DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATION BILL, 2017

JUNE 9, 2016.—Ordered to be printed

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

REPORT

[To accompany S. 3040]

The Committee on Appropriations reports the bill (S. 3040) making appropriations for Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2017, and for other purposes, reports favorably thereon without amendment and recommends that the bill do pass.

Amounts to new budget authority

Total of bill as reported to the Senate ....................... $932,211,568,000
Amount of 2016 appropriations ................................. 888,428,751,000
Amount of 2017 budget estimate ................................. 933,107,118,000
Bill as recommended to Senate compared to:
  2016 appropriations ........................................... + 43,782,817,000
  2017 budget estimate .......................................... − 895,550,000
Prostate Cancer.—The Committee is aware of NCI’s ongoing investment in prostate cancer research, and encourages further efforts into treatments for men with advanced disease as well as diagnostic and imaging methodologies common in other hormone-driven cancers with similar disease burden. The Committee encourages NCI to coordinate its response to these needs with other Federal agencies, and collaborators as appropriate, including the Department of Defense, as well as private research foundations and advocacy groups.

Psycho-Social Distress Complications.—According to the Institute of Medicine, nearly 50 percent of all cancer patients experience distress. Further, studies suggest that distress in cancer patients leads to higher healthcare costs, less compliance with treatment pathways, and poorer health outcomes. While significant advancements have been made in biomedical treatments in cancer care, the Committee is concerned that the unaddressed psycho-social needs of patients are adversely impacting the effectiveness and cost of care, as well as the individuals’ overall well-being. The Committee encourages NCI to implement distress screenings in the NIH Clinical Center and in NCI-funded clinical trials as appropriate.

Radiation Oncology.—It is increasingly evident that combination therapy-involving radiation therapy, surgery, chemotherapy, immunotherapy and/or precision therapy—provides the best treatment options for many cancer patients. The Committee applauds the recent funding announcement for Cooperative Agreements to Develop Targeted Agents for Use with Systemic Agents Plus Radiotherapy and supports the NCI’s prioritization of breaking down the existing silos, fostering a collaboration of the best scientists in far-reaching fields.

Sleep Health and Cancer.—The Committee understands the complex intersection between sleep health and cancer development, cancer progression, and remission. The Committee encourages NCI to explore the role of sleep in cancer development and progression.

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Appropriations, 2016 ................................................................. $3,115,538,000
Budget estimate, 2017 ............................................................. 3,069,901,000
Committee recommendation ................................................... 3,242,685,000

The Committee recommendation includes $3,242,685,000 for the National Heart, Lung, and Blood Institute [NHLBI].

Asthma.—The Committee applauds NHLBI for its efforts to develop better treatments to manage severe asthma as part of the Precision Medicine Initiative, and urges the NHLBI to expand these efforts.

Cardiovascular Disease [CVD].—The Committee is aware that for certain disease areas, like CVD, rural States and their respective patient populations have disproportionately high incidence. In the case of cardiovascular disease, high rates of obesity, diabetes, and smoking among rural populations create much higher risks for acute cardiovascular disease. While the NHLBI has the primary lead for research in CVD, other Institutes that include emphasis on children or bioengineering have important secondary roles in helping to generate positive research outcomes to combat this disease area. For this reason, the Committee urges the NIH to consider