



Legislative Bulletin.....April 13, 2011

Contents:

Amendments to H.R. 1217—A bill to Repeal the Prevention and Public Health Fund.

Order of Business: The bill is scheduled to be considered on Wednesday, April 13th, under a structured rule ([H.Res. 219](#)) that provides for one hour of general debate equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce. It makes in order only those amendments printed in the Rules Committee [report](#) accompanying the resolution and described below. Lastly, the rule provides for one motion to recommit with or without instructions.

AMENDMENTS MADE IN ORDER

#1 **Rep. Jackson Lee (D-TX)** – The amendment would require the Department of Health and Human Services within 10 days of enactment to post on its public website a notice of rescission of unobligated funds and the amount rescinded from repealing the Prevention and Public Health Fund. **Note:** The Congressional Budget Office estimates that repealing the Prevention and Public Health fund would reduce direct spending by \$16 billion over a ten year period (FY2012-FY2021).

#2 **Castor (D-FL)** – The amendment would require the U.S. Government Accountability Office (GAO) within 90 days after enactment to conduct a study and submit a report to Congress on the impact of repealing federal funding for prevention, wellness, and public health activities would have on preventing chronic diseases and promoting health. **Note:** Repealing the Prevention and Public Health Fund does not cut any specific federal health program. It simply eliminates supplemental funding in addition to their current funding for programs and activities already authorized under current law.

#3 **Castor (D-FL)** – The amendment would require the GAO within 90 days after enactment to conduct a study and submit a report to Congress on the impact of repealing federal funding for prevention, wellness, and public health activities would have on States and communities. **Note:** Obamacare ushered in enormous federal mandates on the States by requiring them to expand their Medicaid programs and act as bureaucratic agents for the federally-regulated state-based exchanges beginning in 2014 (and currently being implemented). A more useful amendment to help States would have required a GAO report to Congress on the financial and regulatory strain Obamacare is putting on the States to comply with the federal government take over of our health care system.

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