

May 1, 2025

The Honorable Shelley Moore Capito

Chair

Labor, Health and Human Services, Education, and Related Agencies

Subcommittee

Senate Committee on Appropriations

Washington, DC 20510

The Honorable Tammy Baldwin

Ranking Member

Labor, Health and Human Services,

Education, and Related Agencies

Subcommittee

Senate Committee on Appropriations

Washington, DC 20510

The Honorable Robert Aderholt

Chair

Labor, Health and Human Services,

Education, and Related Agencies

Subcommittee

House Committee on Appropriations

Washington, DC 20515

The Honorable Rosa DeLauro

Ranking Member

Labor, Health and Human Services,

Education, and Related Agencies

Subcommittee

House Committee on Appropriations

Washington, DC 20510

Dear Chairs Capito and Aderholt and Ranking Members Baldwin and DeLauro,

On behalf of the Bipartisan Policy Center and its (c)(4) affiliate, Bipartisan Policy Center Action, we are pleased to share our priorities for the Senate and House Labor, Health and Human Services, Education, and Related Agencies subcommittees for the fiscal year (FY) 2026 appropriations bill.

Rapidly rising debt and interest payments are slowing growth and making it more expensive for Americans to buy cars and homes, attend college, or pay off credit cards. To achieve fiscal sustainability, BPC recommends a continuation of the 2023 discretionary caps, enactment of program integrity reforms, and—outside the appropriations process—legislation to reduce the growth of mandatory program spending and increase federal revenue.

At the same time, BPC believes it is achievable to prudently invest in agencies and programs that expand opportunities for American families and businesses.

We are all familiar with the challenges of rising cost and accessibility of child care, learning loss in our public schools, gaps in workforce readiness, and questions about the value of higher education threaten our ability to thrive. In order to answer these and others faced by our nation, BPC established the Commission on the American Workforce, a bold initiative that will meet throughout 2025 to develop a national, bipartisan strategy to strengthen the workforce, expand economic opportunity, and ensure the United States remains competitive. We believe this strategy will provide Congress and the nation with a blueprint to further

strengthen our workforce and look forward to working with you and other congressional leaders to turn the recommendations into action.

In the meantime, BPC Action respectfully recommends funding the priorities below.

DEPARTMENT OF LABOR

Federal job training programs housed at the Department of Labor are not only underfunded but in need of reform. In the last Congress, House and Senate authorizers were close to adopting a reauthorization of the Workforce Innovation and Opportunity Act but were unable to complete their work. In the absence of an update to WIOA this year, it is important that the funding for workforce development be increased to match the current needs of workers and employers. We, however, cannot lose sight of the need for real reform, which is a key part of the work of our Commission.

Ensure that Funding Formulas for State UI Administration Reflect Current Needs and Costs

The Department of Labor's Employment and Training Administration should periodically update the factors used to calculate Unemployment Insurance (UI) administration costs in its annual justification to Congress to reflect current program needs. To support this effort, Congress and the department should align funding decisions with these updated analyses and adjust appropriations as needed to meet states' administrative requirements.

Dedicate Funds so States Have Sufficient Resources to Conduct Consistent Technology Modernization

The department's budget should contain dedicated funding for UI technology-related expenses to ensure that states receive consistent, predictable, and adequate resources to modernize technology. States' eligibility for funding should be contingent on them adopting systems to combat fraud and enhance fair and efficient administration; ongoing eligibility should be tied to regular progress reporting and effective use of funds.

Fund Initiatives to Support the Increasingly Collaborative UI System The department's UI National Activities should receive additional funding to support initiatives that enhance the overall functioning, integrity, and efficiency of the UI system.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

The ongoing restructuring of the Department of Health and Human Services aims to improve efficiency and streamline certain functions while establishing the Administration for a Healthy America. As restructuring continues, the administration and Congress must ensure critical programs fulfill their missions and receive the resources needed to succeed.



Behavioral Health and Substance Use

Provide Appropriate Resources for the Substance Abuse and Mental Health Services Administration

Programs administered by the Substance Abuse and Mental Health Services Administration (SAMHSA)—including the Community Mental Health Services Block Grant, the Substance Use Prevention, Treatment, and Recovery Services Block Grant, and the State Opioid Response program—form the foundation of the public behavioral health infrastructure. While we support maintaining funding for these programs to help states address local needs, invest in evidence-based practices, and expand access to care, BPC believes there are opportunities to increase efficiency and streamline redundant programs. We have previously identified similar "opioids related" programs across agencies and departments that share similar goals and have recommended that funding for those programs be <u>braided</u> to drive coordination between programs.

Support the Administration for Children and Families

Behavioral health support is also essential for young people involved in or at risk of entering the child welfare system. Programs administered by the Administration for Children and Families (ACF) help states integrate behavioral health services into their child welfare systems and promote trauma-informed care. These efforts are particularly vital for foster-involved youth, who experience disproportionately high rates of mental health and substance use challenges. We urge your committees to protect ACF's mission to support the health and mental well-being of America's youth.

Supporting Older Americans and Family Caregivers

Preserve the Administration of Community Living's Mission and Priorities
The Older Americans Act (OAA) established the Administration on Aging within HHS to
administer most OAA-funded programs. For more than a decade, this agency has operated
under the Administration for Community Living. Federal investment in social and nutrition
services is essential to keeping older Americans healthy and independent. OAA funding
supports critical programs and services for seniors and their family caregivers, including Agencies on Aging, family caregiver supports, and transportation services, among many
others. We strongly urge the committees to maintain current funding levels for OAA
programs.

Maintain Funding for Outreach and Education Programs

The Medicare Improvements for Patients and Providers Act supports targeted outreach and education to Medicare beneficiaries—especially those with low incomes or who live in rural areas—on programs that can help reduce Medicare costs, including Medicare Savings Programs and Medicare Part D Low-Income Subsidy. Specifically, MIPPA funding provides critical support to State Health Insurance Assistance Programs, area agencies on aging, and Aging and Disability Resource Centers/No Wrong Door Systems. To help the nation's seniors connect with resources that reduce out-of-pocket Medicare costs, we support continued funding for MIPPA programs through the end of 2026.



Supporting the Nation's Health Care Workforce

Maintain Funding for the Health Resources and Services Administration The Health Resources and Services Administration programs play a critical role in supporting the health care workforce needed to tackle the nation's behavioral health challenges and in supporting rural communities.

HRSA's behavioral health workforce programs help support the training, placement, and retention of professionals across a range of care settings, including primary care. Continued support for these initiatives is needed to address persistent workforce shortages and expand their overall reach. Additionally, HRSA funding supports the rural health care workforce and technical assistance to improve rural hospital quality and performance. Key programs include the Rural Residency Planning and Development Program, the Maternal and Child Health Block Grant, and the Medicare Rural Hospital Flexibility Program. Without federal support, rural communities risk losing health clinics, hospitals, and essential health care workers. We strongly recommend that the committees maintain these critical HRSA programs and provide the resources necessary to address the nation's behavioral health needs and protect rural access to care.

<u>Preventing Chronic Disease and Protecting Public Health</u>

Dedicate Appropriate Resources to Reverse the Chronic Disease Epidemic Reversing the chronic disease epidemic is critical to ensuring the long-term health outcomes and reducing the fiscal burden on the nation's health care programs. We urge the committees to maintain funding for the National Center for Chronic Disease Prevention and Health Promotion, as well as the Prevention and Public Health Fund—both essential tools to combat the chronic disease epidemic.

Maintain the Centers for Disease Control and Prevention's Role in Addressing Chronic Disease

The Centers for Disease Control and Prevention role in addressing and preventing chronic diseases remains essential, especially given the link between infectious and chronic diseases. Individuals with chronic conditions face a higher risk of severe outcomes from infectious diseases, and some infections can trigger or exacerbate some noncommunicable conditions. We recommend the committees continue funding CDC programs focused on noncommunicable disease prevention.

Strengthen Public Health Emergency Preparedness and Response
To strengthen the nation's preparedness and response to public health emergencies, we need to bolster CDC's forecasting and outbreak analytic functions, accelerate its data modernization activities, and be ready to deploy its current workforce to directly support local public health officials on the frontlines. We recommend the committees maintain funding for CDC's Center for Forecasting and Data Analytics and the Administration for Strategic Preparedness and Response's Hospital Preparedness Program, as proposed by the



administration. In addition, the committees should support CDC's response capabilities by providing additional data collection and hiring authorities.

Supporting Innovation and Research

Strategic investments in innovation and research are critical to maintain U.S. leadership on issues such as artificial intelligence and biomedical research. We support targeted investments in the National Institutes of Health (NIH), including the Office of Nutrition Research, as aligned with the Make America Health Again agenda. To bolster U.S. leadership on artificial intelligence, we also support NIH initiatives such as Bridge2AI and AIM-AHEAD, which develop public datasets to train AI models and expand access to training and computing resources. Additionally, we support funding for the Advanced Research Projects Agency for Health (ARPA-H) programs including CARE and PRECISE-AI, which focus on monitoring and correcting performance issues. Continued support for and the Agency for Healthcare Research and Quality is also critical, particularly for programs like the Digital Healthcare Research Program and the Program.

Child Care

Increase Child Care Development Block Grant Funding to Cover More Eligible Children The Child Care and Development Block Grant is the primary federal funding stream for child care and has historically received broad, bipartisan support. Funding for states is determined using a data-driven formula based on the number of children under age 13 in the state alongside other demographic data. The program currently serves less than one-quarter of eligible children as a result of chronic underfunding. Therefore, BPC urges \$12.4 billion in total to move us closer to serving all eligible children.

Provide Dedicated Child Care Facilities Funding

While investments in facilities are critical, they are often not feasible for providers who are operating within a broken system and razor-thin profit margins. Consequently, providers do not have the capital to fund investments that prioritize facility-related repairs. Without the support of Congress, child care businesses will be unable to provide the necessary investments and parents, especially those in rural areas, will be denied access to care. Therefore, BPC urges your committees to provide dedicated funding for facilities.

Expand Access for Preschool Development Block Grants Birth through Five PDG B-5 enabled states to create and enhance state early childhood systems during the pandemic which proved crucial to expanding access to care for working families, increasing parental choice, meeting deteriorating infrastructure needs, improving data systems, and increasing the quality of early childhood systems in ways that work for their communities. BPC urges your committee to maintain the current level of funding at \$315 million.



Enhance Federal Supports for Tribal Child Care Funding

Unlike CCDBG state-based awards, funding for tribes is based on a flat percentage irrespective of the tribal child count. American Indian/Alaska Native (AI/AN) children eligible for subsidies receive them at less than half the rate of the national average, with just 6% of those eligible receiving subsidies. Allocating funding to tribes based on a flat percentage is inconsistent with the allotment mechanism for states and does not meet the needs of AI/AN children.

We also urge your committees to work with the House Natural Resources Subcommittee on Indian and Insular Affairs, Senate Committee on Indian Affairs, House Committee on Education and Workforce, and Senate Committee on Health, Education, Labor, and Pensions to address the gap in funding to serve AI/AN children living off reservation land. BPC estimates as many as 87% of AI/AN children live outside of a reservation, with approximately 80% living in metropolitan areas. Amending federal law or policies to give tribes flexibility to serve the child care needs of their members and descendants who live off-reservation in urban areas would enable tribes to better meet the needs of their tribal community.

We also urge the committee to highlight and work with the authorizing committees of jurisdiction to establish a data-driven method to provide federal child care assistance based on the needs of AI/AN families.

DEPARTMENT OF EDUCATION

As students and schools work to accelerate learning gains after the pandemic, Congress should protect programs that are most critical to students being able to attend schools that can meet their needs. We therefore support funding for federal education programs that support our nation's most vulnerable students and communities, public school choice, and data transparency, including the National Assessment of Educational Progress (NAEP). In addition, Congress should ensure there are sufficient resources to provide low-income students pursuing a postsecondary education with the necessary support to access and complete their education.

Serve High Need Students and Communities by Protecting Title I and IDEA Funding Title I funding remains essential for schools serving our nation's most economically disadvantaged students, providing flexible resources that help close persistent resource and achievement gaps, especially in districts and schools with limited or no ability to access or increase local funding. Title I can fund as much as 10% of a school's budget in high poverty areas. Funded at \$19 billion for FY25, this investment should be protected.

Similarly, the Individuals with Disabilities Education Act (IDEA) deserves robust support as these funds, along with state and local resources, enable schools to provide specialized instruction and services that help students with disabilities achieve their full potential, honoring our national commitment to educational opportunity while reducing financial pressure on local districts. In addition to supporting critical services for students in K-12, resources from Parts B and C bolster early intervention services and supports that increase the



likelihood of success when those children enter kindergarten, consistent with BPC policy favoring a strong early learning infrastructure for children.

Maintain Investments in Public School Choice

Furthermore, strengthening our investment in public school choice programs presents a bipartisan opportunity to support innovation while maintaining accountability within public education. Magnet schools have proven effective at reducing segregation while offering specialized curricula that prepare students for future careers in high-demand fields. Likewise, the Charter Schools Program enables the opening of innovative public schools that are held accountable for their success, allowing successful practices to be identified and potentially scaled to benefit the broader public education system. By strategically increasing funding for these complementary programs, Congress can demonstrate its commitment to both educational excellence and equitable opportunity for all American students.

Protect Transparency

We also recommend robust funding to collect, analyze, and make publicly available critical education data, such as the Common Core of Data and EDFacts, and protecting funding for administering the National Assessment of Educational Progress. In particular, the committee should protect funding for activities that support the development of a valid and trustworthy NAEP assessment that is comparable to previous years, including training, item development and staffing. A diminished NAEP will not serve transparency and our understanding of the impact of successful state and local policies.

The State Longitudinal Data System program also supports state investments in data systems to collect and report data across a number of state programs. These systems are resource intensive, and federal investments help ensure a certain level of quality to better serve parents and other educational system stakeholders. Cuts to this program could make it difficult to fulfil continuation funding for the 28 state grantees already awarded funds in FY2O23 and provide continuing support to states.

Investment in these and other critical education data systems and programs should be a top priority for the Committee's bill. Strong systems and reporting are imperative so our nation's policymakers at all levels of government—local, state, and federal—can ensure that students and their families are accessing a quality education.

Protect and Expand Pell Grant Funding

The Pell Grant is the principal federal source of need-based grant aid and is critical for making college accessible to low-income students. The Congressional Budget Office projects, however, that the program will end FY25 with a \$2.7 billion deficit. BPC recommends that Congress protect existing and consider increasing Pell funding to ensure students receive the need-based aid for which they qualify.



Support Student Parents to Stay in School

Child Care Access Means Parents in School (CCAMPIS) is the sole federal program intended to provide supplemental support to student parents from low-income backgrounds in order to access child care while participating in post-secondary education. As the only program intended to support this student population, CCAMPIS funding promotes further upskilling of the American workforce, and is vital to enabling more parents to engage in and achieve higher education attainment. BPC recommends funding for this program be increased by \$15 million in FY26 for a total allocation of \$100 million.

Lastly, we recommend that Congress ensure that funded programs are adequately staffed to ensure timeliness in funding and technical assistance, as well as grant competitions.

SOCIAL SECURITY ADMINISTRATION

One of the key financial decisions facing older Americans is when to claim Social Security retirement benefits. While these benefits are available as early as age 62, claiming later permanently raises monthly benefits, with the maximum benefits available to those who claim at age 70. Delaying claiming is thus equivalent to purchasing a greater inflation-adjusted annuity that will be paid as long as the beneficiary lives. Most people, however, do not claim Social Security at their optimal age, usually because they claim too early. BPC supports efforts by members of your subcommittee to direct the Social Security Administration to revise the official names of claiming ages to better reflect the implications of claiming decisions.

• Requested Report Language:

The committee directs the Social Security Administration to improve the clarity of terms used in public materials and communications to describe the different ages at which beneficiaries may claim retirement benefits in order to improve the public's understanding of the effect of different claiming strategies. In updating the terminology, SSA shall consider options such as "minimum benefit age," "standard benefit age," and "maximum benefit age," to replace "early eligibility age," "normal [or full] retirement age," or "delayed retirement credits," respectively.

In addition to these recommendations, BPC will continue working with the authorizing committees to do their part in designing, directing, and overseeing the critical work of the federal government, as both authorizing and appropriating are integral to fully realizing Congress's role under the Constitution.

BPC Action commends your long-standing commitments to support programs—including those outlined above—crucial to American prosperity.



Thank you for your consideration, and if you have any questions, please reach out to me at mstockwell@bpcaction.org.

Sincerely,

Michele Stockwell

President, Bipartisan Policy Center Action

