. School financial aid officers have flexibility to determine student awards, though they must give priority to Pell grant recipients.

#### *Federal work-study programs*

The Committee bill provides \$830,000,000 for the Federal Work-Study Program, the same as the 1997 level, which is \$27,000,000 less than the administration request. This program provides grants to approximately 3,700 institutions to help more than 945,000 undergraduate, graduate, and professional students meet the costs of postsecondary education through part-time employment. Work-study jobs must pay at least the Federal minimum wage and institutions must provide 25 percent of student earnings. Institutions also must use at least 5 percent of their grants for community-service jobs.

The Committee supports continuing funding for the work colleges authorized in section 448 of the Higher Education Act. The Department should continue to provide funding for work-service-learning at the six eligible institutions as a percentage of the overall Federal work study appropriation. The Committee believes that the community service requirements, as part of the student's overall academic program, are especially compatible with the administration's America reads initiative.

#### *Federal Perkins loans*

The Committee bill includes \$158,000,000 for Federal Perkins loans capital contributions, which is the same as the 1997 appropriation and the budget request.

The Federal Perkins Loan Program supports student loan revolving funds built up with capital contributions to about 2,700 participating institutions over the past 30 years. Institutions use these revolving funds, which also include a 25-percent institutional match and student repayments, to provide low-interest (5 percent) loans that help financially needy students pay the costs of postsecondary education. The Committee has included the amount necessary to maintain the current loan volume level.

The Committee bill also includes \$25,000,000 for loan cancellations, an increase of \$5,000,000 over the 1997 level and \$5,000,000 below the amount requested by the administration. These funds reimburse institutional revolving funds on behalf of borrowers who perform statutorily specified types of public or military service, such as working in a Head Start Program, serving in the Peace Corps or VISTA, or teaching in a low-income school. The additional funds are necessary because of the growth in the outstanding loan volume and the expanded eligibility for cancellations as a result of the 1992 amendments to the Higher Education Act.

#### *State student incentive grants*

For the State Student Incentive Grant Program [SSIG], the Committee agrees with the budget request and includes no funding for this program. The 1997 appropriation was \$50,000,000. The "National Performance Review" concluded that the SSIG program has achieved its purpose of providing incentive grants to States. Today, all 50 States and the District of Columbia have need-based State

grant programs and almost all States overmatch their SSIG allotments. In award year 1996–97, SSIG funding accounted for only 2 percent of the total State grant aid. This recommendation is consistent with the multiyear phaseout of the program proposed in 1996.

The Committee recognizes the importance of a student aid program that leverages money from the States into need-based financial assistance, but at the same time, sees the need to reevaluate the current structure of SSIG program. The Committee believes student assistance should include an ongoing source of Federal support which encourages and leverages State contributions. Thus, the Committee expects that the program be thoroughly evaluated and modified during reauthorization of the Higher Education Act.

FEDERAL FAMILY EDUCATION LOAN PROGRAM

Appropriations, 1997 .....	\$46,482,000
Budget estimate, 1998 .....	47,688,000
Committee recommendation .....	46,482,000

The Committee recommends \$46,482,000 for discretionary Federal administrative expenses related to the Federal Family Education Loan [FFEL] Program, formerly known as the Guaranteed Student Loan Program. The amount recommended is \$1,206,000 below the budget request and the same appropriated in fiscal year 1997.

Funds appropriated for Federal administrative expenses will partially cover the fiscal year 1998 salaries and benefits, travel, printing, contracts, and other expenses associated with the program, including payment and claims processing, reducing loan default costs, and program monitoring. This discretionary administrative funding is included in the “Federal family education loans” appropriation account rather than under the Department’s “Salaries and expenses” account pursuant to a requirement of the Federal Credit Reform Act of 1990.

The FFEL Program is administered through State and private nonprofit guarantee agencies that insure loans directly, collect defaulted loans, and provide various services to lenders. The Federal Government supports the guarantee agencies by providing loan advances and reinsurance payments for borrower default, death, disability, and bankruptcy. The Federal Government also pays administrative cost allowances to guaranty agencies under section 458 of the Higher Education Act.

The Federal Government also pays an interest subsidy to lenders, based on the borrower’s interest rate, on behalf of Stafford loan student borrowers while they are in school and during certain grace and deferment periods. To be eligible for this subsidy, students must demonstrate financial need. Federal Stafford loans may be borrowed by eligible students, regardless of their school year or dependency status. Borrowing limits are tied to the extent of need, for the cost of attendance minus an expected family contribution, and other aid as determined by an approved need analysis system.

Under the HEA reauthorization of 1992, a new unsubsidized Stafford Loan Program for middle-income borrowers provides federally reinsured loans to borrowers who do not qualify for Federal interest subsidy payments under the need-based Stafford Loan Pro-

gram. Except for the interest benefit and certain loan limits, all other terms and conditions of the Federal Stafford Loan Program apply to the unsubsidized Stafford loans.

Federal PLUS loans are made to parents of dependent undergraduate students. Interest rates for PLUS loans are usually higher than those for Federal Stafford loans, and the Federal Government does not pay the interest during in-school, grace, and deferment periods. No need analysis is required, but borrowing cannot exceed cost of attendance minus other aid.

The Committee has not included bill language, carried in previous years, regarding the payment of administrative cost allowances [ACA] to guaranty agencies, because language regarding this issue was included in both the House and Senate versions of the budget reconciliation bills. The Committee understands that the budget reconciliation conferees are currently working on language to be included in the final agreement. This language will require the payment of ACA on new loans guaranteed on or after the date of enactment of the reconciliation bill, at the rate of 0.85 percent. However, to the extent that there is a shortfall in the funding of ACA for fiscal year 1997, prior to the date the reconciliation bill is enacted, it is the Committee's intent to include sufficient funds to cover that shortfall in the final fiscal year 1998 Labor, Health and Human Services and Education appropriations bill. Further however, if language regarding ACA is not included in the budget reconciliation conference agreement, it is the Committee's intention to instead include language that will specify the amount of ACA paid to guaranty agencies for fiscal year 1997; include a requirement that for fiscal year 1998, the Department of Education shall pay ACA to guaranty agencies, calculated on the basis of 0.85 percent of the total principal amount of insured loans; and, require that such payments be made on a quarterly basis.

HIGHER EDUCATION

Appropriations, 1997 .....	\$879,048,000
Budget estimate, 1998 .....	1,035,292,000
Committee recommendation .....	929,752,000

The Committee recommends an appropriation of \$929,752,000 for higher education programs, \$50,704,000 more than the 1997 amount and \$105,540,000 below the budget request. The Committee has included no funds for the new merit-based scholarship program proposed to be funded at \$132,000,000.

*Aid for institutional development*

The Committee recommends \$196,046,000 for aid for institutional development authorized by title III of the Higher Education Act, an increase of \$1,200,000 over the 1997 appropriation and \$6,025,000 below the budget request.

*Strengthening institutions.*—The Committee bill includes \$55,450,000 for the part A Strengthening Institutions Program, the same as the 1997 level and the budget request. The part A program supports competitive, 5-year development grants for institutions with a significant percentage of financially needy students and low educational and general expenditures per student in comparison with similar institutions. Applicants may use part A funds

to develop faculty, strengthen academic programs, improve institutional management, and expand student services.

*Hispanic-serving institutions [HSI].*—The Committee recommends \$12,000,000 for the section 316 set-aside for institutions at which Hispanic students make up at least 25 percent of enrollment, an increase of \$1,200,000 over the 1997 level and the same as the administration request. The Committee has included bill language which is, consistent with the budget request overriding the current law requirement that funds be appropriated for the HSI program only when appropriations for the regular strengthening institutions program equal or exceed \$80,000,000. Institutions applying for section 316 funds must meet the regular part A requirements and show: (1) that at least one-half of their Hispanic students are low-income, first-generation college students, and (2) that another one-quarter of their Hispanic enrollments are either low-income or first-generation college students. In addition to the regular part A purposes, funds may be used for acquisition of scientific or laboratory equipment, renovation of instructional facilities, and purchase of educational materials. Section 316 recipients are not eligible for other awards provided under part A.

*Strengthening historically black colleges and universities.*—The Committee provides \$108,990,000 for part B grants, the same as the 1997 level, and \$4,010,000 below the administration request. The part B Strengthening Historically Black Colleges and Universities [HBCU] Program makes formula grants to HBCU's that may be used to purchase equipment, construct and renovate facilities, develop faculty, support academic programs, strengthen institutional management, enhance fundraising activities, provide tutoring and counseling services to students, and conduct outreach to elementary and secondary school students. The minimum allotment is \$500,000 for each eligible institution. Part B recipients are not eligible for awards under part A.

*Strengthening historically black graduate institutions.*—The Committee bill includes \$19,606,000 for the part B, section 326 program, the same as the 1997 level, and the administration request. The section 326 program provides 5-year grants to strengthen historically black graduate institutions [HBGI's]. The Higher Education Amendments of 1992 increased the number of recipients to 16 named institutions, but reserved the first \$12,000,000 appropriated each year to the first 5 institutions included in the original authorization. Grants may be used for any part B purpose and to establish an endowment.

The Committee continues to support the strengthening and expansion of assistance to historically black colleges and university graduate and professional schools/programs. HBCU's continue to provide a disproportionate share of the African-American doctors, dentists, lawyers, and doctorates in the physical and natural sciences and mathematics, as well as serving as undergraduate feeder institutions for traditionally white institutions that contribute to reversing the under representation of minority professionals and doctorates. Although the Committee is providing level funding in its bill, the Committee does not believe that funding to the existing 16 graduate and professional schools and programs should be reduced. Assuming an institution continues to qualify and meet the

matching requirements above the minimum award level—no institution or qualified graduate program should receive less funding in fiscal year 1998 than it did in fiscal year 1997.

The Committee believes that the Department of Education has previously misconstrued the matching requirements in section 326(a)(2) of the Higher Education Act. Each participating professional and graduate institution, or qualified graduate program is eligible to receive \$500,000 minimum allocation that must be matched with an equal amount from non-Federal sources. The Department has previously required those participating institutions that elected to match, to also match the initial \$500,000. This is inconsistent with congressional intent and discourages eligible institutions from matching funds.

*Endowment challenge grants.*—The Committee bill does not provide funding for part C endowment challenge grants. No funds were provided for this purpose in fiscal year 1997. The administration requested \$2,015,000 for this program. These funds enable eligible institutions to establish or increase institutional endowment funds.

While the Committee has not seen fit to restore funding for this program, the Committee does believe that endowment building represents an important fiscal insurance for smaller, less financially stable colleges and universities. We have accepted an approach incorporated in the house bill—which allows institutions participating in part A and part B to use up 20 percent of their grant amount for endowment building purposes.

*Fund for the improvement of postsecondary education*

The Committee recommends \$30,000,000 for the fund for the improvement of postsecondary education [FIPSE], which is \$12,000,000 more than the 1997 appropriation and the administration request. FIPSE stimulates improvements in education beyond high school by supporting exemplary, locally developed projects that have potential for addressing problems and recommending improvements in postsecondary education. The fund is administered by an independent board that provides small, competitive grants and contracts to a variety of postsecondary institutions and agencies, including 2- and 4-year colleges and universities, State education agencies, community-based organizations, and other institutions and organizations concerned with education beyond high school.

The Committee believes that an exemplary program is needed to encourage underrepresented groups, such as women and minorities, to enter careers in the fields of science, technology, engineering, and mathematics. Many business and industrial communities have established relationships with postsecondary institutions to provide the type of career-oriented technical education programs described above. The Committee encourages the Department to provide \$1,000,000 to conduct a competition to encourage postsecondary institutions to enhance their management, professional development, and academic programs, to meet the technical education needs of the business and industrial communities and to foster strong relationships with these communities. An institution such as the Pennsylvania Institute of Technology would be espe-

cially suited in providing career-oriented technical education in the areas described above.

It has been brought to the Committee's attention that a program being implemented at Prairie View A&M University in Texas provides a unique and effective means for enhancing the academic skills and future success of incoming college freshmen who are at risk to not complete their education. This innovative program entitled academy for collegiate excellence and student success [ACCESS] envisions a training component for personnel at other universities to build upon the model now being developed at Prairie View A&M. The Committee urges the Secretary to provide \$1,000,000 for a project such as the one described above.

The Committee urges the Department to provide \$1,000,000 for the establishment of a center to provide in-state laboratory testing for businesses, and training for high school graduates in the use of scientific testing equipment and techniques. This Center would provide the hands-on training needed to pursue good-paying product testing or science oriented jobs. The Vermont Science and Education Center, located in St. Albans, VT, would be especially suited to carry out such a program.

The Committee encourages the Department to use \$2,000,000 for a demonstration project that could serve as a model for cooperation between community colleges and State universities. A project which allows students at a community college to receive course credit toward a 4-year degree could serve as a model for making the limited resources of universities accessible and affordable to anyone who wants to pursue a higher education. The Community College in Onslow County, NC, and the University of North Carolina at Wilmington have been working on a project such as the one described above and would be especially suited to conduct such a demonstration.

The Committee urges the Department to provide \$2,000,000 for demonstrations to establish a comprehensive voice-video data network, to allow students to link up with instructors in other classes from around the State and the world. The project should include statewide access to the faculty, research and library resources, and professional development programs. The Empire State College in New York and Rutgers University in New Jersey would be especially suited to carry out demonstration projects such as the ones described above.

The Committee urges the Secretary to use \$180,000 within the funds provided for a project to expand cooperative education beyond the traditional focus of placing students in business settings. The expanded program would focus on faculty development, student development and employer development. The faculty development program would place faculty in business settings and bring business, cooperative and manufacturing representatives into the academic environment. The student development initiative would focus on developing mentoring activities to improve interviewing and job search skills. The employer program would benefit by utilizing both student and faculty in the business setting, as well as by establishing a faculty/employer exchange program. The Committee urges the Department to give full consideration to an application from North Dakota State University for such a project.

It has been brought to the Committee's attention that a group of Kansas universities has been processing and disseminating information generated through a model distance learning program for continuing education in rural areas. Augmenting production and distribution capabilities will make courseware more accessible, flexible and interactive than current distance learning systems. The Committee has included \$1,000,000 for a project such as the one described above. The Committee encourages full and fair consideration to a proposal from this consortium of Kansas universities.

The Committee urges the Department to provide \$1,000,000 for a program modeled after the Linking International Trade Program at Bryant College, located in Smithfield, RI. This program utilizes interactive video conferencing, as well as an international trade data base that enables students to learn about global economic statistics, international industries and trade, and business trends.

The Committee urges the Department to provide \$300,000 for a project such as the Hispanic education technology system, modeled after the distance education programs pioneered in engineering and agriculture. This system, a collaboration among nine institutions including the University of New Mexico, would support staff training and course development that would serve the needs of Hispanics for distance learning opportunities.

It has come to the Committee's attention that the Southeast Missouri State University's planned technical education center is serving as a regional staging point for the coordinated delivery of technical education in cooperation with community colleges and vocational technical schools. Southeast Missouri State University serves a 24-county area that is included, as defined by Federal statute, in the Lower Mississippi Delta region. The Lower Mississippi Delta Development Commission has identified it as the poorest region in the United States, lagging in industrial development, having high dropout rates, and limited technical educational opportunities. The Committee urges the Department to provide \$2,000,000 for a high-tech computer integrated manufacturing equipment center. Southeast Missouri State University would be especially suited to carry out a demonstration in this area.

The Committee has provided \$500,000 for a demonstration project that would serve as the staging point for the coordinated delivery of technical education in cooperation with community colleges and vocational technical schools. The Advanced Technical Center in Mexico, MO, would be particularly suited to carry out such a project.

The Committee has included \$2,000,000 for a demonstration project to implement a resource-sharing video conferencing network. The Pennsylvania Telecommunications Exchange Network is currently carrying out such a project and the Committee urges the Department to give full and fair consideration to the Network when funds are awarded for such a demonstration.

#### *Minority teacher recruitment*

The Committee recommends \$2,212,000 for the Minority Teacher Recruitment Program, which is the same as the 1997 appropriation, and \$1,515,000 below the budget request. This program, au-

thorized by the Higher Education Amendments of 1992, is designed to increase the numbers of African-Americans, Hispanics, native Americans, and other minorities in the teaching profession. Partnership projects identify students with an interest in entering the teaching profession and provide support services such as scholarship funds, tutoring, and academic counseling. Teacher placement projects prepare minority students to become elementary and secondary schoolteachers and help place these students in schools with at least 50 percent minority enrollment.

*Minority science improvement*

The Committee recommends \$5,255,000 for the Minority Science Improvement Program [MSIP], the same as the 1997 level and the administration request. This program provides discretionary grants to institutions with minority enrollments greater than 50 percent to purchase equipment, develop curricula, and support advanced faculty training. Grants are intended to improve science education programs and increase the number of minority students in the fields of science, mathematics, and engineering.

*International education and foreign language studies*

The bill includes a total of \$60,351,000 for international education programs, \$600,000 more than the 1997 level and \$100,000 above the budget request.

*Domestic programs.*—The Committee recommends \$53,481,000 for domestic program activities related to international education and foreign language studies, including international business education, under title VI of the HEA. This is the same as the 1997 appropriation and the administration request. Domestic programs include national resource centers, undergraduate international studies and foreign language programs, international studies and research projects, international business education projects and centers, American overseas research centers, language resource centers, and foreign language and area studies fellowships.

*Overseas programs.*—The bill includes \$5,870,000 for overseas programs authorized under the Mutual Educational and Cultural Exchange Act of 1961, popularly known as the Fulbright-Hays Act. This is \$600,000 above the 1997 level and \$100,000 above the budget request. Under these overseas programs, grants are provided for group and faculty research projects abroad, doctoral dissertation research abroad, and special bilateral projects. Unlike other programs authorized by the Fulbright-Hays Act and administered by the U.S. Information Agency, these Department of Education programs focus on training American instructors in order to improve foreign language and area studies education in the United States.

The Committee is aware of the success of the American Overseas Research Center Program, and commends the Department for its support of the Centers. However, the Committee is concerned that qualified applicants were denied awards due to the overall funding limits. To support more overseas centers, the Committee urges the Secretary to allocate the additional \$100,000 for grants to additional centers to be awarded on a competitive basis.

*Institute for International Public Policy.*—The Committee bill recommends \$1,000,000 for the Institute for International Public Policy, the same as the 1997 appropriation and the budget request. This program is designed to increase the number of minority individuals in foreign service and related careers by providing a grant to a consortium of institutions for undergraduate and graduate level foreign language and international studies. An institutional match of 25 percent is required.

*Urban community service*

The Committee recommends \$4,900,000 for urban community service program, a decrease of \$4,300,000 below the fiscal year 1997 appropriation. The budget requested no funding for this purpose. This program provides grants to urban universities to encourage community involvement in solving the social and economic problems of the urban area which they serve. Other programs within the Department of Education, the Department of Health and Human Services and the Department of Housing and Urban Development carry out a variety of community development activities to help urban areas solve local community problems. The recommendation will be a 2-year phaseout of the program and is sufficient to continue funding of existing grantees.

*Youth offender grants*

The Committee has included \$15,000,000 for a program authorized by part E of title X of the Higher Education Act. No funds were included for this program in fiscal year 1997 or requested by the administration. This new program provides grants to State correctional education agencies to assist and encourage incarcerated youth to acquiring functional literacy, life and job skills, through the pursuit of a postsecondary education certificate, an associate of arts or bachelor's degree. Grants will also assist correction agencies in providing employment counseling and other related services that start during incarceration and continue through prerelease and while on parole. Each student is eligible for a grant of not more than \$1,500 annually for tuition, books, and essential materials, and not more than \$300 annually for related services such as career development, substance abuse counseling, parenting skills training, and health education. In order to participate in a program, a student must be no more than 25 years of age and be eligible to be released from prison within 5 years. Youth offender grants are for a period not to exceed 5 years, 1 year of which may be devoted to study in remedial or graduate education.

*Interest subsidy grants*

The Committee recommends \$13,700,000 for interest subsidy grants, the same as the administration request and \$1,973,000 less than the 1997 level. This appropriation is required to meet the Federal commitment to pay interest subsidies on approximately 300 loans made in past years for constructing, renovating, and equipping postsecondary academic facilities. No new interest subsidy commitments have been entered into since 1973 but subsidy payments on existing loans are expected to continue until the year 2013.

*Bethune Memorial Fine Arts Center*

The Committee recommends \$1,400,000 for the Bethune Memorial Fine Arts Center. This is the same as the 1997 appropriation. The administration requested no funds for this purpose.

*Federal TRIO programs*

The Committee bill includes \$525,000,000 for Federal TRIO programs, the amount requested by the administration and \$25,006,000 above the 1997 appropriation.

TRIO programs provide a variety of services to improve postsecondary education opportunities for low-income individuals and first-generation college students: upward bound offers disadvantaged high school students academic services to develop the skills and motivation needed to continue their education; student support services provides remedial instruction and counseling to disadvantaged college students to help them complete their postsecondary education; talent search identifies and counsels individuals between ages 12 and 27 regarding opportunities for completing high school and enrolling in postsecondary education; educational opportunity centers provide information and counseling on available financial and academic assistance to adults who are low-income and first-generation college students; and the Ronald E. McNair Postbaccalaureate Achievement Program supports research internships, seminars, tutoring, and other activities to encourage disadvantaged college students to enroll in graduate programs.

The additional funds provided will permit more intensive outreach services to low-income youth and to assist in preparing these students for postsecondary education. The Committee also urges the Department to expand the role of TRIO in providing out-of-school access to modern learning technologies for low-income youth. The Committee further urges the Department to use a portion of the increase provided to extend talent search and educational opportunity center services to additional youth and adults.

*National early intervention scholarships and partnerships*

The Committee bill includes \$3,600,000 for this program of grants to States for projects that provide mentoring, outreach, counseling, and academic support for at risk students. This is the same as the 1997 appropriation. The administration requested no funds for this purpose. This program is intended to provide incentives for States to combine TRIO-type outreach activities with a State guarantee of college tuition assistance that will encourage low-income elementary and secondary school students to stay in school, earn their high school diplomas, and pursue postsecondary education.

*Advanced placement fees*

The Committee recommends \$3,000,000 for the new advanced placement fees program. The administration requested \$6,000,000 for this purpose. This program awards grants to States to enable them to cover part or all of the cost of advanced placement test fees of low-income individuals who are enrolled in an advanced placement class and plan to take an advanced placement test.

*Byrd honors scholarships*

The Committee recommends \$39,288,000 for the Byrd Honors Scholarship Program, the amount recommended by the administration and an increase of \$10,171,000 over the 1997 appropriation.

The Byrd Honors Scholarship Program is designed to promote student excellence and achievement and to recognize exceptionally able students who show promise of continued excellence. Funds are allocated to State education agencies based on each State's school-aged population. The State education agencies select the recipients of the scholarships in consultation with school administrators, teachers, counselors, and parents. The increase provided will fund a new cohort of first-year students in 1998, and continue support for the 1995, 1996, and 1997 cohorts of students in their fourth, third and second years of study, respectively.

*Presidential honors scholarships*

The Committee recommends no funding for the Presidential honors scholarships program. This new initiative would reward the excellence and achievement of the top 5 percent of graduating high school students in every high school in the Nation by providing a 1-year \$1,000 scholarship to these students for use in postsecondary study. The Committee has deferred consideration of this request until the authorizing legislation has been signed into law.

*George H.W. Bush fellowships*

The Committee has provided no funding for the George H.W. Bush Fellowship Program in fiscal year 1998, the same as the administration's request. In fiscal year 1997, the program received \$3,000,000, the full amount allowed by the authorizing statute. A grant was awarded to assist in the establishment of the George Bush Fellowship Program, located at the George Bush School of Government and Public Service of the Texas A&M University. The Bush Fellowship Program would help the most qualified individuals from all parts of the country to obtain advanced degrees in public administration and international affairs.

*Edmund S. Muskie Foundation*

The Committee recommends no funding in fiscal year 1998 for the Edmund S. Muskie Foundation, the same as the administration's request. A one-time appropriation of \$3,000,000 was included in the fiscal year 1997 appropriation to establish an endowment fund.

*Pell Institute for International Relations*

The Committee recommends no funding for the Pell Institute for International Relations in fiscal year 1998, the same as the administration's request. A one-time appropriation of \$3,000,000 was provided for this purpose in fiscal year 1997.

*Calvin Coolidge Memorial Foundation*

The Committee recommends no funding for the Calvin Coolidge Memorial Foundation in fiscal year 1998, the same as the administration's request. A one-time appropriation of \$1,000,000 was pro-

vided in fiscal year 1997 to conduct education, archival, and preservation activities of the Foundation.

*Javits fellowships*

The Committee concurs with the administration in not recommending separate funding for Javits fellowships but provides \$5,931,000 under the graduate assistance in areas of national need [GAANN] program to fund the Javits fellowships at the same level as in fiscal year 1997. The funds will provide an estimated \$2,556,000 for new awards and an estimated \$3,375,000 for non-competing continuation awards.

This program provides fellowships to students of superior ability for doctoral study in the arts, humanities, and social sciences. The fellowships are awarded through a national competition and recipients pursue graduate study at the institutions of their choice.

*Graduate assistance in areas of national need*

The Committee recommends \$30,000,000 for graduate assistance in areas of national need, the same as the budget request and \$5,931,000 above the 1997 level. This program awards competitive grants to graduate academic departments and programs for fellowship support in areas of national need as determined by the Secretary. The program is currently supporting study in mathematics, physics, biology, chemistry, engineering, and computer and information sciences. Recipients must demonstrate financial need and academic excellence, seek the highest degree in their fields, and plan teaching or research careers.

The Committee provides \$5,931,000 to fund the Javits fellowships at the same level as in fiscal year 1997 under the GAANN program. The Javits Program is of particular importance as a mechanism for supporting America's next generation of leaders in the arts, humanities, and social studies and although the Committee has consolidated funding within the Graduate Assistance Program, this action was taken to streamline programs. It is the Committee's intention that the merit-based Javits Fellowships Program remain an active and identifiable program.

HOWARD UNIVERSITY

Appropriations, 1997 .....	\$196,000,000
Budget estimate, 1998 .....	196,000,000
Committee recommendation .....	198,000,000

The Committee recommends an appropriation of \$198,000,000 for Howard University, which is \$2,000,000 above the 1997 appropriation, and the budget request. Howard University is located in the District of Columbia and offers undergraduate, graduate, and professional degrees through the 16 schools and colleges. The university also administers the Howard University Hospital, which provides both inpatient and outpatient care, as well as training in the health professions. Federal funds from this account support about 50 percent of the university's projected educational and general expenditures, excluding the hospital.

*Undistributed.*—The Committee bill provides \$168,511,000 in undistributed funds, which is \$2,000,000 above the 1997 level and the administration request. Of the \$168,511,000 in undistributed

funds, Howard must allocate at least \$3,530,000 for the endowment program. The Committee directs that Howard notify the Congress of any transfer from the regular appropriation to the endowment at least 15 days prior to execution of the transfer. The Committee notes that the authority under which funds are appropriated for Howard permits expenditures for, among other things, academic services, financial support of students, contribution to the university endowment, or construction.

*Howard University Hospital.*—The Committee recommends \$29,489,000 for the Howard University Hospital, the same as the 1997 level and the budget request. The hospital serves as a major acute and ambulatory care center for the District of Columbia and functions as a major teaching facility attached to the university that trains physicians in 17 specialty areas. The Federal appropriation provides partial funding for the hospital's operations.

#### COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS

Appropriations, 1997 .....	\$698,000
Budget estimate, 1998 .....	1,069,000
Committee recommendation .....	698,000

*Federal administration.*—The Committee bill includes \$698,000 for Federal administration of the CHAFL program, the same as the 1997 level and \$371,000 below the administration request.

These funds will be used to reimburse the Department for expenses incurred in managing the existing CHAFL loan portfolio during fiscal year 1998. These expenses include salaries and benefits, travel, printing, contracts (including contracted loan servicing activities), and other expenses directly related to the administration of the CHAFL Program.

#### HISTORICALLY BLACK COLLEGE AND UNIVERSITY CAPITAL FINANCING PROGRAM

Appropriations, 1997 .....	\$104,000
Budget estimate, 1998 .....	104,000
Committee recommendation .....	104,000

*Federal administration.*—The Committee recommends \$104,000 for Federal administration of the Historically Black College and University [HBCU] Capital Financing Program, the same as the administration request and the 1997 level.

The HBCU Capital Financing Program makes capital available to HBCU's for construction, renovation, and repair of academic facilities by providing a Federal guarantee for private sector construction bonds. Construction loans will be made from the proceeds of the sale of the bonds.

#### EDUCATION RESEARCH, STATISTICS, AND IMPROVEMENT

Appropriations, 1997 .....	\$331,161,000
Budget estimate, 1998 .....	425,693,000
Committee recommendation .....	362,225,000

The bill includes \$362,225,000 for educational research, statistics, assessment, and improvement programs. This amount is \$31,064,000 above the 1997 appropriation and \$63,468,000 below the administration request. This account supports education re-

search, statistics, and assessment activities, as well as a variety of other discretionary programs for educational improvement.

#### *Research*

The Committee recommends \$72,567,000 for educational research, the same as the 1997 appropriation and \$8,468,000 below the budget request. Research activities are conducted by the Office of Educational Research and Improvement [OERI], which was reauthorized by the Educational Research, Development, Dissemination, and Improvement Act of 1994.

These funds support research, development, dissemination, and technical assistance activities which are aimed at expanding fundamental knowledge of education and promoting the use of research and development findings in the design of efforts to improve education.

The Committee has included \$53,500,000 for regional educational laboratories, the same as the administration request and \$2,500,000 above the 1997 appropriation.

#### *Statistics*

The Committee recommends \$52,000,000 for data gathering and statistical analysis activities of the National Center for Education Statistics [NCES], the same as the fiscal year 1997 appropriation and a decrease of \$14,250,000 below the administration request.

NCES collects, analyzes, and reports statistics on education in the United States. Activities are carried out directly and through grants and contracts. The Center collects data on educational institutions at all levels, longitudinal data on student progress, and data relevant to public policy. Technical assistance to State and local education agencies and postsecondary institutions is also provided by the Center.

#### *Assessment*

The Committee recommends \$29,752,000 for assessment, the same amount appropriated in fiscal year 1997 and \$5,750,000 below the administration request.

The National Center for Education Statistics uses these funds to administer the national assessment of educational progress [NAEP], a 20-year-old congressionally mandated assessment created to measure the educational achievement of American students. The primary goal of NAEP is to determine and report the status and trends over time in educational achievement, subject by subject. NAEP has been expanded in recent years to include State representative assessments as well.

Also included is \$2,871,000 for the National Assessment Governing Board, the same amount requested by the administration and \$6,000 more than the fiscal year 1997 appropriation.

#### *Fund for the improvement of education*

The Committee bill provides \$50,000,000 for the fund for the improvement of education [FIE], which is \$10,000,000 more than the 1997 appropriation and the administration request. This program provides the Secretary with broad authority to support nationally significant programs and projects to improve the quality of edu-

cation, help all students meet high academic standards, and contribute to the achievement of the national education goals. The statute also authorizes support for specific activities, such as counseling and mentoring, comprehensive health education, and environmental education.

The Committee encourages the Department to provide \$750,000 for a demonstration project to assist second grade students who need help with reading. This project should address the problems of reading fluency and comprehension before a pattern of continued long-term failure is established, and identify and eliminate the gap between students with reading problems and skilled readers. The reading together USA project has been training fifth grade tutors to assist second grade students to improve their reading skills and would be especially suited to carry out a demonstration in this area.

The Committee recognizes that there continues to be a gap in the reading and writing scores of African American students and other student populations. According to research at the University of Pennsylvania, no matter what teaching methods are used and even when minority children from inner cities begin school at the same level as all others, they do progressively worse until graduation. For those who stay in school until graduation, the research has found that the majority are in the lowest 16th percentile. This performance differential is particularly pronounced for African American children. Preliminary findings suggest that this differential, in part, may be explained by the language usage patterns of African Americans. The Committee urges the Department to provide \$1,000,000 to support a university-based research project with an emphasis on university consortium efforts which target inner-city, public schools, that would evaluate the relationship between the language usage patterns of African American students and their ability to read and write standard English. The University of Pennsylvania would be especially suited to carry out such a project.

The Committee concurs with the administration request and has included within the total provided \$6,520,000 for character education partnership grants. These funds will continue the existing 12 grants as well as provide for approximately 16 new grants. Funds are used for the design and implementation of programs that incorporate the six elements of character identified in the statute: caring, civic virtue and citizenship, justice and fairness, respect, responsibility, and trustworthiness.

The Committee urges the Department to provide \$1,000,000 for a demonstration project designed for children in grades three through nine who are educationally and/or socially at risk for school failure. The program should focus on students whose educational success is impaired due to difficulties in peer and adult relationships, who lack self esteem or the ability to make decisions. The project should focus on a program which provides a challenging educational environment including social, emotional, and academic support which will enable students to take full advantage of educational opportunities. A joint venture between the Newport News Public Schools System, the city of Newport News, the local business community and the nonprofit Achievable Dream Founda-

tion is currently operating a program and would serve as an excellent model to demonstrate such a program.

The Committee is aware that the Women in Natural Sciences Program, developed and managed by the Academy of Natural Sciences, provides science enrichment for talented minority and underserved 9th and 10th grade female students. Participants must be financially needy, be enrolled in a Philadelphia public school and live in a household where one or both parents are absent. The Committee encourages the Department to provide \$1,000,000 to support an expansion of the program, which will permit the dissemination of information and an evaluation component.

The Committee urges the Secretary to provide \$3,000,000 for activities to extend the time for learning within or beyond the school year or day. Funds will be used to provide grants to schools and local education agencies to conduct outreach to and consult with parents, teachers, community leaders, and other stakeholders including students, where appropriate, to determine the feasibility of extending time for learning. The Committee notes that several Iowa school districts, including the Sioux City Community School District, the Creston Community School District, and the Ankeny Community School District, are looking at ways to extend the time for learning and would be ideally suited to receive such grants.

The Committee urges the Department to provide \$5,000,000 for a demonstration project designed to improve student achievement through curriculum improvement and the effective use of information technology. Funds would be used to meet high levels of standards and assessments, and create multimedia courses and course modules. The Committee understands that the State of Washington Office of the Superintendent of Public Instruction is currently operating a program in this area. The Committee urges the Secretary to give consideration to projects such as the one described above.

It has been brought to the Committee's attention that a recent study offers documentation about the low level of average literacy within State and Federal prisons, relative to the population at large, and raises some questions about the effectiveness of prison education programs. The Committee notes that among the responsibilities of the Institute on Postsecondary Education, Libraries, and Lifelong Learning, is a study of instructional programs and practices which are effective in correctional settings. Such a study would be of great importance to State and Federal prison officials, as well as to educators and policymakers, when making decisions regarding prison education programs. The Committee urges the Department to use \$500,000 to begin a national study of correction education programs.

The Committee was highly dismayed to learn of the Department's use of fiscal year 1997 funds to begin a new testing initiative without securing prior approval through the regular appropriations process. This initiative was not included in the Department's justification material, nor was it brought to the Committee's attention during the fiscal year 1997 hearings. The Committee directs the Department to contract with the National Academy of Sciences to do a study and report to the Committee on the voluntary national testing initiative. This study should include the technical quality of the work performed under the test development con-

tracts, the frameworks and test content, the adequacy of field tests, the reliability of the data produced by the field tests, and the degree in which the tests can be expected to provide valid and useful information to the public. The Committee further directs that a preliminary report be completed by no later than August 31, 1998, and a final report be issued by September 15, 1998. The Committee further prohibits the Department from administering national tests until the final report is completed.

The Committee has included \$2,000,000 for a program to develop a common infrastructure plan for multiple college campuses. The plan will include the installation of a fiber-optic system which would support voice, data, and video applications, a library automation program to improve access and facilitate use by the campuses; implementation and improvement of intracampus networking and remote access, and expanding access to the Internet to members of the college community. The Pennsylvania Consortium for Higher Education is in the process of carrying out a project such as the one described above and could act as a model for other projects around the nation. The Committee urges the Secretary to give full and fair consideration to the Consortium when awarding this project.

The Committee urges the Department to provide \$1,000,000 to conduct a demonstration project using state-of-the-art technology to help students learn English. The National Science Center Foundation, in Augusta, GA, is developing a program such as the one described above, and would be especially suited to develop such a software program.

#### *International education exchange*

The Committee has provided \$5,000,000 for the International Education Exchange Program authorized by section 601(c) of Public Law 103-227. These funds are the same amount recommended by the administration and appropriated in fiscal year 1997. The program provides funds to support democracy and free market economies in Eastern Europe, the Commonwealth of Independent States, and other countries that formerly were part of the Soviet Union, by providing educators and other leaders from those countries curricula and teacher training programs in civic and economic education, as well as the opportunity to exchange ideas and experiences with teachers in the United States and other participating countries. The 1998 funds would support continuation of grants awarded to two independent nonprofit organizations with significant expertise in civics education and economic education.

#### *Civic education*

The Committee recommends \$4,500,000 for the Center for Civic Education, the same amount as appropriated in fiscal year 1997 and the administration request. This program provides a course of instruction at the elementary and secondary level on the basic principles of our constitutional democracy and the history of the Constitution and the Bill of Rights. Funds also may be used to provide advanced training for teachers concerning the Constitution and the Bill of Rights.

*Eisenhower professional development Federal activities*

The Committee recommends \$25,000,000 for the Eisenhower Professional Development Federal Activities Program, \$5,000,000 below the budget request and \$11,658,000 above the 1997 appropriation.

This program supports activities of national significance contributing to the development and implementation of high-quality professional development in the core academic subjects. Projects may include development of teacher training programs, or dissemination of information about exemplary programs of professional development.

The Committee has included \$16,000,000 for the National Board for Professional Teaching Standards, an increase of \$11,000,000 above the fiscal year 1997 appropriation and \$5,000,000 below the administration request. The Committee has included this increase for assessment development, but has included no funding for teacher subsidies.

Consistent with the budget requests, the Committee has included \$4,621,000 for the National Clearinghouse for Mathematics and Science Education, the same amount appropriated for this purpose in 1997. The clearinghouse maintains a permanent repository of mathematics and science education instructional materials and programs for elementary and secondary schools; disseminates information, programs, and instructional materials to the public, information networks, and regional consortiums; and coordinates with existing data bases containing mathematics and science curriculum and instructional materials.

*Eisenhower regional mathematics and science education consortia*

The Committee has included \$15,000,000 for the Eisenhower regional mathematics and science education consortia, the same amount appropriated in fiscal year 1997 and the same amount recommended by the administration. This program supports grants to establish and operate regional consortia to disseminate exemplary mathematics and science instructional materials and provide technical assistance in the use of improved teaching methods and assessment tools to benefit elementary and secondary school students, teachers, and administrators.

*21st century community learning centers*

The Committee has included \$1,000,000 for the 21st century community learning centers, the same amount appropriated in fiscal year 1997. The administration requested no funding for this purpose. This program supports grants to rural and inner-city public elementary or secondary schools, or consortia of such schools, to enable them to plan, implement, or expand projects that benefit the educational, health, social service, cultural, and recreational needs of a rural or inner-city community.

Projects that place schools at the center of the community are contributing to rural renewal both culturally and economically. They also bring the community into the school in the areas of curriculum reform, school organization, planning, teacher and administrator education, and fiscal and tax policy. The Committee urges

the Department to place a high priority on schools-at-the-center projects.

*Javits gifted and talented students education*

The Committee has included \$7,000,000 for the Javits Gifted and Talented Students Education Program, the same amount recommended by the administration and \$2,000,000 above the fiscal year 1997 appropriation.

This program authorizes awards to State and local education agencies, institutions of higher education, and public and private agencies for research, demonstration, and training activities designed to enhance the capability of elementary and secondary schools to meet the special educational needs of gifted and talented students. Priority is given to projects that identify and serve gifted and talented students who may not be identified and served through traditional assessment methods, including those who are economically disadvantaged or limited English proficient, or have disabilities. Some funds are set aside for a national center for research and development in the education of gifted and talented children and youth, which researches methods and techniques for identifying and teaching gifted and talented students.

*Star schools*

For the Star Schools Program, the Committee recommends \$30,000,000, an increase of \$4,000,000 above the administration request and the same as the 1997 appropriation.

The Committee has included sufficient funds to continue a state-wide fiber optic demonstration project.

This program is designed to improve instruction in math, science, foreign languages, and other subjects such as vocational education, primarily by means of telecommunications technologies and to serve underserved populations. The program supports eligible telecommunications partnerships to develop and acquire telecommunications facilities and equipment, instructional programming teacher training programs and technical assistance.

The Committee is aware of the important work being carried out by the National Center on Adult Literacy at the University of Pennsylvania. The Center is currently operating a program entitled "LiteracyLink" which provides online services to assist adults in obtaining a high school diploma or a general education diploma. The Committee has included sufficient funds to continue this program.

*National writing project*

The Committee bill provides \$5,000,000 for the national writing project, an increase of \$1,900,000 above the 1997 appropriation. The administration requested no funds for this program.

These funds are awarded to the national writing project in Berkeley, CA, which in turn funds projects in 45 States to train teachers of all subjects how to teach effective writing.

The Committee remains strongly supportive of the efforts of the national writing project [NWP] to improve the skills of our Nation's teachers. The NWP trained more than 166,000 teachers across the country at a cost of less than \$22 per teacher in Federal funds. The

Committee believes that funds for the NWP represent an important investment in our Nation's teachers and students.

*After school learning centers*

The Committee bill includes no funding for this new initiative. The administration requested \$50,000,000 for this program. Funds would support grants to rural and inner-city public elementary and secondary schools, or consortia of such schools, to enable them to plan, implement, or expand projects that benefit the educational, health, social service, cultural, and recreational needs of a rural or inner city community.

*Ready to learn television*

The Committee recommends an appropriation of \$7,000,000 for the Ready to Learn Television Program, the same amount appropriated in fiscal year 1997 and requested by the administration.

This program supports the development and distribution of educational television programming designed to improve the readiness of preschool children to enter kindergarten and elementary school, consistent with the first national education goal that all children should start school ready to learn. The program also supports the development, production, and dissemination of educational materials designed to help parents, children, and care givers obtain the maximum advantage from educational programming.

*Telecommunications demonstration project for mathematics*

The Committee recommends \$2,035,000 for the telecommunications demonstration project for mathematics, the same amount recommended by the administration and an increase of \$1,000,000 above the fiscal year 1997 appropriation. Funds are used to carry out a national telecommunication-based demonstration project designed to train elementary and secondary school teachers in preparing all students for achieving State content standards in mathematics.

CHILD LITERACY INITIATIVE

Appropriations, 1997 .....	
Budget estimate, 1998 .....	\$260,000,000
Committee recommendation .....	260,000,000

The Committee recommends \$260,000,000 for a child literacy initiative. The administration requested \$260,000,000 to begin the new America reads challenge program which would train 30,000 reading specialists and coordinators to mobilize 1 million volunteer reading tutors over the next 5 years. The funds recommended have been provided only if authorized by subsequent legislation enacted by April 1, 1998. Funds have been provided on an advance funded basis and will not become available until October 1, 1998 and shall remain available through September 30, 1999.

The Committee expects the Department to work with parents and educators to complement and support other programs with literacy components, such as Head Start, Even Start, and title I, so they can be even more effective in helping children increase their skills and achievement levels.

The Committee recognizes that the national service programs, especially the Volunteers in Service to America, Foster Grandparent, and the Retired Senior Volunteer Programs could serve as a valuable resources in accomplishing the goal of having all children read well and independently by the third grade. The Committee urges the Department to establish a comprehensive approach to implement the child literacy initiative.

The Committee urges the Department, when drafting legislation, to give special consideration to a professional development initiative designed to teach teachers and other education professionals methods in instructing children how to read. The Committee further encourages the Department to implement this initiative using the 10-regional educational laboratories, which have particular expertise in the area of professional development.

#### INSTITUTE OF MUSEUM AND LIBRARY SERVICES

Appropriations, 1997 .....	\$136,369,000
Budget estimate, 1998 .....	136,369,000
Committee recommendation .....	146,369,000

The Committee recommends an appropriation of \$146,369,000 for the Institute of Museum and Library Services, an increase of \$10,000,000 above the budget request.

#### *Office of Library Services State Grants*

The Committee recommends \$126,824,000 for State grants. Funds are provided to States by formula to carry out 5-year State plans. These plans must set goals and priorities for the State consistent with the purpose of the act, describe activities to meet the goals and priorities and describe the methods by which progress toward the goals and priorities and the success of activities will be evaluated. States may apportion their funds between two activities, technology and targeted services. For technology, States may use funds for electronic linkages among libraries, linkages to educational, social and information services, accessing information through electronic networks, or link different types of libraries or share resources among libraries. For targeted services, States may direct library and information services to persons having difficulty using a library, underserved urban and rural communities, and children from low income families. Within the total recommended, \$2,045,000 has been provided for services to Indian tribes.

#### *National leadership projects*

The Committee recommends \$15,455,000 for national leadership projects, an increase of \$10,000,000 above the administration request. These funds support activities of national significance to enhance the quality of library services nationwide and to provide coordination between libraries and museums. Activities are carried out through grants and contracts awarded on a competitive basis to libraries, agencies, institutions of higher education and museums. Priority is given to projects that focus on education and training of library personnel, research and development for the improvement of libraries, preservation, digitization of library materials, partnerships between libraries and museums and other activities that enhance the quality of library services nationwide.

The Committee urges the Director of the Institute of Museum and Library Services to provide \$1,000,000 to conduct a demonstration to provide interactive connections via Internet to the information resources available between universities and their satellite campuses, community colleges and public, school and special libraries, and other entities. The project should also contain a training component so that staff will be able to access and use the new resources provided through these connections. This project would be especially beneficial in rural areas where resources sharing is particularly important. The Montana information consortium including the University of Montana and Montana State University is in the beginning stages of a project such as the one outlined above and would be especially suited to carry out a project in this area.

Within the funds available, the Committee urges the Director to provide \$1,000,000 for a project to digitalize a card catalog. The New York public library is currently undertaking a digitalization project and would be especially suited for this type of project.

The Committee urges the Director to provide funds for a program which will use the resources of libraries and children's museums to provide innovative learning opportunities for at-risk children. Children's museums are a unique community resource which provides a safe learning environment for young children, their parents, teachers, and care givers. These projects provide multidisciplinary cultural programming that integrates the arts and humanities with mathematics and science. These programs are also available to all children, regardless of their ability to pay. The Children's Museums of Philadelphia, Baltimore, and Boston have been operating programs such as the ones described above and the Committee urges the Director to provide \$4,000,000 for such programs.

Within the amount recommend, the Committee has included \$1,130,000 for a project to maintain and interpret a historic medical library collection which could enhance public health information and outreach. The College of Physicians of Philadelphia maintains one of the worlds' leading collections of historic medical reference materials and has developed an innovative public health information outreach program serving health providers and consumers throughout the greater Philadelphia area and would be especially suited to carry out a project such as the one described above.

It has been brought to the Committee's attention that a one-of-a-kind historical library has been established in Pennsylvania's anthracite coal region. The library traces the history of Pennsylvania's northeastern anthracite coal region and contains detailed information regarding miners' compensation and occupational disease records, geological studies, maps, newspaper clips, and more than 8,000 photographs. The Committee urges the Director to provide \$800,000 to assist in the cataloging and preservation of this historic collection.

#### *Administration*

The Committee recommends \$4,090,000 for program administration, the same as the budget request. Funds will be used to continue the transition from two agencies into a single entity. Funds support personnel compensation and benefits, travel, rent, commu-

nications, utilities, printing, equipment and supplies, automated data processing, and other services.

DEPARTMENTAL MANAGEMENT

PROGRAM ADMINISTRATION

Appropriations, 1997 .....	\$326,217,000
Budget estimate, 1998 .....	341,039,000
Committee recommendation .....	338,964,000

The Committee recommends \$338,964,000 for program administration, an increase of \$12,747,000 above the 1997 appropriation and \$2,075,000 below the budget request.

Funds support personnel compensation and benefits, travel, rent, communications, utilities, printing, equipment and supplies, automated data processing, and other services required to award, administer, and monitor some 200 Federal education programs. Support for program evaluation and studies and advisory councils is also provided under this activity.

The Committee is impressed with the important accomplishments reported from the National Institute of Child Health and Human Development [NICHD] research program on reading development and disability, and is eager to have this information brought to the attention of educators, policymakers, and parents. Noting the fact that the Department of Education is already collaborating with NICHD, the Committee directs the Secretary of Education, or his designee, to consult with the Director of NICHD, or his designee, and participate in a national panel convened by NICHD to assess the current status of research-based knowledge, including the effectiveness of various approaches to teaching children to read.

As part of participation in this panel, the Secretary shall assist in recommending a strategy for rapidly disseminating this information to facilitate effective reading instruction in the schools.

The Committee is concerned that the proclamation designating 1.7 million acres in Utah as the Grand Staircase-Escalante National Monument could have a negative impact on schoolchildren in the State. A recent report prepared by the Department of Education, stated that Utah must redirect funds for appraisals, resource studies, and other expenses that would otherwise be available for education expenses. The Department further recommended that the issue be resolved as expeditiously as possible and that the Department of the Interior should work to reduce transactional costs. In light of these recommendations, the Committee urges the Secretary to continue to work with the Department of the Interior to reduce the expense of this land exchange and assist in helping to identify revenue producing activities on State school trust lands within the monument, so that the educational opportunities of Utah's school students will not be negatively affected. The Committee further requests the Secretary to report by May 1, 1998, on the progress being made on this land exchange.

## OFFICE FOR CIVIL RIGHTS

Appropriations, 1997 .....	\$54,900,000
Budget estimate, 1998 .....	61,500,000
Committee recommendation .....	57,522,000

The Committee bill includes \$57,522,000 for the Office for Civil Rights [OCR], \$2,622,000 above the 1997 appropriation and \$3,978,000 below the budget request.

The Office for Civil Rights is responsible for the enforcement of laws that prohibit discrimination on the basis of race, color, national origin, sex, disability, and age in all programs and institutions funded by the Department of Education. To carry out this responsibility, OCR investigates and resolves discrimination complaints, monitors desegregation and equal educational opportunity plans, reviews possible discriminatory practices by recipients of Federal education funds, and provides technical assistance to recipients of funds to help them meet civil rights requirements.

## OFFICE OF THE INSPECTOR GENERAL

Appropriations, 1997 .....	\$29,943,000
Budget estimate, 1998 .....	32,000,000
Committee recommendation .....	32,000,000

The Committee recommends \$32,000,000 for the Office of the Inspector General, \$2,057,000 above the 1997 appropriation and the same as the administration request.

The Office of the Inspector General has the authority to investigate all departmental programs and administrative activities, including those under contract or grant, to prevent and detect fraud and abuse, and to ensure the quality and integrity of those programs. The Office investigates alleged misuse of Federal funds, and conducts audits to determine compliance with laws and regulations, efficiency of operations, and effectiveness in achieving program goals.

## GENERAL PROVISIONS

The Committee bill contains language which has been included in the bill since 1974, prohibiting the use of funds for the transportation of students or teachers in order to overcome racial imbalance.

The Committee bill contains language included in the bill since 1977, prohibiting the transportation of students other than to the school nearest to the student's home.

The Committee bill contains language which has been included in the bill since 1980, prohibiting the use of funds to prevent the implementation of programs of voluntary prayer and meditation in public schools.

The Committee bill includes a provision giving the Secretary of Education authority to transfer up to 1 percent of any discretionary funds between appropriations.

TITLE IV—RELATED AGENCIES

ARMED FORCES RETIREMENT HOME

Appropriations, 1997 .....	\$56,095,000
Budget estimate, 1998 .....	79,977,000
Committee recommendation .....	65,452,000

The Committee recommends authority to expend \$65,452,000 from the Armed Forces Retirement Home trust fund for operation and construction activities at the U.S. Soldiers' and Airmen's Home and the U.S. Naval Home, \$9,357,000 more than the 1997 appropriation and \$14,525,000 less than the budget request.

*Operation and maintenance*

The Committee recommends \$55,452,000 for the operation and maintenance of the Soldiers' and Airmen's Home and the U.S. Naval Home, \$211,000 less than the fiscal year 1997 appropriation and the same as the budget request.

*Capital outlay*

The Committee recommends \$10,000,000 for capital activities at the Soldiers' and Airmen's Home and the U.S. Naval Home, \$9,568,000 more than the 1997 appropriation and \$14,525,000 less than the budget request.

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

DOMESTIC VOLUNTEER SERVICE PROGRAMS

Appropriations, 1997 .....	\$213,849,000
Budget estimate, 1998 .....	260,300,000
Committee recommendation .....	232,604,000

The Committee recommends an appropriation of \$232,604,000 for the domestic volunteer service programs of the Corporation for National and Community Service, \$18,755,000 more than the 1997 appropriation and \$27,696,000 less than the budget request.

*VISTA*

The Committee bill provides \$45,235,000 for the Volunteers in Service to America [VISTA] Program, \$4,000,000 more than the fiscal year 1997 level and \$8,765,000 less than the budget request.

VISTA is a 30-year-old program which provides capacity building for small community-based organizations. VISTA volunteers raise resources for local projects, recruit and organize volunteers, and establish and expand local community-based programs in housing, employment, health, and economic development activities.

*National Senior Volunteer Corps*

The Committee bill provides \$159,240,000 for the National Senior Volunteer Corps programs, \$14,476,000 more than the fiscal year 1997 level and \$17,224,000 less than the budget request.

In allocating funds appropriated to the National Senior Service Corps under the Domestic Volunteer Service Act, the Committee proposes the following distribution. First, for the Foster Grandparent Program and Senior Companion Program, the stipend for volunteers should be increased from \$2.45/hour to \$2.55/hour. Funds should also be provided to pay for the stipend increase for non-CNS volunteers for at least 1 year. Second, existing FGP, SCP, and RSVP programs should receive an increase of 2.5 percent for support costs in order to maintain current service levels and enhance quality. Third, in accordance with the Domestic Volunteer Service Act [DVSA], one-third of the increase over 1997 levels should be used to fund Programs of National Significance grants. Fourth, remaining funds up to the levels provided in the administration's request for each of the three programs should be used to begin new foster grandparent, senior companion or RSVP programs in geographic areas currently unserved. Finally, funds appropriated in excess of the President's request for the three programs (FGP, SCP, and RSVP) should be used for a Senior Demonstration Program as proposed in the President's budget and funded, for the most part, through existing programs.

*Foster Grandparent Program*

The Committee recommends \$85,593,000 for the Foster Grandparent Program, \$7,781,000 more than the 1997 level and \$379,000 less than the budget request.

This program provides volunteer opportunities to seniors age 60 and over who serve at-risk youth. This program involves seniors in their communities and provides a host of services to children.

*Senior Companion Program*

For the Senior Companion Program, the Committee bill includes \$34,368,000, \$3,124,000 more than the 1997 level and \$1,081,000 less than the budget request.

This program enables senior citizens to provide personal assistance and companionship to adults with physical, mental, or emotional difficulties. Senior companions provide vital in-home services to elderly Americans who would otherwise have to enter nursing homes. The volunteers also provide respite care to relieve care givers.

*Retired and Senior Volunteer Program*

The Committee bill provides \$39,279,000 for the Retired and Senior Volunteer Program [RSVP], \$3,571,000 more than the 1997 level and \$5,764,000 less than the budget request.

This program involves persons age 55 and over in volunteer opportunities in their communities.

*Program support*

The Committee bill includes \$28,129,000 for program support, \$279,000 more than the 1997 level and \$1,707,000 less than the budget request.

## CORPORATION FOR PUBLIC BROADCASTING

Appropriations, 1998 .....	\$250,000,000
Appropriations, 1999 .....	250,000,000
Budget estimate, 2000 .....	325,000,000
Committee recommendation .....	300,000,000

The Committee recommends an appropriation of \$300,000,000 for the Corporation for Public Broadcasting [CPB], an advance appropriation for fiscal year 2000. This amount is \$50,000,000 more than the fiscal year 1998 appropriation and \$25,000,000 less than the budget request.

The Committee intends that CPB foster services for unserved or underserved audiences focusing on entities whose primary services are directed at audiences in rural areas and native American audiences. The committee is concerned about the erosion of grants for radio stations serving these communities.

The Committee recognizes that stations serving rural and underserved audiences have limited local potential for fundraising because of sparse populations serviced, limited number of local businesses, and low-income level. In rural areas, while many stations receive per capita local support far greater than that contributed in urban areas, they receive relatively few matching dollars because the populations served are small.

The Committee directs CPB to explore new methodologies for distribution of Federal matching dollars which take into account measures such as per capita support and other factors that would serve to level the playing field between urban and rural stations in the distribution of matching funds.

## FEDERAL MEDIATION AND CONCILIATION SERVICE

Appropriations, 1997 .....	\$32,525,000
Budget estimate, 1998 .....	33,481,000
Committee recommendation .....	33,481,000

The Committee recommends an appropriation of \$33,481,000 for the Federal Mediation and Conciliation Service [FMCS], \$956,000 more than the 1997 appropriation and the same as the budget request.

The FMCS was established by Congress in 1947 to provide mediation, conciliation, and arbitration services to labor and management. FMCS is authorized to provide dispute resolution consultation and training to all Federal agencies.

## FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

Appropriations, 1997 .....	\$6,049,000
Budget estimate, 1998 .....	6,060,000
Committee recommendation .....	6,060,000

The Committee recommends an appropriation of \$6,060,000 for the Federal Mine Safety and Health Review Commission, \$11,000

more than the fiscal year 1997 appropriation and the same as the budget request.

The Federal Mine Safety and Health Review Commission provides administrative trial and appellate review of legal disputes under the Federal Mine Safety and Health Act of 1977. The five-member Commission provides administrative appellate review of the Commission's administrative law judge decisions.

#### NATIONAL COMMISSION ON LIBRARIES AND INFORMATION SCIENCE

Appropriations, 1997 .....	\$897,000
Budget estimate, 1998 .....	1,123,000
Committee recommendation .....	1,000,000

The Committee recommends an appropriation of \$1,000,000 for the National Commission on Libraries and Information Science, \$103,000 more than the fiscal year 1997 appropriation and \$123,000 less than the budget request.

The Commission determines the need for, and makes recommendations on, library and information services, and advises the President and Congress on the development and implementation of national policy in the library and information field.

#### NATIONAL COUNCIL ON DISABILITY

Appropriations, 1997 .....	\$1,791,000
Budget estimate, 1998 .....	1,793,000
Committee recommendation .....	1,793,000

The Committee recommends an appropriation of \$1,793,000 for the National Council on Disability, \$2,000 more than the fiscal year 1997 appropriation and the same as the budget request.

The Council is mandated to make recommendations to the President, the Congress, the Rehabilitation Services Administration, and the National Institute on Disability and Rehabilitation Research, on the public issues of concern to individuals with disabilities. The Council gathers information on the implementation, effectiveness, and impact of the Americans With Disabilities Act and looks at emerging policy issues as they affect persons with disabilities and their ability to enter or reenter the Nation's work force and to live independently.

#### NATIONAL EDUCATION GOALS PANEL

Appropriations, 1997 .....	\$1,495,000
Budget estimate, 1998 .....	2,000,000
Committee recommendation .....	2,000,000

The Committee recommends \$2,000,000 for the national education goals panel, \$505,000 more than the 1997 appropriation and the same as the budget request.

Following the 1989 education summit in Charlottesville, the Governors and President Bush agreed on education goals for the Nation and created the National Education Goals Panel as an accountability mechanism to monitor and report on the Nation's progress toward reaching the goals. To date, the goals panel has issued four annual reports delineating National and State progress toward the national education goals.

## NATIONAL LABOR RELATIONS BOARD

Appropriations, 1997 .....	\$174,661,000
Budget estimate, 1998 .....	186,434,000
Committee recommendation .....	174,661,000

The Committee recommends an appropriation of \$174,661,000 for the National Labor Relations Board [NLRB], the same as the fiscal year 1997 appropriation and \$11,773,000 less than the budget request.

The NLRB is a law enforcement agency which adjudicates disputes under the National Labor Relations Act.

The Committee remains concerned about the potential impact of the NLRB-proposed rule regarding the appropriateness of single bargaining units, and includes language which prohibits the NLRB from promulgating a final rule on the appropriateness of requested single location bargaining units in representation cases.

## NATIONAL MEDIATION BOARD

Appropriations, 1997 .....	\$8,284,000
Budget estimate, 1998 .....	8,100,000
Committee recommendation .....	8,600,000

The Committee recommends an appropriation of \$8,600,000 for the National Mediation Board, \$316,000 more than the fiscal year 1997 appropriation and \$500,000 more than the budget request.

The National Mediation Board protects interstate commerce as it mediates labor-management relations in the railroad and airline industries under the Railway Labor Act. The Board mediates collective bargaining disputes, determines the choice of employee bargaining representatives through elections, and administers arbitration of employee grievances.

## OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

Appropriations, 1997 .....	\$7,738,000
Budget estimate, 1998 .....	7,800,000
Committee recommendation .....	7,800,000

The Committee recommends an appropriation of \$7,800,000 for the Occupational Safety and Health Review Commission, \$62,000 more than the fiscal year 1997 appropriation and the same as the budget request.

The Commission serves as a court to justly and expeditiously resolve disputes between the Occupational Safety and Health Administration [OSHA] and employers charged with violations of health and safety standards enforced by OSHA.

## PHYSICIAN PAYMENT REVIEW COMMISSION

Appropriations, 1997 .....	\$3,258,000
Budget estimate, 1998 .....	3,578,000
Committee recommendation .....	3,258,000

The Committee recommends the transfer of \$3,258,000 from the Medicare trust funds to support operations of the Physician Payment Review Commission, the same as the fiscal year 1997 level and \$320,000 less than the budget request.

Established in 1986, the Physician Payment Review Commission is mandated to make recommendations to the Secretary of Health and Human Services and Congress, regarding Medicare payments for health services provided by physicians and other practitioners. The Commission is also mandated to consider policies related to controlling health costs.

#### PROSPECTIVE PAYMENT ASSESSMENT COMMISSION

Appropriations, 1997 .....	\$3,257,000
Budget estimate, 1998 .....	3,579,000
Committee recommendation .....	3,257,000

The Committee recommends the transfer of \$3,257,000 from the Medicare trust funds for the operation of the Prospective Payment Assessment Commission [ProPAC], the same as the fiscal year 1997 level and \$322,000 less than the budget request.

ProPAC provides objective analysis of the Medicare hospital prospective payment system, Medicare inpatient and outpatient payments to hospitals and excluded facilities, skilled nursing facilities, renal disease services, home health services, inpatient Medicaid payments, and Medicare's managed-care programs.

#### RAILROAD RETIREMENT BOARD

##### DUAL BENEFITS PAYMENTS ACCOUNT

Appropriations, 1997 .....	\$223,000,000
Budget estimate, 1998 .....	206,000,000
Committee recommendation .....	206,000,000

The Committee has provided a total of \$206,000,000 for dual benefits, including \$12,000,000 in income tax receipts on dual benefits as authorized by law. The Committee recommendation is the same as the budget request.

This appropriation provides for vested dual benefit payments authorized by the Railroad Retirement Act of 1974, as amended by the Omnibus Reconciliation Act of 1981. This separate account, established for the payment of dual benefits, is funded by general fund appropriations and income tax receipts of vested dual benefits.

##### FEDERAL PAYMENTS TO THE RAILROAD RETIREMENT ACCOUNT

Appropriations, 1997 .....	\$300,000
Budget estimate, 1998 .....	50,000
Committee recommendation .....	50,000

The Committee recommends \$50,000 for interest earned on unnegotiated checks. This is \$250,000 less than the fiscal year 1997 appropriation and the same as the budget request.

##### LIMITATION ON ADMINISTRATION

Appropriations, 1997 .....	\$87,728,000
Budget estimate, 1998 .....	88,800,000
Committee recommendation .....	87,728,000

The Committee recommends an appropriation of \$87,728,000 for the administration of railroad retirement/survivor benefit pro-

grams. This amount is the same as the fiscal year 1997 appropriation, and \$1,072,000 below the budget request.

The Board administers comprehensive retirement-survivor and unemployment-sickness insurance benefit programs for the Nation's railroad workers and their families. This account limits the amount of funds in the railroad retirement and railroad unemployment insurance trust funds which may be used by the Board for administrative expenses.

#### LIMITATION ON THE OFFICE OF THE INSPECTOR GENERAL

Appropriations, 1997 .....	\$5,394,000
Budget estimate, 1998 .....	5,400,000
Committee recommendation .....	5,394,000

The Committee recommends \$5,394,000 for the Office of the Inspector General, the same as the 1997 appropriation and \$6,000 less than the budget request.

#### U.S. INSTITUTE OF PEACE

Appropriations, 1997 .....	\$11,149,000
Budget estimate, 1998 .....	11,160,000
Committee recommendation .....	11,160,000

The Committee recommends an appropriation of \$11,160,000 for the U.S. Institute of Peace, \$11,000 more than the fiscal year 1997 appropriation and the same as the budget request.

The Institute was established by the U.S. Institute of Peace Act (Public Law 98-525) in 1984. The Institute is an independent, non-profit, national organization whose primary mission is to promote, through scholarship and education, international peace, and the resolution of conflicts without recourse to violence.

#### SOCIAL SECURITY ADMINISTRATION

##### PAYMENTS TO SOCIAL SECURITY TRUST FUNDS

Appropriations, 1997 .....	\$30,923,000
Budget estimate, 1998 .....	20,308,000
Committee recommendation .....	20,308,000

The Committee recommends \$20,308,000 for payments to Social Security trust funds, the same as the administration request. This amount reimburses the old age and survivors insurance and disability insurance trust funds for special payments to certain uninsured persons, costs incurred administering pension reform activities, and the value of the interest for benefit checks issued but not negotiated. This appropriation restores the trust funds to the same financial position they would have been in had they not borne these costs, properly charged to the general funds. The fiscal year 1998 request for these mandatory payments decreases primarily because special payments for certain uninsured persons decline due to a declining beneficiary population.

As requested by the administration, the Committee has not included additional funds to reimburse the trust funds for costs the Social Security Administration incurs in continuing mandatory administrative activities required by the Coal Industry Retiree Health Benefits Program, as provided for by section 19141 of the

Energy Policy Act of 1992, The fiscal year 1997 appropriations act codified the reimbursement for this activity and made \$10,000,000 available until expended.

#### SPECIAL BENEFITS FOR COAL MINERS

Appropriations, 1997 .....	\$460,070,000
Budget estimate, 1998 .....	426,090,000
Committee recommendation .....	426,090,000

The Committee recommends an appropriation of \$426,090,000 for special benefits for disabled coal miners. This is in addition to the \$160,000,000 appropriated last year as an advance for the first quarter of fiscal year 1997. The recommendation is the same as the administration request. These funds are used to provide monthly benefits to coal miners disabled by black lung disease and to their widows and certain other dependents, as well as to pay-related administrative costs.

Social Security holds primary responsibility for claims filed before July 1973, with the Department of Labor responsible for claims filed after that date. By law, increases in black lung benefit levels are tied directly to Federal pay increases. The year-to-year decrease in this account reflects a declining beneficiary population.

The Committee recommends an advance of \$160,000,000 for the first quarter of fiscal year 1999, the same as the administration request. These funds will ensure uninterrupted benefit payments to coal miners, their widows, and dependents.

#### SUPPLEMENTAL SECURITY INCOME

Appropriations, 1997 .....	\$19,547,010,000
Budget estimate, 1998 .....	16,345,000,000
Committee recommendation .....	16,335,300,000

The Committee recommends an appropriation of \$16,335,300,000 for supplemental security income. This is in addition to the \$9,690,000,000 appropriated last year as an advance for the first quarter of fiscal year 1998 and includes funds for continuing disability reviews. The recommendation is \$9,700,000 less than the administration request and \$3,211,710,000 less than the fiscal year 1997 level. The Committee also recommends an advance of \$8,680,000,000 for the first quarter of fiscal year 1998 to ensure uninterrupted benefit payments.

These funds are used to pay benefits under the SSI Program, which was established to ensure a Federal minimum monthly benefit for aged, blind, and disabled individuals, enabling them to meet basic needs. It is estimated that approximately 5.8 million persons will receive SSI benefits each month during fiscal year 1998. In many cases, SSI benefits supplement income from other sources, including Social Security benefits. The funds are also used to reimburse the trust funds for the administrative costs for the program with a final settlement by the end of the subsequent fiscal year required by law.

#### *Beneficiary services*

The Committee recommendation includes \$46,000,000 for beneficiary services, which is the same as the administration request and \$54,000,000 below the 1997 level. This amount is available for

reimbursement of State vocational rehabilitation services agencies for successful rehabilitation of disabled SSI recipients.

Enactment of Public Law 104-121 halted SSI payments beginning January 1, 1997, to drug addicts and alcoholics who previously qualified for assistance primarily on the basis of their addictions. It is anticipated that significant numbers deemed ineligible for assistance will reapply to the program on the basis of other qualifying conditions. Last year, the Committee provided \$59,000,000 for drug addict and alcoholic [DA&A] monitoring. This year referral and monitoring activities [RMA] ended with the statutory removal of DA&A as an eligibility category for benefits, and RMA contracts were terminated at the end of December 1996. The administration did not request funding for this activity in fiscal year 1998. Closeout costs for RMA contracts which ended will be paid out of funds currently available for this activity. Unobligated funds available at the end of fiscal year 1997 will be carried over to fiscal year 1998 and used for benefit payments in fiscal year 1998.

#### *Research and demonstration projects*

The Committee recommendation includes \$7,000,000 for research and demonstration projects conducted under sections 1110 and 1115 of the Social Security Act. This is \$9,700,000 less than the administration request and the same as the 1997 amount. This amount, along with an estimated \$10,700,000 unobligated carry-over funds from previous fiscal years, will support research into underlying causes of the recent growth in the SSI and OASDI disability programs, research into return-to-work activities, and activities strengthening program effectiveness and training.

#### *Administration*

For administration services related to SSI activities, the Committee provides \$2,037,000,000, which is \$90,985,000 above the fiscal year 1997 level and the same as the administration request. This includes funds for the SSI disability initiative that was previously funded as a separate line item.

#### *Investment proposals*

For the SSI portion of the automation investment, the Committee recommends \$50,000,000, which is the same as the administration request and \$30,105,000 higher than the fiscal year 1997 appropriation. Total funding of \$200,000,000 for this initiative is explained in the limitation on administrative expenses portion of this report.

#### *Continuing disability reviews*

The bill provides \$175,000,000 to process continuing disability reviews [CDR's] related to the SSI caseload as authorized by Public Law 104-121 and supplemental security income administrative work as authorized by Public Law 104-193, the same as the comparable 1997 appropriation.

## LIMITATION ON ADMINISTRATIVE EXPENSES

Appropriations, 1997 .....	\$6,406,577,000
Budget estimate, 1998 .....	6,521,040,000
Committee recommendation .....	6,417,708,000

The Committee recommends a program funding level of \$6,417,708,000 for the limitation on administrative expenses, which is \$103,332,000 less than the administration request and \$11,131,000 higher than the fiscal year 1997 level.

This account provides resources from the Social Security trust funds to administer the Social Security retirement and survivors and disability insurance programs, and certain Social Security health insurance functions. As authorized by law, it also provides resources from the trust funds for certain nontrust fund administrative costs, which are reimbursed from the general funds. These include administration of the supplemental security income program for the aged, blind, and disabled; work associated with the Pension Reform Act of 1984; and the portion of the annual wage reporting work done by the Social Security Administration for the benefit of the Internal Revenue Service. The dollars provided also support automated data processing activities and fund the State disability determination services which make disability determinations on behalf of the Social Security Administration. Additionally, the limitation provides funding for computer support, resources for State disability agencies which make initial and continuing disability determinations, and other administrative costs. In 1998, about 50.6 million beneficiaries will receive a Social Security or supplemental security income check each month and cash payments are expected to exceed \$402,000,000,000 during fiscal year 1998.

The limitation includes \$5,972,708,000 for routine operating expenses of the agency, which is \$58,332,000 less than the amount requested by the President and \$111,026,000 over the 1997 comparable amount. These funds, including those derived from an increase in the user fee, cover the mandatory costs of maintaining equipment and facilities, as well as staffing.

The Committee understands the Social Security Administration has under consideration the closing of the Social Security field office in Statesville, NC. The Committee is aware of the recommendation of the North Carolina Social Security Administration's State Director and encourages the agency to maintain a physical presence in the Statesville office for a minimum of 2 days a week for the purpose of online claims-taking ability.

*User fees*

The administration proposed a law change to enable an increase in the current user fee for Federal administration of State supplementation SSI payments effective in fiscal year 1998. The increase would be \$1.20 above the current fee of \$5 per payment. The additional revenue generated by this fee, expected to be \$35,000,000, is intended to increase work capacity in SSA's field offices. The Committee includes bill language that would enact this proposal. Any additional fees above this amount would be available in fiscal year 1999 only to the extent provided in appropriations acts.

*Social Security Advisory Board*

The Committee has included \$1,268,000 within the total limitation on administration for the Social Security Administration Advisory Board for fiscal year 1998, which is \$332,000 below the President's request. Public Law 103-296, the Social Security Independence and Program Improvements Act of 1994, as amended, established a seven-member Advisory Board, each of whom would serve without salary, that would make recommendations on policies and regulations regarding Social Security and supplemental security income programs.

*Automation initiative*

An additional \$200,000,000 has been included within the limitation amount to fund the fifth and last year of the 5-year automation initiative requested by the President. This is a decrease of \$34,895,000 from fiscal year 1997 and is the same as the administration request. In addition to this amount, the Committee expects that unspent carryover funds will be made available for these activities in fiscal year 1998. Since funding of the automation investment fund began in fiscal year 1994, \$910,000,000 in budgetary resources will have been committed to this effort, compared to the \$1,125,000,000 originally requested.

*Chronic fatigue and immune dysfunction syndrome*

The Committee is concerned about reports from people with chronic fatigue and immune dysfunction syndrome [CFIDS] who encounter at their local SSA offices a lack of knowledge about CFIDS, its diagnosis, and impact on the functional ability of sufferers. The Committee requests a summary to the CFSICC of SSA's CFIDS-related education activities conducted during the past fiscal year. The Committee further urges SSA to develop effective means to investigate obstacles to benefits for persons with CFIDS and to keep relevant medical information updated throughout the application process. The Committee reiterates its previous recommendation for the establishment of a CFIDS advisory committee, and expects SSA's cooperation in expediting the committee's formation.

*Continuing disability reviews*

The Committee has provided an additional \$245,000,000 to the "Limitation on administration expenses" account for continuing disability reviews [CDR's] and redeterminations. This amount is based on current authorized levels from Public Laws 104-121 and 104-193, is \$45,000,000 below the administration request. The Committee is aware of pending legislation that may increase the authorized level, and anticipates that such an upward adjustment would be made in the conference with the House.

## OFFICE OF THE INSPECTOR GENERAL

Appropriations, 1997 .....	\$37,354,000
Budget estimate, 1998 .....	44,424,000
Committee recommendation .....	37,354,000

The Committee recommends \$37,354,000 for activities of the Office of the Inspector General. This is \$7,070,000 below the amount

requested by the administration. This includes a general fund appropriation of \$6,265,000 together with an obligation limitation of \$31,089,000 from the Federal old age and survivors insurance trust fund and the Federal disability insurance trust fund.

## TITLE V—GENERAL PROVISIONS

The Committee recommendation retains provisions which: authorize transfers of unexpended balances (sec. 501); limit funding to 1 year availability unless otherwise specified (sec. 502); limit lobbying and related activities, amended to cover State legislatures (sec. 503); limit official representation expenses (sec. 504); prohibit funding of any program to carry out distribution of sterile needles for the hypodermic injection of any illegal drug unless the Secretary of HHS determines such programs are effective in preventing the spread of HIV and do not encourage the use of illegal drugs (sec. 505); state the sense of Congress about purchase of American-made equipment and products (sec. 506); clarify Federal funding as a component of State and local grant funds, amended to cover only funds included in this act (sec. 507); and limit use of funds for abortion (sec. 508).

The Committee recommendation also retains provisions carried in last year's bill relating to transfer authority, obligation and expenditure of appropriations, and detail of employees (sec. 509).

The Committee recommendation retains a general provision which prohibits funds made available in this act to be used to enforce the requirements of the Higher Education Act of 1965 with respect to any lender that has a loan portfolio that is equal to or less than \$5,000,000 (sec. 510). It also retains modified language on human embryo research (sec. 511).

The Committee recommendation retains the limitation on use of funds for promotion of legalization of controlled substances included last year (sec. 512).

The Committee recommendation retains the bill language limitation on use of funds to enter into or review contracts with entities subject to the requirement in section 4212(d) of title 38, United States Code, if the report required by that section has not been submitted (sec. 513).

The Committee recommendation includes a new provision to permit the Social Security Administration to collect a user fee for Federal administration of State supplementary payments under the Supplemental Security Income Program (sec. 514).

The Committee recommendation also includes a new provision with regard to buy out authority for the Railroad Retirement Board (sec. 515).

The Committee recommendation retains a proviso included last year which reduces agency administrative expenses by \$30,500,000 (sec. 516).

BUDGETARY IMPACT OF BILL

PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

	Budget authority		Outlays	
	Committee allocation	Amount of bill	Committee allocation	Amount of bill
Comparison of amounts in the bill with Committee allocations to its subcommittees of amounts in the First Concurrent Resolution for 1998: Subcommittee on Labor, Health and Human Services, Education, and Related Agencies:				
Defense discretionary .....				
Nondefense discretionary .....	79,197	79,558	75,779	<sup>1</sup> 75,926
Violent crime reduction fund .....	144	144	65	65
Mandatory .....	206,611	206,611	209,167	209,167
Projections of outlays associated with the recommendation:				
1998 .....				<sup>2</sup> 188,641
1999 .....				40,547
2000 .....				10,206
2001 .....				1,249
2002 and future year .....				80
Financial assistance to State and local governments for 1998 in bill .....	NA	115,640	NA	89,510

<sup>1</sup> Includes outlays from prior-year budget authority.

<sup>2</sup> Excludes outlays from prior-year budget authority.

NA: Not applicable.

Note.—Consistent with the funding recommended in the bill for continuing disability reviews and in accordance with Public Laws 104-124 and 104-193, the Committee anticipates that the Budget Committee will file a revised section 602(a) allocation for the Committee on Appropriations reflecting an upward adjustment of \$245,000,000 in budget authority and associated outlays.

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee report on general appropriations bills identify each Committee amendment to the House bill “which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session.”

The following items are identified pursuant to this requirement:

Community service employment for older Americans, \$453,000,000;

Consolidated health centers, \$826,000,000;

Health professions, \$220,000,000;

Organ transplantation, \$2,778,000;  
 Health teaching facilities interest subsidies, \$225,000;  
 Bone Marrow Donor Registry Program, \$15,270,000;  
 Alzheimer's demonstration grants, \$5,999,000;  
 Family planning, \$208,452,000;  
 Health education assistance loan [HEAL] loan limitation,  
 \$85,000,000;  
 Vaccine Injury Compensation Program HRSA Administra-  
 tion (trust fund), \$45,448,000;  
 Centers for Disease Control and Prevention, \$2,368,113,000;  
 Childhood immunization, \$445,545,000;  
 Sexually transmitted diseases, \$111,171,000;  
 Substance Abuse and Mental Health Services Administra-  
 tion, \$2,126,643,000;  
 Agency for Health Care Policy and Research, \$142,587,000;  
 Runaway and Homeless Youth Consolidated Program,  
 \$58,602,000;  
 Child abuse State grants, \$21,026,000;  
 Child abuse discretionary activities, \$14,154,000;  
 Abandoned infants assistance, \$12,251,000;  
 Adoption opportunities, \$13,000,000;  
 Native American programs, \$34,933,000;  
 Adolescent family life, \$19,209,000;  
 Office of Minority Health, \$23,600,000;  
 Armed Forces Retirement Home, \$65,452,000;  
 Corporation for National and Community Service,  
 \$228,604,000;  
 Corporation for Public Broadcasting, \$300,000,000.

COMPLIANCE WITH PARAGRAPH 7(C), RULE XXVI OF THE  
STANDING RULES OF THE SENATE

Pursuant to paragraph 7(c) of rule XXVI, the accompanying bill was ordered reported from the Committee, subject to amendment and subject to appropriate scorekeeping, by recorded vote of 28-0 a quorum being present.

The vote was as follows:

Yeas	Nays
Chairman Stevens	
Mr. Cochran	
Mr. Specter	
Mr. Domenici	
Mr. Bond	
Mr. Gorton	
Mr. McConnell	
Mr. Burns	
Mr. Shelby	
Mr. Gregg	
Mr. Bennett	
Mr. Campbell	
Mr. Craig	
Mr. Faircloth	
Mrs. Hutchison	
Mr. Byrd	

Mr. Inouye  
 Mr. Hollings  
 Mr. Leahy  
 Mr. Bumpers  
 Mr. Lautenberg  
 Mr. Harkin  
 Ms. Mikulski  
 Mr. Reid  
 Mr. Kohl  
 Mrs. Murray  
 Mr. Dorgan  
 Mrs. Boxer

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE  
 STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or a joint resolution repealing or amending any statute include “(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form recommended by the committee.”

In compliance with this rule, the following changes in existing law proposed to be made by the bill are shown as follows: existing law to be omitted is enclosed in black brackets; new matter is printed in italic; and existing law in which no change is proposed is shown in roman.

**TITLE 42—THE PUBLIC HEALTH AND WELFARE**

\* \* \* \* \*

**CHAPTER 7—SOCIAL SECURITY**

\* \* \* \* \*

**SUBCHAPTER XVI—SUPPLEMENTAL SECURITY INCOME  
 FOR AGED, BLIND, AND DISABLED**

\* \* \* \* \*

**PART A—DETERMINATION OF BENEFITS**

\* \* \* \* \*

**§ 1382. Eligibility for benefits**

(a) \* \* \*

\* \* \* \* \*

MANDATORY MINIMUM STATE SUPPLEMENTATION OF SUPPLEMENTAL SECURITY INCOME BENEFITS PROGRAM; DECEMBER 1973 INCOME; TITLE XVI BENEFIT PLUS OTHER INCOME; REDUCTION OF AMOUNT; ADMINISTRATION AGREEMENT; PAYMENTS TO SECRETARY; STATE CONSTITUTIONAL RESTRICTION

Section 212 of Pub. L. 93-66, as amended by Pub. L. 93-233, Sec. 10, Dec. 31, 1973, 87 Stat. 957; Pub. L. 93-335, Sec. 2(a), July 8, 1974, 88 Stat. 291; Pub. L. 96-265, title II, Sec. 201(b)(2), June 9, 1980, 94 Stat. 446; Pub. L. 103-66, title XIII, Sec. 13731(a)(2), Aug. 10, 1993, 107 Stat. 661, provided that:

“(a)(1) \* \* \*

\* \* \* \* \*

“(b)(1) \* \* \*

\* \* \* \* \*

“(3)(A) \* \* \*

\* \* \* \* \*

“(B)(i) The Secretary shall assess each State an administration fee in an amount equal to—

“(I) the number of supplementary payments made by the Secretary on behalf of the State under this subsection for any month in a fiscal year; multiplied by

“(II) the applicable rate for the fiscal year.

“(ii) As used in clause (i), the term ‘applicable rate’ means—

“(I) for fiscal year 1994, \$1.67;

“(II) for fiscal year 1995, \$3.33;

“(III) for fiscal year 1996, \$5.00; [and]

“(IV) for fiscal year 1997 and each succeeding fiscal year, \$5.00, or such different rate as the Secretary determines is appropriate for the State, taking into account the complexity of administering the State’s supplementary payment program.]

“(V) for fiscal year 1997, \$5.00;

“(VI) for fiscal year 1998, \$6.20;

“(VII) for fiscal year 1999, \$7.60;

“(VIII) for fiscal year 2000, \$7.80;

“(IX) for fiscal year 2001, \$8.10;

“(X) for fiscal year 2002, \$8.50; and

“(X) for fiscal year 2003 and each succeeding fiscal year—

“(aa) the applicable rate in the preceding fiscal year, increased by the percentage, if any, by which the Consumer Price Index for the month of June of the calendar year of the increase exceeds the Consumer Price Index for the month of June of the calendar year preceding the calendar year of the increase, and rounded to the nearest whole cent;

or

“(bb) such different rate as the Commissioner determines is appropriate for the State.”

“(iii) Upon making a determination under clause [(ii)(IV)] (ii)(X)(bb), the Secretary shall promulgate the determination in reg-

ulations, which may take into account the complexity of administering the State’s supplementary payment program.

\* \* \* \* \*

[(D) All administration fees and additional services fees collected pursuant to this paragraph shall be deposited in the general fund of the Treasury of the United States as miscellaneous receipts.]

*“(D)(i) The first \$5 of each administration fee assessed pursuant to subparagraph (B), upon collection, shall be deposited in the general fund of the Treasury of the United States as miscellaneous receipts.*

*“(ii) The portion of each administration fee in excess of \$5, and 100 percent of each additional services fee charged pursuant to subparagraph (C), upon collection for fiscal year 1998 and each subsequent fiscal year, shall be credited to a special fund established in the Treasury of the United States for State supplementary payment fees. The amounts so credited, to the extent and in the amounts provided in advance in appropriations Acts, shall be available to defray expenses incurred in carrying out this section and title XVI of the Social Security Act and related laws.”*

\* \* \* \* \*

**§ 1382e. Supplementary assistance by State or subdivision to needy individuals**

(a) \* \* \*

\* \* \* \* \*

**(d) Payment to Commissioner by State of amount equal to expenditures by Commissioner as supplementary payments; time and manner of payment by State; fees for Federal administration of State supplementary payments**

(1) \* \* \*

(2)(A) \* \* \*

\* \* \* \* \*

(B) As used in subparagraph (A), the term “applicable rate” means—

(i) for fiscal year 1994, \$1.67;

(ii) for fiscal year 1995, \$3.33;

(iii) for fiscal year 1996, \$5.00; [and]

[(iv) for fiscal year 1997 and each succeeding fiscal year, \$5.00, or such different rate as the Commissioner of Social Security determines is appropriate for the State.]

(iv) for fiscal year 1997, \$5.00;

(v) for fiscal year 1998, \$6.20;

(vi) for fiscal year 1999, \$7.60;

(vii) for fiscal year 2000, \$7.80;

(viii) for fiscal year 2001, \$8.10;

(ix) for fiscal year 2002, \$8.50; and

(x) for fiscal year 2003 and each succeeding fiscal year—

*(I) the applicable rate in the preceding fiscal year, increased by the percentage, if any, by which the Consumer Price Index for the month of June of the calendar year of the increase exceeds the Consumer Price Index for the month of June of the calendar year preceding the calendar year of the increase, and rounded to the nearest whole cent; or*

*(II) such different rate as the Commissioner determines is appropriate for the State.*

(C) Upon making a determination under subparagraph [(B)(iv)] (B)(x)(II), the Commissioner of Social Security shall promulgate the determination in regulations, which may take into account the complexity of administering the State's supplementary payment program.

\* \* \* \* \*

[(4) All administration fees and additional services fees collected pursuant to this subsection shall be deposited in the general fund of the Treasury of the United States as miscellaneous receipts.]

*(4)(A) The first \$5 of each administration fee assessed pursuant to paragraph (2), upon collection, shall be deposited in the general fund of the Treasury of the United States as miscellaneous receipts.*

*(B) That portion of each administration fee in excess of \$5, and 100 percent of each additional services fee charged pursuant to paragraph (3), upon collection for fiscal year 1998 and each subsequent fiscal year, shall be credited to a special fund established in the Treasury of the United States for State supplementary payment fees. The amounts so credited, to the extent and in the amounts provided in advance in appropriations Acts, shall be available to defray expenses incurred in carrying out this title and related laws.*

#### DEFINITION OF PROGRAM, PROJECT, AND ACTIVITY

During fiscal year 1998 for purposes of the Balanced Budget and Emergency Deficit Control Act of 1985 (Public Law 99-177), as amended, the following information provides the definition of the term "program, project, and activity" for departments and agencies under the jurisdiction of the Labor, Health and Human Services, and Education and Related Agencies Subcommittee. For the purposes of this bill, or funding under a continuing resolution in lieu of a regular bill, the term "program, project, and activity" shall include the most specific level of budget items identified in the Departments of Labor, Health and Human Services, and Education and Related Agencies Appropriations Act 1998, the accompanying House and Senate Committee reports, the conference report and accompanying joint explanatory statement of the managers of the committee of conference. In the event of funding under a formula-based continuing resolution, agencies should fund each project or activity according to the formula, and if this process results in a funding level above what the account total would be if the formula were applied to it alone, an across-the-board reduction in each project or activity in the account would be required to bring the account total within the formula.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1998

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
TITLE I—DEPARTMENT OF LABOR					
EMPLOYMENT AND TRAINING ADMINISTRATION					
TRAINING AND EMPLOYMENT SERVICES <sup>1</sup>					
Grants to States:					
Adult training .....	895,000	1,063,990	955,000	+60,000	-108,990
Youth training .....	126,672	129,965	129,965	+3,293	.....
Summer youth employment and training program <sup>2</sup> .....	871,000	871,000	871,000	.....	.....
Dislocated worker assistance .....	1,286,200	1,350,510	1,350,510	+64,310	.....
Federally administered programs:					
Native Americans .....	52,502	52,502	55,127	+2,625	+2,625
Migrants and seasonal farmworkers .....	69,285	69,285	72,749	+3,464	+3,464
Job Corps:					
Operations .....	1,064,824	1,127,726	1,127,726	+62,902	.....
Construction and renovation <sup>3</sup> .....	88,685	118,491	118,491	+29,806	.....
Subtotal, Job Corps .....	1,153,509	1,246,217	1,246,217	+92,708	.....
Veterans' employment .....	7,300	7,300	7,300	.....	.....
National activities:					
Pilots and demonstrations .....	27,140	23,717	83,000	+55,860	+59,283
Research, demonstration and evaluation .....	6,196	10,196	8,196	+2,000	-2,000
Opportunity areas for youth .....	.....	250,000	.....	.....	-250,000
Opportunity areas for youth advance .....	.....	.....	250,000	+250,000	+250,000
Other .....	13,489	10,489	16,489	+3,000	+6,000

Subtotal, National activities .....	46,825	294,402	357,685	+ 310,860	+ 63,283
Subtotal, Federal activities .....	1,329,421	1,669,706	1,739,078	+ 409,657	+ 69,372
Total, Job Training Partnership Act .....	4,508,293	5,085,171	5,045,553	+ 537,260	- 39,618
Women in apprenticeship <sup>2</sup> .....	610	647	3,000	+ 2,390	+ 2,353
Skills Standards .....	7,000	7,000	9,000	+ 2,000	+ 2,000
Total, National activities, TES (non-add) .....	(54,435)	(302,049)	(369,685)	(+ 315,250)	(+ 67,636)
School-to-work <sup>4</sup> .....	200,000	200,000	200,000	.....	.....
Homeless veterans <sup>2</sup> .....	.....	2,500	2,500	+ 2,500	.....
Total, Training and Employment Services .....	4,715,903	5,295,318	5,260,053	+ 544,150	- 35,265
Subtotal, forward funded .....	(3,844,293)	(4,421,171)	(4,133,553)	(+ 289,260)	(- 287,618)
COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS .....	463,000	440,200	453,000	- 10,000	+ 12,800
FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES .....	.....	.....	.....	.....	.....
Trade adjustment .....	276,100	304,700	304,700	+ 28,600	.....
NAFTA activities .....	48,400	44,300	44,300	- 4,100	.....
Total .....	324,500	349,000	349,000	+ 24,500	.....
STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS .....	.....	.....	.....	.....	.....
Unemployment Compensation (Trust Funds): .....	.....	.....	.....	.....	.....
State Operations .....	(2,115,125)	(2,204,125)	(2,115,125)	.....	(- 89,000)
National Activities .....	(10,000)	(10,000)	(10,000)	.....	.....
Year 2000 computer conversion .....	(200,000)	(200,000)	(150,000)	(+ 150,000)	(- 50,000)
Contingency .....	(216,333)	(216,333)	(216,333)	.....	.....
Subtotal, Unemployment Comp (trust funds) .....	(2,341,458)	(2,630,458)	(2,491,458)	(+ 150,000)	(- 139,000)
Employment Service: .....	.....	.....	.....	.....	.....
Allotments to States: .....	.....	.....	.....	.....	.....
Federal funds .....	23,452	23,452	23,452	.....	.....
Trust funds .....	(738,283)	(738,283)	(738,283)	.....	.....

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Subtotal .....	761,735	761,735	761,735		
National Activities: Trust funds <sup>5</sup> .....	(62,735)	(62,735)	(62,735)		
Subtotal, Employment Service .....	824,470	824,470	824,470		
Federal funds .....	23,452	23,452	23,452		
Trust funds .....	(801,018)	(801,018)	(801,018)		
One-stop Career Centers .....	150,000	150,000	150,000		
Total, State Unemployment .....	3,315,928	3,604,928	3,465,928	+ 150,000	- 139,000
Federal Funds .....	173,452	173,452	173,452		
Trust Funds .....	(3,142,476)	(3,431,476)	(3,292,476)	(+ 150,000)	(- 139,000)
ADVANCES TO UNEMPLOYMENT TRUST FUND and OTHER FUNDS <sup>6</sup> .....	373,000	392,000	392,000	+ 19,000	
PROGRAM ADMINISTRATION					
Adult employment and training .....	25,842	26,486	26,100	+ 258	- 386
Trust funds .....	(2,237)	(2,331)	(2,259)	(+ 22)	(- 72)
Youth employment and training .....	29,607	31,871	29,903	+ 296	- 1,968
Employment security .....	6,081	4,601	6,142	+ 61	+ 1,541
Trust funds .....	(37,324)	(39,807)	(37,697)	(+ 373)	(- 2,110)
Apprenticeship services .....	16,271	17,367	16,434	+ 163	- 933
Executive direction .....	5,672	5,889	5,729	+ 57	- 160
Trust funds .....	(1,316)	(1,291)	(1,329)	(+ 13)	(+ 38)
Total, Program Administration .....	124,350	129,643	125,593	+ 1,243	- 4,050
Federal funds .....	83,473	86,214	84,308	+ 835	- 1,906

Trust funds .....	(40,877)	(43,429)	(41,285)	(+ 408)	(- 2,144)
<hr/>					
Total Employment and Training Administration .....	9,316,681	10,211,089	10,045,574	+ 728,893	- 165,515
Federal funds .....	6,133,328	6,736,184	6,711,813	+ 578,485	- 24,371
Trust funds .....	(3,183,353)	(3,474,905)	(3,333,761)	(+ 150,408)	(- 141,144)
<hr/>					
PENSION AND WELFARE BENEFITS ADMINISTRATION					
SALARIES AND EXPENSES					
Enforcement and compliance .....	61,476	67,463	66,100	+ 4,624	- 1,363
Policy, regulation and public service .....	11,781	13,158	12,281	+ 500	- 877
Program oversight .....	3,583	3,686	3,619	+ 36	- 67
<hr/>					
Total, PWBA .....	76,840	84,307	82,000	+ 5,160	- 2,307
<hr/>					
PENSION BENEFIT GUARANTY CORPORATION					
Program Administration subject to limitation (Trust Funds) .....	(10,330)	(10,625)	(10,433)	(+ 103)	(- 192)
Services related to terminations not subject to limitations (non-add) .....	(125,338)	(137,376)	(137,376)	(+ 12,038)	.....
<hr/>					
Total, PBGC .....	(135,668)	(148,001)	(147,809)	(+ 12,141)	(- 192)
<hr/>					
EMPLOYMENT STANDARDS ADMINISTRATION					
SALARIES AND EXPENSES					
Enforcement of wage and hour standards .....	117,904	124,505	121,213	+ 3,309	- 3,292
Office of Labor-Management Standards .....	25,489	26,382	26,709	+ 1,220	+ 327
Federal contractor EEO standards enforcement .....	58,972	68,728	62,271	+ 3,299	- 6,457
Federal programs for workers' compensation .....	75,670	81,199	77,783	+ 2,113	- 3,416
Trust funds .....	(983)	(1,760)	(993)	(+ 10)	(- 767)
Program direction and support .....	11,366	11,629	11,684	+ 318	+ 55
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Total, salaries and expenses .....	290,384	314,203	300,653	+ 10,269	- 13,550
Federal funds .....	289,401	312,443	299,660	+ 10,259	- 12,783
Trust funds .....	(983)	(1,760)	(993)	(+ 10)	(- 767)
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SPECIAL BENEFITS					
Federal employees compensation benefits .....	209,000	197,000	197,000	- 12,000	.....

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Longshore and harbor workers' benefits .....	4,000	4,000	4,000	.....	.....
Total, Special Benefits .....	213,000	201,000	201,000	-12,000	.....
BLACK LUNG DISABILITY TRUST FUND					
Benefit payments and interest on advances .....	961,665	960,650	960,650	-1,015	.....
Employment Standards Administration, salaries and expenses .....	26,053	26,147	26,147	+94	.....
Departmental Management, salaries and expenses .....	19,621	19,551	19,551	-70	.....
Departmental Management, inspector general .....	287	296	296	+9	.....
Subtotal, black lung disability trust fund .....	1,007,626	1,006,644	1,006,644	-982	.....
Treasury administrative costs (indefinite) .....	356	356	356	.....	.....
Total, black lung disability trust fund .....	1,007,982	1,007,000	1,007,000	-982	.....
Total, Employment Standards Administration .....	1,511,366	1,522,203	1,508,653	-2,713	-13,550
Federal funds .....	1,510,383	1,520,443	1,507,660	-2,723	-12,783
Trust funds .....	(983)	(1,760)	(993)	(+10)	(-767)
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION					
SALARIES AND EXPENSES					
Safety and health standards .....	11,971	12,566	12,091	+120	-475
Enforcement:					
Federal enforcement .....	125,907	135,689	130,606	+4,699	-5,083
State programs .....	77,169	79,175	77,941	+772	-1,234
Technical support .....	17,417	17,617	17,591	+174	-26

Compliance assistance:									
Federal assistance .....	37,351	46,285	41,734	+4,383					-4,551
State consultation grants .....	34,477	35,373	35,373	+896					
Safety and health statistics .....	14,142	14,460	14,283	+141					-177
Executive direction and administration .....	6,521	6,640	6,586	+65					-54
Total, OSHA .....	324,955	347,805	336,205	+11,250					-11,600
MINE SAFETY AND HEALTH ADMINISTRATION									
SALARIES AND EXPENSES									
Enforcement:									
Coal .....	106,993	107,419	107,419	+426					
Metal/nonmetal .....	41,994	44,315	44,315	+2,321					
Standards development .....	1,008	1,426	1,426	+418					
Assessments .....	3,497	3,578	3,578	+81					
Educational policy and development .....	14,782	14,834	14,834	+52					
Technical support .....	21,268	24,870	24,870	+3,602					
Program administration .....	7,645	9,362	9,362	+1,717					
Total, Mine Safety and Health Administration .....	197,187	205,804	205,804	+8,617					
BUREAU OF LABOR STATISTICS									
SALARIES AND EXPENSES									
Employment and unemployment statistics .....	102,169	109,955	106,415	+4,246					-3,540
Labor market information (trust funds) .....	(52,053)	(52,848)	(52,574)	(+521)					(-274)
Prices and cost of living .....	100,134	107,028	107,028	+6,894					
Compensation and working conditions .....	56,834	58,509	57,402	+568					-1,507
Productivity and technology .....	7,263	7,248	7,336	+73					+88
Economic growth and employment projections .....	4,640	4,728	4,686	+46					-42
Executive direction and staff services .....	21,584	23,311	21,800	+216					-1,511
Consumer Price Index revision <sup>6</sup> .....	16,145	15,430	15,430	-715					
Total, Bureau of Labor Statistics .....	360,822	379,457	372,671	+11,849					-6,786
Federal funds .....	308,769	326,609	320,097	+11,328					-6,512
Trust funds .....	(52,053)	(52,848)	(52,574)	(+521)					(-274)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
<b>DEPARTMENTAL MANAGEMENT</b>					
<b>SALARIES AND EXPENSES</b>					
Executive direction .....	20,029	19,714	19,714	-315	.....
Legal services .....	59,911	64,813	64,813	+4,902	.....
Trust funds .....	(297)	(282)	(282)	(-15)	.....
International labor affairs .....	9,465	11,095	11,095	+1,630	.....
Administration and management .....	13,904	14,259	14,259	+355	.....
Adjudication .....	20,483	20,979	20,688	+205	-291
Promoting employment of people with disabilities .....	4,358	4,439	4,439	+81	.....
Women's Bureau .....	7,743	7,569	7,743	.....	+174
Civil rights activities .....	4,535	4,598	4,580	+45	-18
Chief financial officer .....	4,394	4,930	4,800	+406	-130
<b>Total, salaries and expenses .....</b>					
Federal funds .....	145,119	152,678	152,413	+7,294	-265
Trust funds .....	(297)	(282)	(282)	(-15)	.....
<b>VETERANS EMPLOYMENT AND TRAINING</b>					
State administration:					
Disabled Veterans Outreach Program .....	(81,993)	(80,040)	(80,040)	(-1,953)	.....
Local Veterans Employment Program .....	(75,125)	(77,078)	(77,078)	(+1,953)	.....
<b>Subtotal, State administration .....</b>					
Federal administration .....	(22,733)	(22,837)	(22,837)	(+104)	.....

National Veterans Training Institute .....	(2,000)	(2,000)	(2,000)	.....
Total, trust funds .....	(181,851)	(181,955)	(181,955)	(+ 104)
OFFICE OF THE INSPECTOR GENERAL				
Program activities .....	37,480	37,345	37,345	- 135
Trust funds .....	(3,543)	(3,645)	(3,645)	(+ 102)
Executive direction and management .....	5,958	5,760	5,760	- 198
Total, Office of the Inspector General .....	46,981	46,750	46,750	- 231
Federal funds .....	43,438	43,105	43,105	- 333
Trust funds .....	(3,543)	(3,645)	(3,645)	(+ 102)
Total, Departmental Management .....	373,951	381,383	381,118	+ 7,167
Federal funds .....	188,260	195,501	195,236	+ 6,976
Trust funds .....	(185,691)	(185,882)	(185,882)	(+ 191)
Total, Labor Department .....	12,172,132	13,142,673	12,942,458	+ 770,326
Federal funds .....	8,739,722	9,416,653	9,358,815	+ 619,093
Trust funds .....	(3,432,410)	(3,726,020)	(3,583,643)	(+ 151,233)
TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES <sup>7</sup>				
HEALTH RESOURCES AND SERVICES ADMINISTRATION				
HEALTH RESOURCES AND SERVICES				
Consolidated health centers .....	802,009	809,868	826,000	+ 23,991
National Health Service Corps:				+ 16,132
Field placements .....	37,244	37,244	37,244	.....
Recruitment .....	78,166	78,166	78,166	.....
Subtotal, National Health Service Corps .....	115,410	115,410	115,410	.....
Health Professions				
Grants to communities for scholarships .....	532	.....	.....	- 532
Health professions data system .....	236	.....	.....	- 236
Research on certain Health Profession issues .....	450	.....	.....	- 450
Nurse loan repayment for shortage area service .....	2,197	.....	.....	- 2,197

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Workforce Development Cluster (proposed leg)		623			- 623
Centers of excellence	24,714			- 24,714	
Health careers opportunity program	26,779			- 26,779	
Exceptional financial need scholarships	11,332			- 11,332	
Faculty loan repayment	1,061			- 1,061	
Fin assistance for disadvantaged HP students	6,718			- 6,718	
Scholarships for disadvantaged students	18,673			- 18,673	
Minority/Disadvantaged Cluster (proposed leg)		89,277			- 89,277
Family medicine training/departments	49,256			- 49,256	
General internal medicine and pediatrics	17,618			- 17,618	
Physician assistants	6,376			- 6,376	
Public health and preventive medicine	7,998			- 7,998	
Health administration traineeships/projects	1,095			- 1,095	
Primary Care Medicine and Public Health Cluster (proposed legislation)		7,700			- 7,700
Area health education centers	28,490			- 28,490	
Border health training centers	3,752			- 3,752	
General dentistry residencies	3,785			- 3,785	
Allied health special projects	3,832			- 3,832	
Geriatric education centers and training	8,881			- 8,881	
Rural interdisciplinary traineeships	4,153			- 4,153	
Podiatric medicine	677			- 677	
Chiropractic demonstration grants	1,025			- 1,025	
Enhanced Area Health Education Cluster (proposed legislation)		24,700			- 24,700
Consolidated Title VII			165,000	+ 165,000	+ 165,000
Advanced nurse education	12,467			- 12,467	
Nurse practitioners/nurse midwives	17,586			- 17,586	

Special projects .....	10,564	.....	.....	.....	-10,564	.....
Nurse disadvantaged assistance .....	3,865	.....	.....	.....	-3,865	.....
Professional nurse traineeships .....	15,941	.....	.....	.....	-15,941	.....
Nurse anesthetists .....	2,765	.....	.....	.....	-2,765	.....
Nurse Education/Practice Initiatives Cluster (proposed legislation) .....	.....	7,700	.....	.....	.....	-7,700
Consolidated Title VIII .....	.....	.....	55,000	.....	.....	+55,000
Undistributed reduction .....	.....	.....	.....	.....	.....	.....
Subtotal, Health professions .....	292,818	130,000	220,000	.....	-72,818	+90,000
Other HRSA Programs:						
Hansen's disease services .....	17,094	16,469	14,424	.....	-2,670	-2,045
Maternal and child health block grant .....	681,000	681,000	681,000	.....	.....	.....
Healthy start .....	95,982	95,982	95,982	.....	.....	.....
Organ transplantation .....	2,278	3,891	2,778	.....	+500	-1,113
Health teaching facilities interest subsidies .....	297	225	225	.....	-72	.....
Bone marrow program .....	15,270	15,270	15,270	.....	.....	.....
Rural outreach grants .....	27,796	25,092	30,092	.....	+2,296	+5,000
Emergency medical services for children .....	12,493	12,000	13,000	.....	+507	+1,000
Black lung clinics .....	4,000	1,906	5,000	.....	+1,000	+3,094
Alzheimers demonstration grants .....	5,999	.....	5,999	.....	.....	+5,999
Payment to Hawaii, treatment of Hansen's Disease .....	2,045	.....	2,045	.....	.....	+2,045
Subtotal, Other HRSA programs .....	864,254	851,835	865,815	.....	+1,561	+13,980
Ryan White AIDS Programs:						
Education and training centers .....	16,287	17,287	17,287	.....	+1,000	.....
AIDS dental services .....	7,500	7,500	7,500	.....	.....	.....
Emergency assistance .....	449,943	454,943	457,943	.....	+8,000	+3,000
Comprehensive care programs .....	416,954	431,954	469,954	.....	+53,000	+38,000
Early intervention program .....	69,568	84,568	79,568	.....	+10,000	-5,000
Pediatric demonstrations .....	36,000	40,000	45,000	.....	+9,000	+5,000
Subtotal, Ryan White AIDS programs .....	996,252	1,036,252	1,077,252	.....	+81,000	+41,000
Family planning .....	198,452	203,452	208,452	.....	+10,000	+5,000
Rural health research .....	8,713	8,713	11,713	.....	+3,000	+3,000
Health care facilities .....	12,902	.....	10,000	.....	-2,902	+10,000
Buildings and facilities .....	828	.....	.....	.....	-828	.....

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
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[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
National practitioner data bank .....	6,000	8,000	8,000	+ 2,000	.....
User fees .....	-6,000	-8,000	-8,000	-2,000	.....
Program management .....	112,929	110,949	114,429	+ 1,500	+ 3,480
Total, Health resources and services .....	3,404,567	3,266,479	3,449,071	+ 44,504	+ 182,592
MEDICAL FACILITIES GUARANTEE AND LOAN FUND: Interest subsidy program .....	7,000	6,000	6,000	- 1,000	.....
HEALTH EDUCATION ASSISTANCE LOANS PROGRAM (HEAL):					
New loan subsidies .....	477	1,020	1,020	+ 543	.....
Liquidating account (non-add) .....	(37,608)	(29,566)	(29,566)	(- 8,042)	.....
HEAL loan limitation (non-add) .....	(140,000)	(85,000)	(85,000)	(- 55,000)	.....
Program management .....	2,688	2,688	2,688	.....	.....
Total, HEAL .....	3,165	3,708	3,708	+ 543	.....
VACCINE INJURY COMPENSATION PROGRAM TRUST FUND:					
Post-fiscal year 1988 claims (trust fund) .....	50,476	42,448	42,448	- 8,028	.....
HRSA administration (trust fund) .....	3,000	3,000	3,000	.....	.....
Subtotal, Vaccine injury compensation trust fund .....	53,476	45,448	45,448	- 8,028	.....
VACCINE INJURY COMPENSATION: Pre-fiscal year 1989 claims (appropriation) .....	110,000	.....	.....	- 110,000	.....
Total, Vaccine injury .....	163,476	45,448	45,448	- 118,028	.....
Total, Health Resources and Services Admin .....	3,578,208	3,321,635	3,504,227	- 73,981	+ 182,592

CENTERS FOR DISEASE CONTROL AND PREVENTION  
DISEASE CONTROL, RESEARCH AND TRAINING

Preventive Health Services Block Grant .....	153,994	143,940	143,940	-10,054	.....
Rape Prevention and Education (non-add) .....	35,000	45,000	45,000	+10,000	.....
Subtotal, Preventive Health Services Block Grant (non-add) .....	188,994	188,940	188,940	-54	.....
Prevention centers .....	8,099	8,099	8,099	.....	.....
Childhood immunization <sup>8</sup> .....	467,583	427,312	445,545	-22,038	+18,233
Acquired Immune Deficiency Syndrome (AIDS) .....	616,790	634,266	646,790	+30,000	+12,524
Tuberculosis .....	119,294	119,236	119,236	-58	.....
Sexually transmitted diseases .....	106,203	111,171	111,171	+4,968	.....
Subtotal .....	225,497	230,407	230,407	+4,910	.....
Chronic diseases:					
Chronic and environmental disease prevention .....	166,874	191,039	203,454	+36,580	+12,415
Breast and cervical cancer screening .....	139,659	141,897	141,897	+2,238	.....
Subtotal, Chronic diseases .....	306,533	332,936	345,351	+38,818	+12,415
Infectious disease .....	87,720	112,428	112,428	+24,708	.....
Lead poisoning prevention .....	38,181	38,154	38,200	+19	+46
Injury control .....	43,182	49,033	45,063	+1,881	-3,970
Occupational Safety and Health (NIOSH) .....	141,340	148,463	148,463	+7,123	.....
Mine safety and health .....	31,913	32,000	40,000	+8,087	+8,000
Epidemic services .....	69,608	69,322	69,322	-286	.....
National Center for Health Statistics:					
Program operations .....	37,612	18,963	18,033	-19,579	-930
1 percent evaluation funds (non-add) .....	(48,400)	(70,063)	(70,063)	(+21,663)	.....
Subtotal, health statistics .....	(86,012)	(89,026)	(88,096)	(+2,084)	(-930)
Buildings and facilities .....	30,553	23,007	23,007	-7,546	.....
Program management .....	2,563	2,465	2,465	-98	.....
Subtotal, Centers for Disease Control .....	2,261,168	2,270,795	2,317,113	+55,945	+46,318

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[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
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Crime Bill Activities:					
Rape prevention and education .....	35,000	45,000	45,000	+ 10,000	.....
Domestic violence community demonstrations .....	6,000	.....	6,000	.....	+ 6,000
Subtotal, Crime bill activities .....	41,000	45,000	51,000	+ 10,000	+ 6,000
Total, Disease Control .....	2,302,168	2,315,795	2,368,113	+ 65,945	+ 52,318
NATIONAL INSTITUTES OF HEALTH					
National Cancer Institute .....	2,381,149	2,217,482	2,558,377	+ 177,228	+ 340,895
Transfer, Office of AIDS Research .....	.....	(224,256)	.....	.....	(- 224,256)
Subtotal .....	(2,381,149)	(2,441,738)	(2,558,377)	(+ 177,228)	(+ 116,639)
National Heart, Lung, and Blood Institute .....	1,432,529	1,404,770	1,531,898	+ 99,369	+ 127,128
Transfer, Office of AIDS Research .....	.....	(62,419)	.....	.....	(- 62,419)
Subtotal .....	(1,432,529)	(1,467,189)	(1,531,898)	(+ 99,369)	(+ 64,709)
National Institute of Dental Research .....	195,825	190,081	211,611	+ 15,786	+ 21,530
Transfer, Office of AIDS Research .....	.....	(12,750)	.....	.....	(- 12,750)
Subtotal .....	(195,825)	(202,831)	(211,611)	(+ 15,786)	(+ 8,780)
National Institute of Diabetes and Digestive and Kidney Diseases .....	815,607	821,164	883,321	+ 67,714	+ 62,157
Transfer, Office of AIDS Research .....	.....	(12,638)	.....	.....	(- 12,638)
Subtotal .....	(815,607)	(833,802)	(883,321)	(+ 67,714)	(+ 49,519)
National Institute of Neurological Disorders and Stroke .....	726,407	722,712	781,351	+ 54,944	+ 58,639

Transfer, Office of AIDS Research .....	(25,116)	.....	.....	(- 25,116)
Subtotal .....	(726,407)	(781,351)	(+ 54,944)	(+ 33,523)
National Institute of Allergy and Infectious Diseases .....	1,256,659	1,359,688	+ 103,029	+ 725,416
Transfer, Office of AIDS Research .....	(678,230)	.....	.....	(- 678,230)
Subtotal .....	(1,256,659)	(1,359,688)	(+ 103,029)	(+ 47,186)
National Institute of General Medical Sciences .....	998,387	1,058,969	+ 60,582	+ 66,937
Transfer, Office of AIDS Research .....	(28,160)	.....	.....	(- 28,160)
Subtotal .....	(998,387)	(1,058,969)	(+ 60,582)	(+ 38,777)
National Institute of Child Health and Human Development .....	631,365	676,870	+ 45,505	+ 94,838
Transfer, Office of AIDS Research .....	(65,247)	.....	.....	(- 65,247)
Subtotal .....	(631,365)	(676,870)	(+ 45,505)	(+ 29,591)
National Eye Institute .....	332,597	357,695	+ 25,098	+ 26,740
Transfer, Office of AIDS Research .....	(9,476)	.....	.....	(- 9,476)
Subtotal .....	(332,597)	(357,695)	(+ 25,098)	(+ 17,264)
National Institute of Environmental Health Sciences .....	308,487	331,969	+ 23,482	+ 18,386
Transfer, Office of AIDS Research .....	(6,324)	.....	.....	(- 6,324)
Subtotal .....	(308,487)	(331,969)	(+ 23,482)	(+ 12,062)
National Institute on Aging .....	485,806	520,705	+ 34,899	+ 25,503
Transfer, Office of AIDS Research .....	(1,874)	.....	.....	(- 1,874)
Subtotal .....	(485,806)	(520,705)	(+ 34,899)	(+ 23,629)
National Institute of Arthritis and Musculoskeletal and Skin Diseases .....	257,003	272,631	+ 15,628	+ 13,699
Transfer, Office of AIDS Research .....	(4,310)	.....	.....	(- 4,310)
Subtotal .....	(257,003)	(272,631)	(+ 15,628)	(+ 9,389)
National Institute on Deafness and Other Communication Disorders .....	188,345	200,428	+ 12,083	+ 7,981
Transfer, Office of AIDS Research .....	(1,774)	.....	.....	(- 1,774)
Subtotal .....	(188,345)	(200,428)	(+ 12,083)	(+ 6,207)
National Institute of Nursing Research .....	59,721	64,016	+ 4,295	+ 8,324

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Transfer, Office of AIDS Research .....		(5,360)			(-5,360)
Subtotal .....	(59,721)	(61,052)	(64,016)	(+4,295)	(+2,964)
National Institute on Alcohol Abuse and Alcoholism .....	211,870	208,112	228,585	+16,715	+20,473
Transfer, Office of AIDS Research .....		(11,234)			(-11,234)
Subtotal .....	(211,870)	(219,346)	(228,585)	(+16,715)	(+9,239)
National Institute on Drug Abuse .....	489,160	358,475	531,751	+42,591	+173,276
Transfer, Office of AIDS Research .....		(163,440)			(-163,440)
Subtotal .....	(489,160)	(521,915)	(531,751)	(+42,591)	(+9,836)
National Institute of Mental Health .....	701,107	629,739	753,334	+52,227	+123,595
Transfer, Office of AIDS Research .....		(98,510)			(-98,510)
Subtotal .....	(701,107)	(728,249)	(753,334)	(+52,227)	(+25,085)
National Center for Research Resources .....	415,095	333,868	455,805	+40,710	+121,937
Transfer, Office of AIDS Research .....		(77,053)			(-77,053)
Subtotal .....	(415,095)	(410,921)	(455,805)	(+40,710)	(+44,884)
National Center for Human Genome Research .....	189,529	202,197	218,851	+29,322	+16,654
Transfer, Office of AIDS Research .....		(2,990)			(-2,990)
Subtotal .....	(189,529)	(205,187)	(218,851)	(+29,322)	(+13,664)
John E. Fogarty International Center .....	26,557	16,755	28,488	+1,911	+11,713
Transfer, Office of AIDS Research .....		(10,413)			(-10,413)

Subtotal .....	(26,557)	(27,168)	(28,468)	(+ 1,911)	(+ 1,300)
National Library of Medicine .....	150,828	152,689	162,825	+ 11,997	+ 10,136
Transfer, Office of AIDS Research .....		(3,279)			(- 3,279)
<hr/>					
Subtotal .....	(150,828)	(155,968)	(162,825)	(+ 11,997)	(+ 6,857)
Office of the Director .....	286,810	234,247	292,196	+ 5,386	+ 57,949
Office of AIDS research (non-add) .....	(35,589)	(35,912)		(- 35,589)	(- 35,912)
<hr/>					
Subtotal .....	(286,810)	(234,247)	(292,196)	(+ 5,386)	(+ 57,949)
Buildings and facilities .....	200,000	190,000	211,500	+ 11,500	+ 21,500
Office of AIDS Research .....		1,540,765			- 1,540,765
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Total N.I.H. ....	12,740,843	13,078,203	13,692,844	+ 952,001	+ 614,641

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

Mental health:					
Knowledge development and application .....	57,964	58,032	57,964		- 68
Mental health performance partnership .....	275,420	275,420	275,420		
Children's mental health .....	69,896	69,927	69,896		- 31
Grants to States for the homeless (PATH) .....	20,000	20,000	20,000		
Protection and advocacy .....	21,957	21,957	21,957		
<hr/>					
Subtotal, mental health .....	445,237	445,336	445,237		- 99
Substance abuse treatment:					
Knowledge development and application .....	155,868	156,000	155,868		- 132
Substance abuse performance partnership (BA) .....	1,310,107	1,320,107	1,310,107		- 10,000
Public Law 104-121 funding (non-add) .....	(50,000)	(50,000)	(50,000)		
<hr/>					
Subtotal, substance abuse treatment (BA) .....	1,465,975	1,476,107	1,465,975		- 10,132
Program level .....	(1,515,975)	(1,526,107)	(1,515,975)		(- 10,132)
Substance abuse prevention: Knowledge development and application .....	155,869	151,000	151,000	- 4,869	
High risk youth grants .....			10,000	+ 10,000	+ 10,000
Program management .....	54,431	55,500	54,431		- 1,069
Data collection .....		28,000			- 28,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
1 percent evaluation funding (non-add)			(10,000)	(+ 10,000)	(+ 10,000)
Total, Substance Abuse and Mental Health (BA) Program level	2,121,512 (2,171,512)	2,155,943 (2,205,943)	2,126,643 (2,176,643)	+ 5,131 (+ 5,131)	- 29,300 (- 29,300)
RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS					
Retirement payments	139,299	149,217	149,217	+ 9,918	
Survivors benefits	10,417	11,643	11,643	+ 1,226	
Dependent's medical care	26,363	27,470	27,470	+ 1,107	
Military services credits	2,556	2,409	2,409	- 147	
Total, retirement pay and medical benefits	178,635	190,739	190,739	+ 12,104	
AGENCY FOR HEALTH CARE POLICY AND RESEARCH					
Research on health care systems cost and access:					
Research	35,650	17,170	17,170	- 18,480	
1 percent evaluation funding (non-add)	(12,712)	(29,515)	(29,515)	(+ 16,803)	
Subtotal	(48,362)	(46,685)	(46,685)	(- 1,677)	
Health insurance and expenditure surveys:					
Research	10,000	10,000	10,000		
1 percent evaluation funding (non-add)	(34,700)	(26,300)	(26,300)	(- 8,400)	
Subtotal	(44,700)	(36,300)	(36,300)	(- 8,400)	
Research on health care outcomes and quality:					
Federal funds	48,187	57,600	48,187		- 9,413



COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
<b>PROGRAM MANAGEMENT</b>					
Research, demonstration, and evaluation: Regular program, trust funds .....	(44,000)	(45,000)	(47,000)	(+ 3,000)	(+ 2,000)
Medicare contractors (trust funds) .....	(1,207,200)	(1,223,000)	(1,189,000)	(- 18,200)	(- 34,000)
H.R. 3103 funding (non-add) .....	(440,000)	(500,000)	(500,000)	(+ 60,000)	.....
Medicare transaction system (non-add) .....	(75,000)	(89,000)	(55,000)	(- 20,000)	(- 34,000)
Subtotal, contractors program level .....	(1,722,200)	(1,812,000)	(1,744,000)	(+ 21,800)	(- 68,000)
State survey and certification: Medicare certification, trust funds .....	(158,000)	(148,000)	(158,000)	.....	(+ 10,000)
Federal administration:					
Trust funds .....	(327,173)	(360,434)	(327,173)	.....	(- 33,261)
Less current law user fees .....	(- 1,932)	(- 1,934)	(- 1,932)	.....	(+ 2)
Subtotal, Federal administration .....	(325,241)	(358,500)	(325,241)	.....	(- 33,259)
Total, program management .....	(1,734,441)	(1,774,500)	(1,719,241)	(- 15,200)	(- 55,259)
Total, Health Care Financing Administration:					
Federal funds .....	163,124,611	162,912,118	162,984,118	- 140,493	+ 72,000
Current year, fiscal year 1997/1998 .....	(135,135,618)	(135,111,429)	(135,183,429)	(+ 47,811)	(+ 72,000)
New advance, 1st quarter, fiscal year 1998/1999 .....	(27,988,993)	(27,800,689)	(27,800,689)	(- 188,304)	.....
Trust funds .....	(1,734,441)	(1,774,500)	(1,719,241)	(- 15,200)	(- 55,259)

ADMINISTRATION FOR CHILDREN AND FAMILIES  
 FAMILY SUPPORT PAYMENTS TO STATES<sup>9</sup>

Aid to Families with Dependent Children (AFDC) .....					
Quality control liabilities .....					
Payments to territories .....					
Emergency assistance .....					
Repatriation .....					
State and local welfare administration .....					
Work activities child care .....					
Transitional child care .....					
At risk child care .....					
Undistributed .....	9,600,000				- 9,600,000
Subtotal, welfare payments .....	9,600,000				- 9,600,000
Child support enforcement:					
State and local administration .....					
Federal incentive payments .....					
Less federal share collections .....	2,158,000				- 2,158,000
Net welfare reform child support appropriation .....	2,158,000				- 2,158,000
Subtotal, child support .....	2,158,000				- 2,158,000
Total, payments, fiscal year 1997/1998 program level .....	11,758,000				- 11,758,000
Less funds advanced in previous years .....	- 4,800,000				+ 4,800,000
Total, payments, current request, fiscal year 1997/1998 .....	6,958,000				- 6,958,000
New advance, 1st quarter, fiscal year 1998/1999 .....	607,000				- 607,000
JOB OPPORTUNITIES AND BASIC SKILLS (JOBS) .....	1,000,000				- 1,000,000
LOW INCOME HOME ENERGY ASSISTANCE					
Advance from prior year (non-add) .....		(1,000,000)		(1,000,000)	(+ 1,000,000)
Adjustment .....	1,000,000				- 1,000,000
Fiscal year 1997/1998 program level .....	(1,000,000)	(1,000,000)		(1,000,000)	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Prior year emergency allocation .....					
New emergency allocation (non-add) .....	(300,000)	(300,000)	(300,000)	(-300,000)	
Advance funding (fiscal year 1998/1999) .....	1,000,000	1,000,000	1,200,000	(+200,000)	+200,000
REFUGEE AND ENTRANT ASSISTANCE					
Transitional and medical services .....	246,502	227,138	227,138	-19,364	
Social services .....	110,882	110,882	110,882		
Preventive health .....	4,835	4,835	4,835		
Targeted assistance .....	49,857	49,477	49,477	-380	
Total, refugee and entrant assistance (BA) .....	412,076	392,332	392,332	-19,744	
Child care and development block grant:					
Advance funded fiscal year 1998/1999 .....	937,000	1,000,000	1,000,000	+63,000	
Forward/advance funding from prior year (non-add) .....	(934,642)	(937,000)	(937,000)	(+2,358)	
Adjustment (current funding) .....	19,120	63,000	26,120	+7,000	-36,880
Total .....	953,762	1,000,000	963,120	+9,358	-36,880
Total, program level (non add) .....	2,500,000	2,380,000	2,245,000	-255,000	-135,000
Social services block grant (title XX)					
CHILDREN AND FAMILIES SERVICES PROGRAMS					
Programs for Children, Youth, and Families:					
Head start .....	3,980,546	4,305,000	4,305,000	+324,454	
Consolidated runaway, homeless youth program .....		58,602	58,602	+58,602	

Runaway and homeless youth .....	43,653	.....	.....	-43,653	.....
Runaway youth—transitional living .....	14,949	.....	.....	-14,949	.....
Subtotal, runaway .....	58,602	58,602	58,602	.....	.....
Child abuse state grants .....	21,026	21,026	21,026	.....	.....
Child abuse discretionary activities .....	14,154	14,154	14,154	.....	.....
Abandoned infants assistance .....	12,251	12,251	12,251	.....	.....
Child welfare services .....	291,989	291,989	291,989	.....	.....
Child welfare training .....	4,000	4,000	8,000	+4,000	+4,000
Adoption opportunities .....	13,000	13,000	13,000	.....	.....
Adoption initiative .....	21,000	21,000	.....	-21,000	.....
Family violence .....	62,000	.....	.....	-62,000	.....
Social services and income maintenance research .....	44,000	18,043	21,000	-23,000	+2,957
Community Based Resource Centers .....	32,835	32,835	32,835	.....	.....
Developmental disabilities program:					
State councils .....	64,803	64,803	65,574	+771	+771
Protection and advocacy .....	26,718	26,718	27,036	+318	+318
Developmental disabilities special projects .....	5,250	5,250	5,250	.....	.....
Developmental disabilities university affiliated programs .....	17,461	17,461	17,669	+208	+208
Subtotal, Developmental disabilities .....	114,232	114,232	115,529	+1,297	+1,297
Native American Programs .....	34,933	34,933	34,933	.....	.....
Community services:					
Community Services Block Grants .....	489,600	414,720	492,600	+3,000	+77,880
Discretionary funds:					
Community initiative program:					
Economic development .....	27,332	.....	27,332	.....	+27,332
Rural community facilities .....	3,500	.....	3,500	.....	+3,500
Subtotal, discretionary funds .....	30,832	.....	30,832	.....	+30,832
National youth sports .....	12,000	.....	12,000	.....	+12,000
Community Food and Nutrition .....	4,000	.....	4,000	.....	+4,000
Subtotal, Community services .....	536,432	414,720	539,432	+3,000	+124,712
Program direction .....	143,061	143,115	138,343	-4,718	-4,772

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Rescission .....	-27,000	.....	-21,000	+6,000	-21,000
Total, Children and Families Services Prog (BA) .....	5,336,061	5,498,900	5,585,094	+249,033	+86,194
<b>VIOLENT CRIME REDUCTION PROGRAMS:</b>					
Community schools .....	12,800	12,800	.....	-12,800	-12,800
Runaway Youth Prevention .....	8,000	15,000	15,000	+7,000	.....
Domestic violence hotline .....	1,200	1,200	1,200	.....	.....
Battered women's shelters .....	10,800	70,000	76,800	+66,000	+6,800
Total, Violent crime reduction programs .....	32,800	99,000	93,000	+60,200	-6,000
FAMILY PRESERVATION AND SUPPORT .....	240,000	255,000	255,000	+15,000	.....
<b>PAYMENTS TO STATES FOR FOSTER CARE AND ADOPTION ASSISTANCE</b>					
Foster care .....	3,807,143	3,540,300	3,540,300	-266,843	.....
Adoption assistance .....	567,888	700,700	700,700	+132,812	.....
Independent living .....	70,000	70,000	70,000	.....	.....
Total, Payment to States .....	4,445,031	4,311,000	4,311,000	-134,031	.....
Less funds advanced in prior year .....	.....	-1,111,000	-1,111,000	-1,111,000	.....
Total, request, fiscal year 1997/1998 .....	4,445,031	3,200,000	3,200,000	-1,245,031	.....
New advance, 1st quarter, fiscal year 1998/1999 .....	1,111,000	1,157,500	1,157,500	+46,500	.....
Total, Administration for Children and Families .....	25,598,088	15,045,732	15,154,046	-10,444,042	+108,314
Current year, fiscal year 1997/1998 .....	(21,943,088)	(11,888,232)	(11,796,546)	(-10,146,542)	(-91,686)

Fiscal year 1998/1999	(3,655,000)	(3,157,500)	(3,357,500)	(-297,500)	(+200,000)
<b>ADMINISTRATION ON AGING</b>					
<b>AGING SERVICES PROGRAMS</b>					
Grants to States:					
Supportive services and centers	300,556	291,375	305,556	+5,000	+14,181
Ombudsman services					
Prevention of elder abuse					
Preventive health	15,623	15,623	15,623		
Title VII		9,181			-9,181
Nutrition:					
Congregate meals	364,535	359,810	368,716	+4,181	+8,906
Home-delivered meals	105,339	110,064	110,064	+4,725	
Frail elderly in-home services	9,263	9,263	9,263		
Grants to Indians	16,057	16,057	20,057	+4,000	+4,000
Aging research, training and special projects	4,000	4,000	10,000	+6,000	+6,000
Program administration	14,758	14,795	14,795	+37	
Alzheimer's initiative		8,000			-8,000
Total, Administration on Aging	830,131	838,168	854,074	+23,943	+15,906
<b>OFFICE OF THE SECRETARY</b>					
<b>GENERAL DEPARTMENTAL MANAGEMENT:</b>					
Federal funds	96,135	96,517	98,517	+2,382	+2,000
Trust funds	(5,851)	(5,851)	(5,851)		
1 percent Evaluation Funds (ASPE) (non-add)	(20,552)	(20,552)	(20,552)		
Subtotal	(122,538)	(122,920)	(124,920)	(+2,382)	(+2,000)
Adolescent family life (Title XX)	14,206	14,209	19,209	+5,003	+5,000
Physical fitness and sports	998	1,000	998		-2
Minority health	34,584	23,100	23,600	-10,984	+500
Office of women's health	12,495	12,500	18,500	+6,005	+6,000
Anti-Terrorism	13,764	10,000	13,764		+3,764

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[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
<b>Total, General Departmental Management:</b>					
Federal funds .....	172,182	157,326	174,588	+2,406	+17,262
Trust funds .....	(5,851)	(5,851)	(5,851)		
<b>Total</b> .....	<b>(178,033)</b>	<b>(163,177)</b>	<b>(180,439)</b>	<b>(+2,406)</b>	<b>(+17,262)</b>
<b>OFFICE OF THE INSPECTOR GENERAL:</b>					
Federal funds .....	34,790	31,921	31,921	-2,869	
Trust funds .....	(70,000)	(80,500)	(80,500)	(+10,500)	
<b>Total, Office of the Inspector General:</b>	<b>34,790</b>	<b>31,921</b>	<b>31,921</b>	<b>-2,869</b>	
<b>OFFICE FOR CIVIL RIGHTS:</b>					
Federal funds .....	(34,790)	(31,921)	(31,921)	(-2,869)	
Trust funds .....	(104,790)	(112,421)	(112,421)	(+7,631)	
<b>Total (BA)</b> .....	<b>(139,580)</b>	<b>(144,342)</b>	<b>(144,342)</b>	<b>(+4,762)</b>	
<b>OFFICE FOR CIVIL RIGHTS:</b>					
Federal funds .....	16,183	17,216	16,345	+162	-871
Trust funds .....	(3,307)	(3,314)	(3,314)	(+7)	
<b>Total, Office for Civil Rights:</b>	<b>12,876</b>	<b>13,902</b>	<b>13,031</b>	<b>+169</b>	<b>-871</b>
Federal funds .....	16,183	17,216	16,345	+162	-871
Trust funds .....	(3,307)	(3,314)	(3,314)	(+7)	
<b>Total</b> .....	<b>(19,490)</b>	<b>(20,530)</b>	<b>(19,659)</b>	<b>(+169)</b>	<b>(-871)</b>

POLICY RESEARCH .....	18,486	9,000	9,500	- 8,986	+ 500
Public Health and Social Services Emergency Fund .....	15,000	.....	.....	- 15,000	.....
Total, Office of the Secretary:					
Federal funds .....	256,641	215,463	232,354	- 24,287	+ 16,891
Trust funds .....	(9,158)	(9,165)	(9,165)	(+ 7)	.....
Total .....	(265,799)	(224,628)	(241,519)	(- 24,280)	(+ 16,891)
Total, Department of Health and Human Services:					
Federal Funds .....	210,826,904	200,160,796	201,184,745	- 9,642,159	+ 1,023,949
Current year, fiscal year 1997/1998 .....	(179,182,911)	(169,202,607)	(170,026,556)	(- 9,156,355)	(+ 823,949)
Fiscal year 1998/1999 .....	(31,643,993)	(30,958,189)	(31,158,189)	(- 485,804)	(+ 200,000)
Trust funds .....	(1,743,599)	(1,783,665)	(1,728,406)	(- 15,193)	(- 55,259)

TITLE III—DEPARTMENT OF EDUCATION<sup>10</sup>  
EDUCATION REFORM<sup>11</sup>

Goals 2000: Educate America Act:					
State and local educ systemic improvement grants .....	476,000	605,000	500,000	+ 24,000	- 105,000
Parental assistance .....	15,000	15,000	30,000	+ 15,000	+ 15,000
Subtotal, Goals 2000 .....	491,000	620,000	530,000	+ 39,000	- 90,000
School-to-work opportunities: State grants and local partnerships .....	199,973	200,000	200,000	+ 27	.....
Technology literacy challenge fund .....	200,000	425,000	425,000	+ 225,000	.....
Technology innovation challenge grants .....	66,965	85,000	116,000	+ 49,035	+ 31,000
Total .....	957,938	1,330,000	1,271,000	+ 313,062	- 59,000
EDUCATION FOR THE DISADVANTAGED <sup>12</sup>					
Grants to Local Education Agencies (LEAs):					
Basic grants, forward funded .....	6,269,712	6,187,350	6,269,712	.....	+ 82,362
Basic grants, current funded .....	3,500	4,000	4,000	+ 500	.....
Subtotal, Basic grants .....	6,273,212	6,191,350	6,273,712	+ 500	+ 82,362

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[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Concentration grants .....	1,022,020	999,249	1,022,020	.....	+ 22,771
Targeted grants .....	.....	350,000	.....	.....	- 350,000
Subtotal, Grants to LEAs .....	7,295,232	7,540,599	7,295,732	+ 500	- 244,867
Capital expenses for private school children .....	41,119	41,119	41,119	.....	.....
Even start .....	101,992	108,000	108,000	+ 6,008	.....
State agency programs:					
Migrant .....	305,473	319,500	305,473	.....	- 14,027
Neglected and delinquent/high risk youth .....	39,311	40,333	40,333	+ 1,022	.....
State school improvement .....	8,000	8,000	8,000	.....	- 8,000
Evaluation .....	6,977	10,000	6,977	.....	- 3,023
Total, ESEA .....	7,790,104	8,067,551	7,797,634	+ 7,530	- 269,917
Migrant education:					
High school equivalency program .....	7,441	7,634	7,634	+ 193	.....
College assistance migrant program .....	2,028	2,081	2,081	+ 53	.....
Subtotal, migrant education .....	9,469	9,715	9,715	+ 246	.....
Total, Compensatory education programs .....	7,799,573	8,077,266	7,807,349	+ 7,776	- 269,917
Subtotal, forward funded .....	(7,779,627)	(8,053,551)	(7,786,657)	(+ 7,030)	(- 266,894)
IMPACT AID					
Basic support payments .....	615,500	584,000	623,500	+ 8,000	+ 39,500
Payments for children with disabilities .....	40,000	40,000	80,000	+ 40,000	+ 40,000

Payments for heavily impacted districts (sec. f) .....	52,000	20,000	52,000	.....	+ 32,000
Subtotal .....	707,500	644,000	755,500	+ 48,000	+ 111,500
Facilities maintenance (sec. 8008) .....	10,000	10,000	10,000	.....	.....
Construction (sec. 8007) .....	5,000	4,000	5,000	.....	+ 1,000
Payments for Federal property (Sec. 8002) .....	17,500	.....	24,000	+ 6,500	+ 24,000
Total, impact aid .....	730,000	658,000	794,500	+ 64,500	+ 136,500
SCHOOL IMPROVEMENT PROGRAMS					
Professional development <sup>13</sup> .....	310,000	360,000	310,000	.....	- 50,000
Program innovation <sup>13</sup> .....	310,000	.....	310,000	.....	+ 310,000
Safe and drug-free schools:					
State grants <sup>13</sup> .....	530,978	590,000	555,978	+ 25,000	- 34,022
National programs .....	25,000	30,000	.....	- 25,000	- 30,000
Subtotal, Safe and drug-free schools .....	555,978	620,000	555,978	.....	- 64,022
Inexpensive book distribution (RIF) .....	10,265	12,000	12,000	+ 1,735	.....
Arts in education .....	9,000	9,500	10,500	+ 1,500	+ 1,000
Other school improvement programs:					
Magnet schools assistance .....	95,000	95,000	95,000	.....	.....
Educational support services for homeless children and youth <sup>13</sup> .....	25,000	27,000	28,800	+ 3,800	+ 1,800
Women's educational equity .....	2,000	4,000	4,000	+ 2,000	.....
Training and advisory services (Civil Rights IV-A) .....	7,334	14,334	7,334	.....	- 7,000
Ellender fellowships/Close up <sup>13</sup> .....	1,500	.....	1,500	.....	+ 1,500
Education for Native Hawaiians .....	15,000	15,000	20,000	+ 5,000	+ 5,000
Alaska Native Education equity .....	8,000	8,000	10,640	+ 2,640	+ 2,640
Charter schools .....	50,987	100,000	50,987	.....	- 49,013
Education infrastructure .....	.....	.....	40,000	+ 40,000	+ 40,000
Subtotal, other school improvement programs .....	204,821	263,334	258,261	+ 53,440	- 5,073
Technical assistance for improving ESEA programs: Comprehensive regional assistance centers .....	25,554	34,388	25,554	.....	- 8,834
Total, School improvement programs .....	1,425,618	1,299,222	1,482,293	+ 56,675	+ 183,071

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Subtotal, forward funded .....	(1,177,478)	(977,000)	(1,206,278)	(+28,800)	(+229,278)
INDIAN EDUCATION <sup>1,4</sup>					
Grants to local education agencies .....	58,050	59,750	59,750	+1,700	.....
Federal Administration:					
Office of Indian Education .....	2,943	2,800	2,800	-143	.....
National Advisory Council .....	.....	50	50	+50	.....
Total, Federal administration .....	2,943	2,850	2,850	-93	.....
Total, Indian Education .....	60,993	62,600	62,600	+1,607	.....
BILINGUAL AND IMMIGRANT EDUCATION					
Bilingual education:					
Instructional services .....	141,700	160,000	160,000	+18,300	.....
Support services .....	10,000	14,000	14,000	+4,000	.....
Professional development .....	5,000	25,000	25,000	+20,000	.....
Immigrant education .....	100,000	150,000	150,000	+50,000	.....
Foreign language assistance .....	5,000	5,000	5,000	.....	.....
Total .....	261,700	354,000	354,000	+92,300	.....
SPECIAL EDUCATION					
State grants:					
Grants to States part B .....	3,107,522	3,240,750	3,941,837	+834,315	+701,087
Preschool grants .....	360,409	374,825	378,985	+18,576	+4,160

Grants for infants and families .....	315,754	323,964	350,790	+ 35,036	+ 26,826
Evaluation, forward funded .....	1,873	6,300	6,300	+ 4,427	.....
Evaluation, current funded .....	.....	1,700	1,700	+ 1,700	.....
Subtotal, State grants .....	3,785,558	3,947,539	4,679,612	+ 894,054	+ 732,073
National activities:					
State improvement .....	26,988	35,200	35,200	+ 8,212	.....
Research and innovation .....	62,803	64,508	64,508	+ 1,705	.....
Technical assistance and dissemination .....	34,337	35,056	44,556	+ 10,219	+ 9,500
Personnel preparation .....	80,735	82,139	82,139	+ 1,404	.....
Parent information centers .....	15,535	15,535	18,535	+ 3,000	+ 3,000
Technology and media services .....	30,023	30,023	32,023	+ 2,000	+ 2,000
Subtotal, IDEA National activities .....	250,421	262,461	276,961	+ 26,540	+ 14,500
Readline .....	.....	.....	1,500	+ 1,500	+ 1,500
Total, Special education .....	4,035,979	4,210,000	4,958,073	+ 922,094	+ 748,073
REHABILITATION SERVICES AND DISABILITY RESEARCH					
Vocational rehabilitation State grants .....	2,176,038	2,246,888	2,246,888	+ 70,850	.....
Client assistance State grants .....	10,392	10,714	10,714	+ 322	.....
Training .....	39,629	39,629	39,629	.....	.....
Special demonstration programs .....	18,942	16,942	20,836	+ 1,894	+ 3,894
Migratory workers .....	1,850	2,350	2,350	+ 500	.....
Recreational programs .....	2,596	2,596	2,596	.....	.....
Protection and advocacy of individual rights .....	7,657	7,894	7,894	+ 237	.....
Projects with industry .....	22,071	22,071	22,071	.....	.....
Supported employment State grants .....	38,152	38,152	38,152	.....	.....
Independent living:					
State grants .....	21,859	21,859	21,859	.....	.....
Centers .....	42,876	44,205	46,205	+ 3,329	+ 2,000
Services for older blind individuals .....	9,952	9,952	11,947	+ 1,995	+ 1,995
Subtotal, Independent living .....	74,687	76,016	80,011	+ 5,324	+ 3,995
Program improvement .....	2,391	3,900	3,900	+ 1,509	.....
Evaluation .....	1,587	1,587	1,587	.....	.....
Helen Keller National Center for Deaf-Blind Youths and Adults .....	7,337	7,528	7,549	+ 212	+ 21

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
National Institute on Disability and Rehabilitation Research .....	69,990	71,000	71,000	+ 1,010	.....
Subtotal, mandatory programs .....	2,473,319	2,547,267	2,555,177	+ 81,858	+ 7,910
Assistive technology .....	36,109	36,109	36,109	.....	.....
Total, Rehabilitation services .....	2,509,428	2,583,376	2,591,286	+ 81,858	+ 7,910
SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES					
AMERICAN PRINTING HOUSE FOR THE BLIND .....	6,680	6,680	7,906	+ 1,226	+ 1,226
NATIONAL TECHNICAL INSTITUTE FOR THE DEAF .....	43,041	43,041	44,141	+ 1,100	+ 1,100
GALLAUDET UNIVERSITY .....	79,182	79,182	81,000	+ 1,818	+ 1,818
Total .....	128,903	128,903	133,047	+ 4,144	+ 4,144
VOCATIONAL AND ADULT EDUCATION <sup>15</sup>					
Vocational education:					
Basic State grants .....	1,015,550	1,043,550	1,015,550	.....	- 28,000
Tech-Prep education .....	100,000	105,000	100,000	.....	- 5,000
Tribally controlled postsecondary vocational institutions .....	2,919	2,919	3,100	+ 181	+ 181
National programs: Research .....	13,497	20,497	13,497	.....	- 7,000
Subtotal, Vocational education .....	1,131,966	1,171,966	1,132,147	+ 181	- 39,819
Adult education:					
State programs .....	340,339	382,000	340,339	.....	- 41,661
National programs:					
Evaluation and technical assistance .....	4,998	6,000	4,998	.....	- 1,002

National Institute for Literacy .....	4,491	6,000	4,491	.....	- 1,509
Subtotal, National programs .....	9,489	12,000	9,489	.....	- 2,511
Literacy programs for prisoners .....	4,723	.....	4,723	.....	+ 4,723
Subtotal, adult education .....	354,551	394,000	354,551	.....	- 39,449
Total, Vocational and adult education .....	1,486,517	1,565,966	1,486,698	+ 181	- 79,268
STUDENT FINANCIAL ASSISTANCE					
Federal Pell Grants: Regular program .....	5,919,000	7,635,000	6,910,334	+ 991,334	- 724,666
Memo (non-add): Maximum grant .....	(2,700)	(3,000)	(3,000)	(+ 300)	.....
Memo (non-add): Outlay effect for fiscal year 1998 .....	.....	.....	.....	.....	.....
Federal supplemental educational opportunity grants .....	583,407	583,407	634,407	+ 51,000	+ 51,000
Federal work-study .....	830,000	857,000	830,000	.....	- 27,000
Federal Perkins loans:	.....	.....	.....	.....	.....
Capital contributions .....	158,000	158,000	158,000	.....	.....
Loan cancellations .....	20,000	30,000	25,000	+ 5,000	- 5,000
Subtotal, Federal Perkins loans .....	178,000	188,000	183,000	+ 5,000	- 5,000
State student incentive grants .....	50,000	.....	.....	- 50,000	.....
Total, Student financial assistance .....	7,560,407	9,263,407	8,557,741	+ 997,334	- 705,666
FEDERAL FAMILY EDUCATION LOANS PROGRAM (EXISTING GUARANTEED STUDENT LOANS PROGRAM)					
Federal education loans: Federal administration .....	46,482	47,688	46,482	.....	- 1,206
Total Outstanding Loan Volume as of 10/96 (non-add) .....	(104,919,951)	.....	.....	(- 104,919,951)	.....
FEDERAL DIRECT STUDENT LOAN PROGRAM					
Mandatory administrative costs (indefinite) .....	(491,000)	(532,000)	(532,000)	(+ 41,000)	.....
Total Outstanding Loan Volume as of 10/96 (non-add) .....	(11,571,529)	.....	.....	(- 11,571,529)	.....
HIGHER EDUCATION					
Aid for institutional development:	.....	.....	.....	.....	.....
Strengthening institutions .....	55,450	55,450	55,450	.....	.....
Hispanic serving institutions .....	10,800	12,000	12,000	+ 1,200	.....

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Hispanic serving institutions (Agriculture bill) .....	(2,000)	.....	.....	(- 2,000)	.....
Subtotal, Hispanic serving institutions .....	(12,800)	(12,000)	(12,000)	(- 800)	.....
Strengthening historically black colleges and univ .....	108,990	113,000	108,990	.....	- 4,010
Strengthening historically black grad institutions .....	19,606	19,606	19,606	.....	.....
Endowment challenge grants, HBCU set-aside .....	.....	2,015	.....	.....	- 2,015
Subtotal, Institutional development .....	194,846	202,071	196,046	+ 1,200	- 6,025
Program development:					
Fund for the Improvement of Postsecondary Educ .....	18,000	18,000	30,000	+ 12,000	+ 12,000
Minority teacher recruitment .....	2,212	3,727	2,212	.....	- 1,515
Minority science improvement .....	5,255	5,255	5,255	.....	.....
International educ and foreign language studies:					
Domestic programs .....	53,481	53,481	53,481	.....	.....
Overseas programs .....	5,270	5,770	5,870	+ 600	+ 100
Institute for International Public Policy .....	1,000	1,000	1,000	.....	.....
Subtotal, International education .....	59,751	60,251	60,351	+ 600	+ 100
Urban community service .....	9,200	.....	4,900	- 4,300	+ 4,900
Subtotal, Program development .....	94,418	87,233	102,718	+ 8,300	+ 15,485
Construction: Interest subsidy grants, prior year construction .....	15,673	13,700	13,700	- 1,973	.....
Special grants:					
Mary McLeod Bethune Memeorial Fine Arts Center .....	1,400	.....	1,400	.....	+ 1,400
Federal TRIO programs .....	499,994	525,000	525,000	+ 25,006	.....
Early intervention scholarships and partnerships .....	3,600	.....	3,600	.....	+ 3,600

Advanced placement fees .....	6,000	3,000	+ 3,000	- 3,000
Scholarships:				
Byrd honors scholarships .....	29,117	39,288	+ 10,171	.....
Presidential honors scholarships .....	3,000	.....	- 3,000	- 132,000
George H. W. Bush fellowships .....	3,000	.....	- 3,000	.....
Edmund S. Muskie foundation .....	3,000	.....	- 3,000	.....
Pell Institute International Relations .....	1,000	.....	- 1,000	.....
Calvin Coolidge Memorial Foundation .....	.....	.....	.....	.....
Subtotal, Scholarships .....	39,117	171,288	+ 171	- 132,000
Graduate fellowships:				
Javits fellowships .....	5,931	.....	- 5,931	.....
Graduate assistance in areas of national need .....	24,069	30,000	+ 5,931	.....
Subtotal, Graduate fellowships .....	30,000	30,000	.....	.....
Youth offender grants .....	.....	15,000	+ 15,000	+ 15,000
Total, Higher education .....	879,048	1,035,292	+ 50,704	- 105,540
HOWARD UNIVERSITY				
Academic program .....	166,511	.....	- 166,511	.....
Endowment .....	.....	.....	.....	.....
Howard University Hospital .....	29,489	29,489	.....	.....
Undistributed .....	.....	168,511	+ 168,511	+ 2,000
Total, Howard University .....	196,000	196,000	+ 2,000	+ 2,000
COLLEGE HOUSING and ACADEMIC FACILITIES LOANS PROGRAM: Federal administration .....	698	1,069	698	- 371
HISTORICALLY BLACK COLLEGE AND UNIVERSITY CAPITAL FINANCING PROGRAM				
Federal administration .....	104	104	.....	.....
EDUCATION RESEARCH, STATISTICS, AND IMPROVEMENT				
Research and statistics:				
Research .....	72,567	81,035	.....	- 8,468
Regional education laboratories .....	51,000	53,500	+ 2,500	.....

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Statistics .....	50,000	66,250	52,000	+ 2,000	- 14,250
Assessment:					
National assessment .....	29,752	35,502	29,752		- 5,750
National assessment governing board .....	2,865	2,871	2,871	+ 6	
Subtotal, Assessment .....	32,617	38,373	32,623	+ 6	- 5,750
Subtotal, Research and statistics .....	206,184	239,158	210,690	+ 4,506	- 28,468
Fund for the Improvement of Education .....	40,000	40,000	50,000	+ 10,000	+ 10,000
International education exchange (title VI) .....	5,000	5,000	5,000		
21st century community learning centers .....	1,000		1,000		+ 1,000
Civic Education .....	4,500	4,500	4,500		
Eisenhower professional development national activities .....	13,342	30,000	25,000	+ 11,658	- 5,000
Eisenhower regional mathematics and science education consortia .....	15,000	15,000	15,000		
Javits gifted and talented education .....	5,000	7,000	7,000	+ 2,000	
National writing project .....	3,100		5,000	+ 1,900	+ 5,000
After school learning centers .....		50,000			- 50,000
Education technology:					
Star schools .....	30,000	26,000	30,000		+ 4,000
Ready to learn television .....	7,000	7,000	7,000		
Telecommunications demo project for mathematics .....	1,035	2,035	2,035	+ 1,000	
Subtotal, Education technology .....	38,035	35,035	39,035	+ 1,000	+ 4,000
Total, ERSI .....	331,161	425,693	362,225	+ 31,064	- 63,468



COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Retired Senior Volunteer Program .....	35,708	45,043	39,279	+ 3,571	- 5,764
Senior demonstration program .....	.....	10,000	.....	.....	- 10,000
Subtotal, Senior Volunteers .....	144,764	176,464	159,240	+ 14,476	- 17,224
Program Administration .....	27,850	29,836	28,129	+ 279	- 1,707
Total, Domestic Volunteer Service Programs .....	213,849	260,300	232,604	+ 18,755	- 27,696
Corporation for Public Broadcasting:					
Fiscal year 2000 (current request) with fiscal year 1999 comparable .....	250,000	325,000	300,000	+ 50,000	- 25,000
1999 advance (non-add) with fiscal year 1998 comparable .....	(250,000)	(250,000)	(250,000)	.....	.....
1998 advance (non-add) with fiscal year 1997 comparable .....	(260,000)	(250,000)	(250,000)	(- 10,000)	.....
Federal Mediation and Conciliation Service .....	32,525	33,481	33,481	+ 956	.....
Federal Mine Safety and Health Review Commission .....	6,049	6,060	6,060	+ 11	.....
National Commission on Libraries and Information Science .....	897	1,123	1,000	+ 103	- 123
National Council on Disability .....	1,791	1,793	1,793	+ 2	.....
National Education Goals Panel .....	1,495	2,000	2,000	+ 505	.....
National Commission on Cost of Higher Education .....	650	.....	.....	- 650	.....
National Labor Relations Board .....	174,661	186,434	174,661	.....	- 11,773
National Mediation Board .....	8,284	8,100	8,600	+ 316	+ 500
Occupational Safety and Health Review Commission .....	7,738	7,800	7,800	+ 62	.....
Physician Payment Review Commission (trust funds) .....	(3,258)	(3,578)	(3,258)	.....	(- 320)
Prospective Payment Assessment Commission (trust funds) .....	(3,257)	(3,579)	(3,257)	.....	(- 322)
RAILROAD RETIREMENT BOARD					
Dual benefits payments account .....	223,000	206,000	206,000	- 17,000	.....

Less income tax receipts on dual benefits .....	- 9,000	- 12,000	- 12,000	- 3,000	.....
Subtotal, Dual Benefits .....	214,000	194,000	194,000	- 20,000	.....
Federal payment to the Railroad Retirement Account .....	300	50	50	- 250	.....
Limitation on administration:					
Consolidated account .....	(87,728)	(88,800)	(87,728)		(- 1,072)
Inspector General .....	(5,394)	(5,400)	(5,394)		(- 6)
SOCIAL SECURITY ADMINISTRATION					
PAYMENTS TO SOCIAL SECURITY TRUST FUNDS .....	20,923	20,308	20,308	- 615	.....
ADDITIONAL ADMINISTRATIVE EXPENSES <sup>17</sup> .....	10,000			- 10,000	.....
SPECIAL BENEFITS FOR DISABLED COAL MINERS					
Benefit payments .....	625,450	581,470	581,470	- 43,980	.....
Administration .....	4,620	4,620	4,620		.....
Subtotal, Black Lung, fiscal year 1997/98 program level .....	630,070	586,090	586,090	- 43,980	.....
Less funds advanced in prior year .....	- 170,000	- 160,000	- 160,000	+ 10,000	.....
Total Black Lung, current request, fiscal year 1997/98 .....	460,070	426,090	426,090	- 33,980	.....
New advances, 1st quarter fiscal year 1998/1999 .....	160,000	160,000	160,000		.....
SUPPLEMENTAL SECURITY INCOME					
Federal benefit payments .....	26,559,100	23,710,300	23,710,300	- 2,848,800	.....
Beneficiary services .....	100,000	46,000	46,000	- 54,000	.....
Research and demonstration .....	7,000	16,700	7,000		- 9,700
Administration <sup>18</sup> .....	1,946,015	2,037,000	2,037,000	+ 90,985	.....
Automation investment initiative .....	19,895	50,000	50,000	+ 30,105	.....
Subtotal, SSI fiscal year 1997/98 program level .....	28,632,010	25,860,000	25,850,300	- 2,781,710	- 9,700
Less funds advanced in prior year .....	- 9,260,000	- 9,690,000	- 9,690,000	- 430,000	.....
Subtotal, regular SSI current year, fiscal year 1997/1998 .....	19,372,010	16,170,000	16,160,300	- 3,211,710	- 9,700
Additional GDR funding .....	25,000	75,000	75,000	+ 50,000	.....
SSI reforms (welfare) .....	150,000	100,000	100,000	- 50,000	.....

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[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
Total, SSI, current request, fiscal year 1997/1998 .....	19,547,010	16,345,000	16,335,300	- 3,211,710	- 9,700
New advance, 1st quarter, fiscal year 1998/1999 .....	9,690,000	8,680,000	8,680,000	- 1,010,000	.....
<b>LIMITATION ON ADMINISTRATIVE EXPENSES <sup>19</sup></b>					
OASDI trust funds .....	(3,068,300)	(2,992,440)	(2,934,440)	(- 133,860)	(- 58,000)
HI/SMI trust funds .....	(846,099)	(965,000)	(965,000)	(+ 118,901)	.....
Social Security Advisory Board .....	(1,268)	(1,600)	(1,268)	.....	(- 332)
User Fee Appropriation .....	.....	(35,000)	(35,000)	(+ 35,000)	.....
SSI .....	(1,946,015)	(2,037,000)	(2,037,000)	(+ 90,985)	.....
<b>Subtotal, regular LAE .....</b>					
OASDI automation .....	(5,861,682)	(6,031,040)	(5,972,708)	(+ 111,026)	(- 58,332)
SSI automation .....	(215,000)	(150,000)	(150,000)	(- 65,000)	.....
.....	(19,895)	(50,000)	(50,000)	(+ 30,105)	.....
<b>Subtotal, automation initiative .....</b>	<b>(234,895)</b>	<b>(200,000)</b>	<b>(200,000)</b>	<b>(- 34,895)</b>	<b>.....</b>
<b>Total, REGULAR LAE .....</b>					
Additional CDR funding .....	(6,096,577)	(6,231,040)	(6,172,708)	(+ 76,131)	(- 58,332)
SSI reforms (welfare) .....	(160,000)	(190,000)	(145,000)	(- 15,000)	(- 45,000)
.....	(150,000)	(100,000)	(100,000)	(- 50,000)	.....
<b>Total, LAE .....</b>	<b>(6,406,577)</b>	<b>(6,521,040)</b>	<b>(6,417,708)</b>	<b>(+ 11,131)</b>	<b>(- 103,332)</b>
<b>OFFICE OF INSPECTOR GENERAL</b>					
Federal funds .....	6,265	10,164	6,265	.....	- 3,899
Trust funds .....	(31,089)	.....	.....	(- 31,089)	.....

Portion treated as budget authority .....	(34,260)	(31,089)	(+ 31,089)	(- 3,171)
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Total, Office of the Inspector General:				
Federal funds .....	6,265	6,265	.....	- 3,899
Trust funds .....	(31,089)	(31,089)	.....	(- 3,171)
Total .....	(37,354)	(37,354)	.....	(- 7,070)
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Total, Social Security Administration:				
Federal funds .....	29,894,268	25,627,963	- 4,266,305	- 13,599
Current year fiscal year 1997/1998 .....	(20,044,268)	(16,787,963)	(- 3,256,305)	(- 13,599)
New advances, 1st quarter fiscal year 1998/1999 .....	(9,850,000)	(8,840,000)	(- 1,010,000)	.....
Trust funds .....	(4,321,756)	(4,226,797)	(- 94,959)	(- 106,503)
Trust funds considered BA .....	(6,437,666)	(6,448,797)	(+ 11,131)	(- 106,503)
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United States Institute of Peace .....	11,149	11,160	+ 11	.....
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Total, Title IV, Related Agencies:				
Federal Funds (all years) .....	30,873,751	26,666,624	- 4,207,127	- 92,216
Current year, fiscal year 1997/1998 .....	(20,773,751)	(17,526,624)	(- 3,247,127)	(- 67,216)
Fiscal year 1998/1999 .....	(9,850,000)	(8,840,000)	(- 1,010,000)	.....
Fiscal year 1999/2000 .....	(250,000)	(300,000)	(+ 50,000)	(- 25,000)
Trust funds .....	(4,421,393)	(4,326,434)	(- 94,959)	(- 108,223)
Trust funds considered BA .....	(6,537,303)	(6,548,434)	(+ 11,131)	(- 108,223)
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General administrative reduction .....	.....	- 30,500	- 30,500	- 30,500
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TITLE V—GENERAL PROVISIONS				
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SUMMARY				
Title I—Department of Labor:				
Federal Funds .....	8,739,722	9,358,815	+ 619,093	- 57,838
Trust Funds .....	(3,432,410)	(3,583,643)	(+ 151,233)	(- 142,377)
Title II—Department of Health and Human Services:				
Federal Funds .....	210,826,904	201,184,745	- 9,642,159	+ 1,023,949
Current year .....	(179,182,911)	(170,026,556)	(- 9,156,355)	(+ 823,949)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 1997 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 1998—Continued

[In thousands of dollars]

Item	1997 appropriation	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				1997 appropriation	Budget estimate
1999 advance .....	(31,643,993)	(30,958,189)	(31,158,189)	(-485,804)	(+200,000)
Trust Funds .....	(1,743,599)	(1,783,665)	(1,728,406)	(-15,193)	(-55,259)
Title III—Department of Education: Federal Funds .....	28,957,978	32,069,494	31,870,703	+2,912,725	-198,791
Title IV—Related Agencies:					
Federal Funds .....	30,873,751	26,758,840	26,666,624	-4,207,127	-92,216
Current year .....	(20,773,751)	(17,593,840)	(17,526,624)	(-3,247,127)	(-67,216)
1999 advance .....	(9,850,000)	(8,840,000)	(8,840,000)	(-1,010,000)	.....
2000 advance .....	(250,000)	(325,000)	(300,000)	(+50,000)	(-25,000)
Trust Funds .....	(4,421,393)	(4,434,657)	(4,326,434)	(-94,959)	(-108,223)
Title V—General Provisions: Federal Funds .....	.....	.....	-30,500	-30,500	-30,500
Total, all titles:					
Federal Funds .....	279,398,355	268,405,783	269,050,387	-10,347,968	+644,604
Current year .....	(237,654,362)	(228,282,594)	(228,242,198)	(-9,412,164)	(-40,396)
1999 advance .....	(41,493,993)	(39,798,189)	(39,998,189)	(-1,495,804)	(+200,000)
2000 advance .....	(250,000)	(325,000)	(300,000)	(+50,000)	(-25,000)
Trust Funds .....	(9,597,402)	(9,947,342)	(9,638,483)	(+41,081)	(-305,859)

1 Forward funded except where noted.  
2 Current funded.  
3 3 year availability.  
4 15-month availability.  
5 Includes \$20 million related to the Work Opportunity Tax Credit.  
6 2 year availability.  
7 All HHS accounts are current funded unless otherwise noted.  
8 Request includes bill language exempting from the excise tax vaccine purchased with appropriated funds; savings are estimated at \$25 million.  
9 Funds for these activities for fiscal year 1998 are provided through permanent appropriations in the welfare bill.  
10 All Education accounts are current funded unless otherwise noted.

- 11 Forward funded with the exception of parental assistance and educational technology.
- 12 All programs in this account are forward funded with the exception of current funded basic grants, Title I evaluation, Demonstration of Innovative Practices, High School Equivalency Program and the College Assistance Migrant Program.
- 13 Forward funded.
- 14 Comparable appropriation of \$60.993 million was provided in the Interior Appropriations Bill for fiscal year 1997. The comparable figure is included as a scorekeeping adjustment.
- 15 All programs are forward funded with the exception of Tribally Controlled Postsecondary Vocational Institutions.
- 16 These programs will be funded in the Institute for Museum and Library Sciences in fiscal year 1998.
- 17 No-year availability for these funds related to sections 9704 and 9706 of the Internal Revenue Code of 1986.
- 18 Figures include amounts for the SSI disability initiative previously displayed as a separate line item.
- 19 All trust fund limitations will be scored as BA in fiscal year 1998. Comparable adjustments for fiscal years 1997 and 1998 displayed as scorekeeping adjustments.

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