

One Hundred Eleventh Congress  
of the  
United States of America

AT THE FIRST SESSION

*Begun and held at the City of Washington on Tuesday,  
the sixth day of January, two thousand and nine*

An Act

Making omnibus appropriations for the fiscal year ending September 30, 2009,  
and for other purposes.

*Be it enacted by the Senate and House of Representatives of  
the United States of America in Congress assembled,*

**SECTION 1. SHORT TITLE.**

This Act may be cited as the “Omnibus Appropriations Act,  
2009”.

**SEC. 2. TABLE OF CONTENTS.**

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DIVISION J—FURTHER PROVISIONS RELATING TO THE DEPARTMENT OF  
HOMELAND SECURITY AND OTHER MATTERS

**SEC. 3. REFERENCES.**

Except as expressly provided otherwise, any reference to “this Act” contained in any division of this Act shall be treated as referring only to the provisions of that division.

**SEC. 4. EXPLANATORY STATEMENT.**

The explanatory statement regarding this Act printed in the House of Representatives section of the Congressional Record on or about February 23, 2009 by the Chairman of the Committee on Appropriations of the House shall have the same effect with respect to the allocation of funds and implementation of this Act as if it were a joint explanatory statement of a committee of conference.

**SEC. 5. STATEMENT OF APPROPRIATIONS.**

The following sums in this Act are appropriated, out of any money in the Treasury not otherwise appropriated, for the fiscal year ending September 30, 2009.

H. R. 1105—254

OFFICE OF THE SECRETARY

GENERAL DEPARTMENTAL MANAGEMENT

(INCLUDING TRANSFER OF FUNDS)

For necessary expenses, not otherwise provided, for general departmental management, including hire of six sedans, and for carrying out titles III, XVII, XX, XXI, and XXIX of the Public Health Service Act (“PHS Act”), the United States-Mexico Border Health Commission Act, and research studies under section 1110 of the Social Security Act, \$389,925,000, together with \$5,851,000 to be transferred and expended as authorized by section 201(g)(1) of the Social Security Act from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund, and \$46,756,000 from the amounts available under section 241 of the PHS Act to carry out national health or human services research and evaluation activities: *Provided*, That of this amount, \$51,891,000 shall be for minority AIDS prevention and treatment activities; \$5,789,000 shall be to assist Afghanistan in the development of maternal and child health clinics, consistent with section 103(a)(4)(H) of the Afghanistan Freedom Support Act of 2002; and \$1,000,000 shall be transferred, not later than 30 days after enactment of this Act, to the National Institute of Mental Health to administer the Interagency Autism Coordinating Committee: *Provided further*, That of the funds made available under this heading for carrying out title XX of the PHS Act, \$13,120,000 shall be for activities specified under section 2003(b)(2), all of which shall be for prevention service demonstration grants under section 510(b)(2) of title V of the Social Security Act without application of the limitation of section 2010(c) of such title XX: *Provided further*, That funds provided in this Act for embryo adoption activities may be used to provide, to individuals adopting embryos, through grants and other mechanisms, medical and administrative services deemed necessary for such adoptions: *Provided further*, That such services shall be provided consistent with 42 CFR 59.5(a)(4): *Provided further*, That \$2,854,000 shall be used for the projects, and in the amounts, specified under the heading “General Departmental Management” in the explanatory statement described in section 4 (in the matter preceding division A of this consolidated Act): *Provided further*, That specific information requests from the chairmen and ranking members of the Subcommittees on Labor, Health and Human Services, and Education, and Related Agencies, on scientific research or any other matter, shall be transmitted to the Committees on Appropriations of the House of Representatives and the Senate (“Committees on Appropriations”) in a prompt, professional manner and within the time frame specified in the request: *Provided further*, That scientific information, including such information provided in congressional testimony, requested by the Committees on Appropriations and prepared by government researchers and scientists shall be transmitted to the Committees on Appropriations, uncensored and without delay.

OFFICE OF MEDICARE HEARINGS AND APPEALS

For expenses necessary for administrative law judges responsible for hearing cases under title XVIII of the Social Security Act (and related provisions of title XI of such Act), \$64,604,000,

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**[House Appropriations Committee Print]**

**Omnibus Appropriations Act, 2009**  
**(H.R. 1105; Public Law 111-8)**

**DIVISION F—DEPARTMENTS OF LABOR,  
HEALTH AND HUMAN SERVICES, AND EDU-  
CATION, AND RELATED AGENCIES APPRO-  
PRIATIONS ACT, 2009**

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OFFICE OF THE SECRETARY  
GENERAL DEPARTMENTAL MANAGEMENT  
(INCLUDING TRANSFER OF FUNDS)

The bill includes \$395,776,000 for General Departmental Management, including \$5,851,000 from Medicare trust funds. This total is \$41,762,000 above the fiscal year 2008 level and \$15,912,000 above the budget request. In addition, \$46,756,000 in program evaluation funding is provided. The bill also provides that \$1,000,000 shall be transferred, not later than 30 days after enactment of this Act, to the National Institute of Mental Health to administer the Interagency Autism Coordinating Committee (IACC), which will support the IACC's work authorized under the Combating Autism Act of 2006.

*Office of the Secretary*

The bill includes sufficient funds to continue the Area and National Poverty Centers at no less than the fiscal year 2008 level.

The Department of Health and Human Services (HHS) is expected to maintain support for the U.S.-Mexico Border Health Commission at the same level as in fiscal year 2008.

The HHS Secretary is directed to provide a detailed inventory of the Department's greenhouse gas emissions and a plan to reduce these emissions by December 31, 2009 to the Committees on Appropriations of the House of Representatives and the Senate.

According to the Centers for Disease Control and Prevention (CDC), healthcare-associated infections (HAIs) are one of the top ten leading causes of death in the United States, accounting for an estimated 99,000 associated deaths and \$20 billion in excess healthcare costs annually. HAIs are largely preventable. HHS is commended for its work in developing a national action plan with five year targets for reducing HAIs. The Department is directed to continue the HHS Steering Committee for the Prevention of HAIs, and associated workgroups, that it has established to coordinate prevention and implementation, research, information systems and technology, compliance and oversight, and public and provider outreach activities across the operating divisions of the Department.

To accelerate progress on preventing HAIs and to begin implementation of the national action plan, the bill includes nearly \$22,000,000 in additional funding over the fiscal year 2008 funding level for HAI-related initiatives within the Department. These increases include \$5,000,000 within the Office of the Secretary, \$7,500,000 within CDC and \$9,304,000 within the Agency for Healthcare Research and Quality (AHRQ). The Office of the Secretary shall use the additional \$5,000,000 to develop and implement a national campaign to empower consumers to be active participants in preventing HAIs; perform a comprehensive inventory of HAI data and databases; enhance prevention, surveillance, and research activities; improve integration of data across HHS systems; expand measures in CMS' Hospital Compare and improve regulatory oversight of hospitals and the hospital accreditation program; provide management support to the HHS Steering Committee for the Prevention of HAIs; and conduct other priority ac-

tivities related to reducing HAIs. A description of how the funds provided to CDC and AHRQ shall be used is included in the explanatory statement under those operating divisions.

To ensure that greater attention to this problem also occurs at the State level, the bill includes language within CDC requiring States to certify to the HHS Secretary that they will submit plans for reducing HAIs by January 1, 2010 to be eligible to receive a full allotment in this Act under the Preventive Health and Health Services Block Grant. The bill also directs HHS to conduct a review of these State plans and report to the Committees on Appropriations of the House of Representatives and the Senate not later than June 1, 2010 regarding the adequacy of such plans for achieving State and national goals for reducing HAIs.

It is noted that although 27 years have passed since HIV/AIDS was first identified in the U.S., there has never been a national plan to guide the coordination of prevention, care, and treatment programs. Further, the U.S. currently requires foreign countries receiving assistance to combat HIV/AIDS to develop and implement a single coordinated national AIDS strategy. HHS is encouraged to develop and implement a single national AIDS strategy to promote coordination among Federal agencies and State and local governments, set clear goals and benchmarks, and provide a basis for ensuring accountability.

Approximately 36 States have prescription drug repository programs, also known as prescription drug redistribution programs. These programs, often volunteer-driven, may save the health care system millions of dollars every year by allowing unused, unopened medications to be re-dispensed to patients who meet certain need-based criteria. Due to the potential for substantial savings that these programs have shown, HHS is directed to conduct a study of State drug repository programs, with recommendations for how the Federal government can assist States in implementing and expanding these programs. This study also should include an estimate of potential cost savings and identify best practices, including ways to maintain patient safety. HHS shall submit this report to the House and Senate Committees on Appropriations no later than January 1, 2010.

Due to the growing demand for, and lack of well-trained, social workers to serve a variety of needs for individuals, families, and communities throughout the nation, HHS is directed to provide a report to the Committees on Appropriations of the House of Representatives and the Senate within one year of enactment of this Act. This report shall analyze current workforce trends and gaps in incentives, and provide recommendations for the recruitment and retention of professional social workers.

The bill includes \$1,000,000 for the Interagency Working Group on Youth Programs, chaired by HHS. These funds shall be used to solicit input from young people, State children's cabinet directors, and non-profit organizations on youth programs and policies; develop an overarching strategic plan for Federal youth policy; and prepare recommendations to improve the coordination, effectiveness, and efficiency of programs affecting youth.

The bill provides \$7,000,000 for a Health Diplomacy Initiative in the Department of Health and Human Services. This health initia-

tive will focus on training health care workers and providing other services in, but not limited to, Central and South America. This health diplomacy initiative will help control diseases such as HIV/AIDS, tuberculosis, and malaria by giving local residents the training they need to provide basic health care in Latin America and other underserved communities.

Trauma is the most important cause of morbidity and mortality among children and adolescents, accounting for nearly 16,000 deaths, 250,000 hospital admissions and 9 million emergency department visits annually. While the goal is to deliver optimal care to injured children so that they attain the best possible outcomes after serious trauma, many questions about what constitutes optimal care remain unanswered. This gives rise to the tremendous variations in care and settings we see today. The HHS Secretary is directed to conduct a national prospective study on the variation in trauma care for children and adolescents in order to understand how the organization and processes of treatment affect outcomes and submit a report to the Committees on Appropriations of the House of Representatives and the Senate within six months of enactment of this Act that outlines how the Secretary will conduct this study.

The Assistant Secretary of Planning and Evaluation (ASPE) shall review the fiscal year 2008 awards under the home visitation initiative administered by the Administration for Children and Families and shall assess, in consultation with the Office of Management and Budget and independent experts if necessary, whether these awards met the evidentiary standards for this initiative specified in the explanatory statement for the Consolidated Appropriations Act, 2008. In addition, ASPE shall review any request for proposals for fiscal year 2009 awards for adherence to the evidentiary standards in this explanatory statement. ASPE shall report its findings to the Committees on Appropriations of the House of Representatives and the Senate by September 30, 2009.

The bill includes \$2,854,000 for the following projects in the following amounts:

Project	Amount
Black Health Care Coalition, Kansas City, MO for its Improving Community Cardiovascular Health Project.....	95,000
City of Detroit, MI for its Health Disparities Reduction Project for Women and Children.....	381,000
Commonwealth of Massachusetts Department of Public Health, Boston, MA, for the continued development of a program to reduce health disparities and infant mortality.....	238,000
Community Transportation Association of America, Washington, DC, for technical assistance to human services transportation providers on ADA requirements.....	714,000
Dillard University, New Orleans, LA for its Gentilly Center for Health Disparities and Disease Prevention.....	309,000
Family Health and Birth Center, Washington, DC for its Developing Families Center initiative.....	285,000
St. Augustine's College, Raleigh, NC for its St. Agnes Health Disparities Institute.....	285,000
Toledo Community Foundation, Toledo, OH for its Pathways Outcome Production Model initiative to improve birth outcomes for at-risk women.....	71,000
Voorhees College, Denmark, SC for a colonoscopy screening program for minority populations.....	381,000
Windham Hospital Foundation, Willimantic, CT for prenatal and case management services to low-income women.....	95,000

**LABOR, HEALTH AND HUMAN SERVICES, EDUCATION—Continued**

Agency	Account	Project	Amount	Requester(s)	
				House	Senate
Department of Health & Human Services	Health Resources and Services Administration (HRSA)—Health Facilities and Services	Xavier University, New Orleans, LA, for facilities and equipment	\$571,000	Jefferson, William J.; Alexander, Rodney	Landrieu; Vitter
Department of Health & Human Services	Health Resources and Services Administration (HRSA)—Health Facilities and Services	Yukon-Kuskokwim Health Corporation, Bethel, AK, for renovation and equipment	\$1,475,000	Young, Don	Murkowski
Department of Health & Human Services	Health Resources and Services Administration (HRSA)—Health Facilities and Services	Zufall Health Center, Dover, NJ for purchase of equipment	\$209,000	Frelinghuysen, Rodney P.	Lautenberg; Menendez
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Black Health Care Coalition, Kansas City, MO for its Improving Community Cardiovascular Health Project	\$95,000	Cleaver, Emanuel	
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	City of Detroit, MI for its Health Disparities Reduction Project for Women and Children	\$381,000	Kilpatrick, Carolyn C.; Conyers, Jr., John	Levin; Stabenow
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Commonwealth of Massachusetts Department of Public Health, Boston, MA, for the continued development of a program to reduce health disparities and infant mortality	\$238,000		Kennedy; Kerry
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Community Transportation Association of America, Washington, DC, for technical assistance to human services transportation providers on ADA requirements	\$714,000		Harkin
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Dillard University, New Orleans, LA for its Gentilly Center for Health Disparities and Disease Prevention	\$309,000	Jefferson, William J.	Landrieu

Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Family Health and Birth Center, Washington, DC for its Developing Families Center initiative	\$285,000	Norton, Eleanor Holmes	
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	St. Augustine's College, Raleigh, NC for its St. Agnes Health Disparities Institute	\$285,000	Miller, Brad	
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Toledo Community Foundation, Toledo, OH for its Pathways Outcome Production Model initiative to improve birth outcomes for at-risk women	\$71,000	Kaptur, Marcy	
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Voorhees College, Denmark, SC for a colonoscopy screening program for minority populations	\$381,000	Clyburn, James E.	
Department of Health & Human Services	HHS Office of the Secretary (OS)—Research & Demonstration (including Minority & Women's Health)	Windham Hospital Foundation, Willimantic, CT for prenatal and case management services to low-income women	\$95,000	Courtney, Joe	
Department of Health & Human Services	Substance Abuse and Mental Health Services Administration (SAMHSA)—Mental Health	211 Maine, Inc., Portland, ME, for a 211 telephone number enabling access to health and social services in the community	\$190,000		Snowe; Collins
Department of Health & Human Services	Substance Abuse and Mental Health Services Administration (SAMHSA)—Mental Health	American Red Cross, Lower Bucks County Chapter, Levittown, PA to provide mental health counseling and case management services, along with related services	\$95,000	Murphy, Patrick J.	
Department of Health & Human Services	Substance Abuse and Mental Health Services Administration (SAMHSA)—Mental Health	ChildNet—East Tennessee, Knoxville, TN for a children's mental health initiative	\$238,000	Duncan, Jr., John J.	
Department of Health & Human Services	Substance Abuse and Mental Health Services Administration (SAMHSA)—Mental Health	Children's Health Fund, New York, NY, for support services for the Mississippi Gulf Coast Children's Health Project, Gulfport, MS	\$238,000		Cochran