



## WSC POLICY BRIEF

### H.R. 6157 – Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019

#### CONFERENCE AGREEMENT

*The House on Wednesday passed the FY 2019 Defense and Labor-HHS-Education “minibus” spending bill that includes a total of \$90.5 billion for HHS, an increase in agency funding of \$2.3 billion above FY 2018 levels. The bill, passed by a vote of 361-61, now heads to President Donald Trump’s desk ahead of the new fiscal year, which begins October 1.*

#### Departmental Appropriations

- **National Institutes of Health (NIH):** \$39.1 billion for NIH, an increase of \$2 billion above the fiscal year 2018 enacted level.
- **Substance Abuse and Mental Health Administration (SAMHSA):** \$5.7 billion – \$584 million above the fiscal year 2018 enacted level.
- **Centers for Disease Control and Prevention (CDC):** \$7.9 billion – \$354 million below the fiscal year 2018 enacted level.
- **Health Resources and Services Administration (HRSA):** \$6.8 billion, which is \$107 million above the fiscal year 2018 enacted.

#### Relevant Appropriations by Category

##### Opioids and Substance Abuse

- **Substance Abuse Block Grant:** \$1.9 billion, the same as the fiscal year 2018 enacted level.
- **Infectious Diseases and the Opioid Epidemic:** \$5 million for a new initiative targeting infectious disease consequences of the opioid epidemic.



- **Opioid Prescription Drug Overdose (PDO) Prevention Activity:** \$475.5 million for the CDC's PDO activities, the same as the fiscal year 2018 funding level.
- **State Opioid Response Grants:** \$1.5 billion for grants to States to address the opioid crisis. Bill language provides \$50 million for grants to Indian tribes or tribal organizations. In addition, bill language includes a 15 percent set-aside for States with the highest age-adjusted mortality rate related to opioid use disorders.
- **Grants to Prevent Prescription Drug/Opioid Overdose and First Responder Training:** \$12 million for preventive grants; \$36 million for first responder training. The conferees encourage SAMHSA to ensure grantees incorporate robust evidence-based intervention training and facilitate linkage to treatment and recovery services.
- **Medication-Assisted Treatment for Prescription Drug and Opioid Addiction:** \$89 million for the program. Within this amount, the conferees include \$10 million for grants to Indian tribes, tribal organizations, or consortia.

## Mental Health

- **Certified Community Behavioral Health Clinics:** \$150 million for the Certified Community Behavioral Health Clinics program, an increase of \$50 million.
- **National Child Traumatic Stress Initiative:** \$63.9 million in new funding for the National Child Traumatic Stress Initiative.

## Workforce Training

- **Graduate Medical Education:** \$25 million above the FY 2018 enacted levels to support colleges of medicine at public universities located in the top quintile of States projected to have a primary care provider shortage.
- **Children's Hospitals GME:** \$325 million for the Children's Hospital Graduate Medical Education, an increase of \$10 million above the FY 2018 enacted level.
- **Advanced Education Nursing:** \$8 million to continue grants for the clinical training of sexual assault nurse examiners.
- **Mental and Behavioral Health Education Training:** \$18 million within the amount provided to Mental and Behavioral Health Education Training for Graduate Psychology Education.
- **Community Health Centers:** \$1.5 billion for Community Health Centers, a decrease of \$5.1 million below the FY 2018 enacted level.



## Maternal and Child Health

- **Children's Health and Development:** \$3.5 million within Special Projects of Regional and National Significance (SPRANS) for another year of the HRSA funded study focused on improving child health through a Statewide system of early childhood developmental screenings and interventions.
- **Maternal Mortality:** \$23 million within SPRANS for State Maternal Health Innovation Grants to establish demonstrations to implement evidence-based interventions to address critical gaps in maternity care service delivery and reduce maternal mortality.
- **Block Grant:** \$677.7 million for the Maternal and Child Health Block Grant, an increase of \$26 million over FY 2018 enacted levels.

## NIH Programs

- Chronic Disease Prevention and Health Promotion: \$1.19 billion, a \$24.9 million increase
- Alzheimer's disease research: \$2.34 billion, a \$425 million increase
- Cancer Moonshot research initiative: \$400 million, a \$100 million increase
- Brain Research through Application of Innovative Neurotechnologies (BRAIN) initiative: \$429 million, a \$29 million increase
- All of Us research initiative: \$376 million, an \$86 million increase
- Research to develop a universal influenza vaccine: \$140 million, a \$40 million increase
- Combating Antibiotic-Resistant Bacteria: \$550 million, a \$36 million increase
- Institutional Development Awards: \$362 million, a \$11 million increase
- Gabriella Miller "Kids First" pediatric cancer research initiative: \$12.6 million

## Other Provisions

- **Telehealth:** \$1 million through the Telehealth Network grant program to fund awards that use evidence-based practices that promote school safety and individual health, mental health, and well-being.
- **Disaster Preparedness:** \$264.6 million for Hospital Preparedness Cooperative Agreement Grants, the same as FY 2018 enacted levels.

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