THE CSTE WASHINGTON REPORT

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The CSTE Washington Report is provided as an information resource for members of the Council of State and Territorial Epidemiologists on federal legislation and regulation affecting public health and epidemiology in the U.S.

FY 2013 APPROPRIATIONS OUTLOOK AND SEQUESTRATION UPDATE – Work has been proceeding on finalizing the FY 2013 Labor-HHS-Education Appropriations bill as part of a giant omnibus appropriations measure. Only a few large issues are outstanding on the bill that cannot be handled by the staff level negotiations. The House bill language includes a CDC directive regarding consolidation of surveillance programs within a six month timeframe of the bill's enactment. The actual bill language is as follows:

> "Provided further, That not later than 180 days after the date of enactment of this Act the Director of CDC shall develop a comprehensive plan in concert with the State and local health officials to field and implement a single platform web-based data collection information technology system for collecting data from States and local governments for the various CDC programs and to reduce the overall voluntary reporting burden."

There was not corresponding language in the Senate bill, but CDC would be required to respond to this directive if the omnibus bill is adopted and/or a year-long Continuing Resolution (CR) is enacted instead that incorporates the provision as report language. It is possible that an omnibus bill will not muster enough House votes to pass in which case a year-long CR is likely. The federal government is currently operating under a CR that runs through March 27th. It is expected that, under a year-long CR, funding would

continue at current levels, except as deeply impacted by sequestration, should that occur on January 2nd if current White House-Congressional negotiations fail. Even if fiscal cliff negotiations are successful, cuts to domestic discretionary programs, including those administered by CDC, are likely to be significant – along the lines, for instance, of the President's FY 2013 budget request.

The current outlook for a deal on the fiscal cliff is not propitious. It is imperative, given necessary legislative process, for a deal to be reached this week if sequestration on January 2nd is to be avoided. However, Speaker Boehner and Minority Leader McConnell are both heading home for the weekend and the Capitol is virtually empty of lawmakers. Pundits are stating that the so-called "cliff" is actually more of a slope, that increased taxes and program cuts will be phased in over a few months to a year, thereby allowing time for a deal after the date sequestration must be implemented but before the worst of its impact is felt.

In a recent affiliate partner meeting, CDC said it has not received guidance from OMB on how to administer sequestration should it occur. ASTHO has advised program officers to be in touch with their project officers at CDC for guidance. It is rumored that some project officers are making an assumption of a ten percent cut to their grants. In all quarters, a certain amount of confusion and uncertainty seems to be prevalent.

Public health groups are engaging in a last minute call-in/tweet-in to Members of Congress urging them not to allow further cuts, under any scenario, to public health programs and agencies that have already suffered significant reductions in funding over the past two years.

FY 2014 BUDGET UPDATE -- The Administration has indicated that presentation of its FY 2014 budget will be delayed by at least three weeks. The budget is normally presented the first few days in February, but the agency pass-backs, which usually occur by Thanksgiving, have not yet happened. The likely cause of the delay is the fiscal cliff negotiations which could change budget scenarios for the agencies in FY 2014. During last week's CDC partner meeting, groups were assured that the FY 2014 budget for CDC will not reflect cuts made to public health programs because of full implementation during 2014 of the Affordable Care Act. This has been a problem for a number of programs, for example, the breast and cervical cancer screening program. OMB reasoning has been that since more people will have insurance coverage for these cancer screenings the CDC program can be cut, even eliminated. Chronic disease groups are working to make a case for retaining the full program and its funding.

HURRICANE SANDY EMERGENCY SUPPLEMENTAL APPROPRATION BILL – Senate Democrats have drafted a bill to provide $60 billion in emergency supplemental appropriations for areas and victims impacted by Hurricane Sandy. You can read a summary of the bill here. A total of $600 million is slated for the Department of Health and Human Services, but none appears to be directed to CDC. It is expected that Republicans will object to the price tag as too costly and to the lack of budget offsets to pay for the emergency spending.