THE CSTE WASHINGTON REPORT

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EDITOR'S NOTE: Washington is mourning the passing earlier today of Senator Edward M. Kennedy. Virtually no piece of legislation that affects the health of the American people has escaped his helping hand and shaping influence over the past 45 years. His commitment to improving access to quality healthcare and his deep understanding of the critical role of public health in safeguarding all Americans had no peer in Congress in over these decades. He will be sorely missed.

SENATE APPROPRIATIONS COMMITTEE ADOPTS FY 2010 LABOR-HHS-EDUCATION APPROPRIATIONS BILL -- The Senate full Appropriations Committee adopted its FY 2010 Labor-HHS-Education Appropriations bill on July 30th. The House passed its version of the bill on July 24th on a vote of 264-153. The respective bills fund all of the programs within the Centers for Disease Control and Prevention. The Senate is expected to take up its bill on the floor in September. Senior Appropriations staff are predicting that the bill will go to conference with the House and will not end up in an omnibus bill as happened last year and most of the years in the last decade. The Committee Reports can be read at: http://thomas.loc.gov/
Put bill number H.R. 3293 into the search window and then click on the hyperlinked House or Senate report. Details for selected CDC Programs follow below:

CDC Total
FY 2009 $6.614 b

FY 2010 Pres. Request	$6.643 b
FY 2010 House	$6.681 b
FY 2010 Senate	$6.828 b

Applied Epi Fellowship

FY 2009	$982,000
FY 2010 Pres. Request	$991,000
FY 2010 House	$991,000
FY 2010 Senate	$0 (The Senate provides a $5.141 m. increase for Public health workforce development)

Immunization (Section 317)

FY 2009	$495.9 m (does not reflect stimulus funding)
FY 2010 Pres. Request	$496.8 m
FY 2010 House	$496.8 m
FY 2010 Senate	$496.8 m.

HIV Prevention (State/Local)

FY 2009	$321.2 m
FY 2010 Pres. Request	$333.1 m
FY 2010 House	$348.1 m

(Not available at press time)

Zoonotic, Vector, Enteric

FY 2009	$67.9 m
FY 2010 Pres. Request	$73.1 m
FY 2010 House	$76.8 m
FY 2010 Senate	$67.6 m.

Food Safety

FY 2009	$22.5 m
FY 2010 Pres. Request	$26.7 m
FY 2010 House	$26.9 m
FY 2010 Senate	Does not provide separate funding for food safety

Preparedness, Detection and Control of Infectious Diseases

FY 2009	$157.4 m
FY 2010 Pres. Request	$168.7 m
FY 2010 House	$173.8 m
FY 2010 Senate	$162.4 m.

Chronic Diseases, Health Promotion, Genomics

FY 2009	$881.7 m
FY 2010 Pres. Request	$896.2 m
FY 2010 House	$910.8 m
FY 2010 Senate	$946.3 m.

Health Marketing

FY 2009	$84.6 m
FY 2010 Pres. Request	$82.5 m
FY 2010 House	$82.5 m
FY 2010 Senate	$82.5 m.

Health Tracking

FY 2009	$31.1 m
FY 2010 Pres. Request	$31.3 m
FY 2010 House	$33.1 m
FY 2010 Senate	$33.3 m.

Injury Prevention and Control

FY 2009	$145.2 m
FY 2010 Pres. Request	$148.6 m
FY 2010 House	$148.6 m
FY 2010 Senate	$148.6 m.

NVDRS

FY 2009	$3.535 m
FY 2010 Pres. Request	$3.544 m
FY 2010 House	$3.544 m (includes +$9,000 over FY 09)
FY 2010 Senate	$3.544 m.(includes + $9,000 over FY 09)

NIOSH

FY 2009	$360.0 m
FY 2010 Pres. Request	$368.4 m
FY 2010 House	$369.3 m
FY 2010 Senate	$371.6 m.

Terrorism Preparedness and Response: State and Local Cooperative Agreements

FY 2009	$700.5 m
FY 2010 Pres. Request	$714.9 m
FY 2010 House	$714.9 m
FY 2010 Senate	$714.9 m

HHS AWARDS $564 MILLION IN COOPERATIVE AGREEMENTS WITH STATES FOR HEALTH INFORMATION EXCHANGE PROGRAMS -- Funding under the HITECH Act will be provided to states to develop and promote regional health information exchanges and address barriers to widespread adoption and use of electronic health information across health care systems. Below is a fact sheet about the HITECH state grants:

- Over the next several months, cooperative agreements will be awarded through the **State Health Information Exchange Grant Programs** to states and qualified State Designated Entities (SDEs) to develop and advance mechanisms for information sharing across the health care system. States may choose to

enter into multi-state arrangements. A cooperative agreement is a partnership between the grant recipient and the Federal government. States and SDEs will be required to match grant awards beginning in 2011.

- Under these State cooperative agreements $564 million will be awarded to support efforts to achieve widespread and sustainable health information exchange (HIE) within and among states through the meaningful use of certified Electronic Health Records (EHRs). The goal of meaningful use of EHRs is for health care providers to use this technology to improve the quality and efficiency of care. State programs to promote HIE will help to realize the full potential of EHRs to improve the coordination, efficiency and quality of care.
- The Centers for Medicare & Medicaid Services will issue proposed criteria for meaningful use by the end of 2009.
- Legal, financial and technical support is necessary to enable consistent, secure, statewide HIE across health care provider systems. The State Health Information Exchange Grant Programs fund efforts at the state level to establish and implement appropriate governance, policies and network services within the broader national framework to rapidly build capacity for connectivity between and among health care providers.
- The grant programs will support states and/or SDEs in establishing HIE capacity among health care providers and hospitals in their jurisdiction.
- Grant performance will be evaluated on a quarterly basis to determine if there is improved capability for providers to actively exchange healthcare data focusing specifically on electronic order and receipt of labs and test results as well as e-prescribing.
- Participating states will also be expected to use their authority and resources to:
    - Develop and implement up-to-date privacy and security requirements for HIE;
    - Develop directories and technical services to enable interoperability within and across states;
    - Coordinate with Medicaid and state public health programs to enable information exchange and support monitoring of provider participation in HIE.
    - Remove barriers that may hinder effective HIE, particularly those related to interoperability across laboratories, hospitals, clinician offices, health plans and other health information exchange partners;
    - Ensure an effective model for HIE governance and accountability is in place; and
    - Convene health care stakeholders to build trust in and support for a statewide approach to HIE.

The respective state governments, federal government and private sector will all play important roles in advancing HIE among health care providers through the grant programs.

States will develop and implement Strategic Plans to ensure that there is measurable progress within states toward universal adoption of HIE before Medicare payment penalties begin in 2015.

Additional information is available at http://healthit.hhs.gov/stateHIEgrants

HHS SECRETARY SEBELIUS ANNOUNCES INTENT TO APPOINT HELENE GAYLE, MD, MPH CHAIR, PRESIDENTIAL ADVISORY COUNCIL ON HIV/AIDS – On August 24th, HHS Secretary Kathleen Sebelius announced her intent to appoint Helene Gayle, MD, MPH to serve as the Chair of the Presidential Advisory Council on HIV/AIDS. Secretary Sebelius made the announcement in Atlanta at the 2009 National HIV Prevention Conference.

"HIV remains a major threat to the health of our nation, and when one of our fellow citizens becomes infected with HIV every nine-and-a-half minutes, the epidemic affects all Americans," said President Obama. "As we organize numerous ways to engage the American people in confronting the HIV epidemic in our country, the Presidential Advisory Council on HIV/AIDS will play a critical role in developing and implementing a National HIV/AIDS Strategy. Dr. Gayle brings an intense commitment to fighting HIV/AIDS and unique experience in advancing public health. I look forward to her leadership and counsel."

"Dr. Gayle is an internationally acclaimed leader with a long history of working to end the epidemic both around the world and here at home in the United States. It is only fitting that we are announcing Dr. Gayle's appointment today at the 2009 National HIV Prevention Conference since she sponsored the first HIV Prevention Conference when she was at the CDC," said Secretary Sebelius. "We are hopeful that the Presidential Advisory Council on HIV/AIDS, under her leadership, will serve as a platform to share our plans and insights with the public health community and the public and serve as a vehicle to carry their ideas and input back to the Administration."

The Presidential Advisory Council on HIV/AIDS (PACHA) provides advice, information, and recommendations to the Secretary of Health and Human Service and the President regarding programs and policies intended to promote effective prevention of HIV disease, to advance research on HIV and AIDS, and to promote quality services to persons living with HIV and AIDS. The role of the Council is solely advisory. The Secretary provides the President with copies of all written reports provided to the Secretary by the Council.