



Budget Request Summary—Fiscal Year 2015

Centers for Disease Control and Prevention

Overview

The fiscal year (FY) 2015 president’s budget request for CDC is **\$6.6 billion**, a decrease of \$243 million from FY 2014 enacted. The requested amount includes \$5.4 billion in budget authority, \$810 million from the Prevention and Public Health Fund (PPHF), and \$397 million from Public Health Service (PHS) evaluation funds.

New Programs

The FY 2015 budget request proposes new programs to expand **global health security**, detect and prevent **antibiotic resistance**, and address the **prescription drug overdose** epidemic.

Increased Program Investments

The FY 2015 budget request increases investment in CDC programs for **healthcare-associated infections**, **food safety**, **polio eradication**, **violent death reporting**, **gun violence prevention research**, **domestic HIV/AIDS**, and **public health workforce capacity**.

New Approach

In FY 2015, a **Working Capital Fund** permanently replaces the direct appropriation for business services at CDC.

FY 2015 Request

Budget authority	\$5.4 billion
PPHF	\$810 million
PHS evaluation	\$397 million
Program level	\$6.6 billion

Compared to FY 2014

Decrease: \$243 million (3.5%)

New FY 2015 Programs

Global health security
\$45 million

Antibiotic resistance \$30 million
Prescription drug overdose \$15.6 million



www.cdc.gov/budget

Protect Americans from Infectious Diseases

Emerging and Zoonotic Infectious Diseases

CDC detects and tracks a range of microbes, responds to outbreaks, and serves as an early warning system to rapidly identify new infectious disease threats. The FY 2015 request of **\$445 million** for emerging and zoonotic infectious diseases—including \$52 million from the PPHF—is an **increase of \$55 million** from FY 2014. Increased funding will further reduce healthcare-associated infections, improve food safety, and invest in antibiotic resistant detection and response.

Antibiotic resistance: CDC estimates that antibiotic resistance causes over 2 million illnesses and about 23,000 deaths each year. The FY 2015 budget proposes \$30 million to detect and protect against the spread of the most deadly and costly antibiotic resistant pathogens.

Advanced molecular detection: CDC is modernizing public health microbiology and bioinformatics capacities to speed disease detection and response. The FY 2015 request includes level funding of \$30 million to continue the effort.

Healthcare-associated infections: The FY 2015 request proposes an increase of \$14 million for the National Healthcare Safety Network, for a total request of \$32 million in FY 2015. CDC will extend reporting on healthcare-associated infections to more than 3,000 additional sites.

Food safety: CDC aims to reduce the estimated 48 million illnesses, 128,000 hospitalizations, and 3,000 deaths of Americans each year caused by pathogens in contaminated food. The FY 2015 request proposes an increase of \$10 million to address unmet needs in the nation's food safety system, for a total request of \$50 million.

HIV/AIDS, Viral Hepatitis, Sexually Transmitted Diseases, and Tuberculosis Prevention

CDC prevents and controls HIV, viral hepatitis, sexually transmitted infections, and tuberculosis in the United States. The FY 2015 request of **\$1.1 billion**—including \$3 million in PHS evaluation funds—is an **increase of \$7.4 million** from FY 2014. The FY 2015 request supports the goals of the *National HIV/AIDS Strategy*. Increased funding will improve HIV surveillance (\$4.4 million) and refine HIV school health activities (\$3 million).

HIV surveillance: The FY 2015 request proposes a \$4.4 million increase from FY 2014 to improve HIV surveillance timeliness, quality, and efficiency. CDC surveillance data is used to improve the delivery of services to people living with HIV across the entire continuum of care. This increase will also support projects that identify and share best practices for HIV testing and other HIV prevention activities.

Immunization and Respiratory Diseases

CDC administers the two primary federal programs that support immunization for underinsured and uninsured U.S. populations—the discretionary Immunization program (Section 317) and the mandatory Vaccines for Children program. CDC also detects, prevents, and responds to vaccine-preventable, respiratory, and related infectious disease threats—as well as provides preparedness planning for pandemic influenza.

The FY 2015 budget request of **\$748 million** for immunization and respiratory diseases—including \$127 million from the PPHF and \$13 million in PHS evaluation funds—is a **decrease of \$36 million** from FY 2014. The FY 2015 request proposes a \$51 million decrease for the immunization program—for a total request of \$561 million in FY 2015—due to an expectation of increased insurance coverage for immunization services in 2015. The FY 2015 request also reflects a realignment of \$15 million to CDC to sustain international influenza activities.

Ensure Global Disease Protection

Global Health

CDC's scientists and health experts are embedded in countries around the globe. The agency uses its expertise in translating and adapting scientific evidence into public health action to strengthen capacity in partner countries, leading to public health impact. The FY 2015 request of **\$464 million** for global health is an **increase of \$48 million** from FY 2014 enacted. Increased funding supports CDC's global health security programs and expansion of polio eradication efforts. The request eliminates dedicated funding (\$7.5 million) for National Public Health Institutes.

Global health security: The request includes \$45 million for CDC to accelerate progress toward a world safe and secure from infectious disease threats. CDC will partner with up to 10 additional countries in 2015 to create sustainable emergency management programs to manage emerging threats, enhance early detection, and effectively respond to global epidemics and other public health emergencies.

Polio eradication: The FY 2015 request includes a \$10 million increase for polio eradication from FY 2014, for a total request of \$161 million in FY 2015. The increase supports the Global Polio Eradication Initiative and partner efforts towards the goal of stopping all wild poliovirus transmission and any new vaccine-derived polioviruses by December 2014 and certifying the end of all wild poliovirus transmission and any new vaccine-derived polioviruses by December 2018.

Protect Americans from Natural and Bioterrorism Threats

Public Health Preparedness and Response

CDC works 24/7 to ensure the security, safety, and health of the United States from public health threats that are foreign and domestic, intentional and naturally occurring. CDC provides life-saving responses to chemical, biological, radiological, and nuclear threats, as well as other disasters, outbreaks, and epidemics. The FY 2015 budget request of **\$1.3 billion** for public health preparedness and response is a **decrease of \$54 million**, or 3.9%, from FY 2014. The request proposes an \$8 million decrease for the Strategic National Stockpile and a \$46 million decrease for State and Local Preparedness and Response Capability.

Monitor Health and Ensure Laboratory Excellence

Public Health Scientific Services

CDC leads, promotes, and facilitates science standards and policies to reduce the burden of diseases in the United States and globally. The FY 2015 request of **\$526 million** for public health scientific services—including \$95.1 million in PHS evaluation and \$53 million for the PPHF—is an **increase of \$43 million** from FY 2014 enacted. The proposed increase will expand electronic death registration systems and restore cross-cutting scientific activities and fellowship programs affected by reductions in FY 2014.

Prevent the Leading Causes of Disease, Disability, and Death

Birth Defects and Developmental Disabilities

CDC promotes the health of babies, children, and adults and enhances the potential for full, productive living. The FY 2015 request of **\$132 million** for birth defects and developmental disabilities is the **same as FY 2014** enacted.

Chronic Disease Prevention and Health Promotion

Chronic diseases are among the most prevalent, costly, and deadly of all health problems—and the most preventable. CDC leads U.S. efforts to prevent and control chronic diseases and associated risk factors. The FY 2015 request of **\$1.1 billion** for chronic disease prevention and health promotion—including \$469.7 million from the PPHF—is a **decrease of \$110 million** from FY 2014 enacted. Decreases reflect increased coverage for cancer services through health reform and elimination of the Racial and Ethnic Approaches to Community Health (REACH) program.

Diabetes: The FY 2015 request proposes a continuation of FY 2014 increased investments for diabetes, for a total request of \$150 million in FY 2015. CDC's expanded approach helps state and local partners address primary prevention for individuals with pre-diabetes, including nutrition and physical inactivity.

Partnerships to Improve Community Health: This is a new, community-based chronic disease prevention initiative that CDC began in FY 2014. The FY 2015 request proposes \$80 million for CDC to help communities implement evidence-based interventions and innovative, promising practices.

Tobacco prevention and control: Tobacco use is the leading preventable cause of disease, disability, and death in the United States. The FY 2015 request includes \$210.8 million to continue the national tobacco education campaign that raises awareness about the health effects of tobacco use and prompts smokers to quit.

Injury Prevention and Control

CDC is the lead federal agency focused on preventing unintentional and intentional injuries that occur outside of the workplace. The FY 2015 request of **\$194 million** for injury prevention and control—including \$5.6 million in PHS evaluation funds—is an **increase of \$43 million** from FY 2014 enacted. The proposed increase supports expansion and enhancement of rape prevention program evaluation, gun violence prevention research, the National Violent Death Reporting System, and prescription drug overdose prevention.

Prescription drug overdose: More than 60 people die every day in the United States from prescription drug overdoses, most of which involve prescription opioid pain relievers. The FY 2015 budget request includes \$15.6 million to equip high-burden states with resources to address this growing public health concern.

Keep Americans Safe from Environmental and Work-related Hazards

Environmental Health

Environmental health programs at CDC prevent illness, disabilities, and premature death caused by environmental exposures. The FY 2015 request of **\$169 million** for environmental health—including \$24 million from the PPHF—is a **decrease of \$11 million** from FY 2014 enacted. Funding for the Environmental and Health Outcome Tracking Network accounts for all of the proposed decrease.

Occupational Safety and Health

The National Institute for Occupational Safety and Health is the primary federal entity responsible for conducting research, making recommendations, and translating knowledge for the prevention of work-related illness and injury. The entire FY 2015 discretionary request of **\$281 million** for occupational safety and health is from PHS evaluation funds—representing a **decrease of \$52 million** from FY 2014 enacted. In a limited-resource environment, the budget request proposes the elimination of Education and Research Centers, the National Mesothelioma Registry and Tissue Bank, and the NORA Agriculture, Forestry, and Fishing sector.

Mandatory funding levels proposed in FY 2015 for occupational health and safety at CDC include \$55 million for the Energy Employees Occupational Illness Compensation Program Act and \$282 million for the World Trade Center Health Program. Proposed funding for the World Trade Center Health Program represents a \$14 million increase from FY 2014 for the addition of certain cancers to the list of related conditions and for the program inclusion of responders from the Shanksville, Pennsylvania and Pentagon sites.

Provide Public Health Leadership

Cross-cutting Activities

The FY 2015 budget request includes **\$124 million** to support CDC's cross-cutting, mission-critical efforts, a **decrease of \$175 million** from FY 2014 enacted. The request proposes elimination (\$160 million) of the Preventive Health and Health Services Block Grant. The FY 2015 request also represents a decrease of \$14 million from FY 2014 enacted for buildings and facilities, for a total request of \$10 million in FY 2015.

Agency for Toxic Substances and Disease Registry

Budget Request Summary

Managed as part of CDC, the Agency for Toxic Substances and Disease Registry (ATSDR) is the principal non-regulatory federal public health agency responsible for addressing human health effects associated with toxic exposures. The FY 2015 request of **\$75 million** for ATSDR is the **same as FY 2014** enacted. Requested funds are needed to maintain ATSDR's scientific and programmatic capabilities to safeguard human health.

For more information, please visit www.cdc.gov/budget

Centers for Disease Control and Prevention

(dollars in thousands)	FY 2013 Final ¹	FY 2014 Enacted ¹	FY 2015 President's Budget	2015 +/-2014
Immunization and Respiratory Diseases	\$718,169	\$784,548	\$748,066	-\$36,482
<i>Immunization and Respiratory Diseases - BA</i>	\$602,593	\$611,384	\$607,942	-\$3,442
<i>Immunization and Respiratory Diseases - PHS Eval. Transfer</i>	\$12,864	\$12,864	\$12,864	\$0
<i>Immunization and Respiratory Diseases - PPHF</i>	\$90,883	\$160,300	\$127,260	-\$33,040
<i>Immunization and Respiratory Diseases - PHSSEF</i>	\$11,829	N/A	\$0	N/A
-- Immunization Program Level	\$552,043	\$611,990	\$560,508	-\$51,482
-- Immunization Program - BA	\$448,296	\$438,826	\$420,384	-\$18,442
-- National Immunization Survey - PHS Eval. Transfers	\$12,864	\$12,864	\$12,864	\$0
-- Immunization Program (PPHF)	\$90,883	\$160,300	\$127,260	-\$33,040
-- Influenza/Influenza Planning and Response	\$166,126	\$172,558	\$187,558	\$15,000
HIV/AIDS, Viral Hepatitis, STI and TB Prevention	\$1,095,371	\$1,120,566	\$1,127,942	\$7,376
<i>HIV/AIDS, Viral Hepatitis, STI and TB Prevention - BA</i>	\$1,091,680	\$1,120,566	\$1,124,942	\$4,376
<i>HIV/AIDS, Viral Hepatitis, STI and TB Prevention - PHS Eval. Transfer</i>	\$3,691	\$0	\$3,000	\$3,000
-- Domestic HIV/AIDS Prevention and Research ²	\$768,635	\$788,809	\$796,185	\$7,376
-- HIV Prevention by Health Department ²	\$377,419	\$398,238	\$398,238	\$0
-- Surveillance, Research and Programs to Support HIV Prevention ²	\$357,097	\$359,410	\$363,786	\$4,376
-- Surveillance, Research and Programs to Support HIV Prevention- PHS Eval. Transfer	\$3,691	\$0	\$0	\$0
-- School Health – HIV - BA	\$30,428	\$31,161	\$31,161	\$0
-- School Health – HIV - PHS Eval. Transfer	\$0	\$0	\$3,000	\$3,000
-- Viral Hepatitis	\$31,368	\$31,410	\$31,410	\$0
-- Sexually Transmitted Infections (STIs)	\$154,861	\$157,719	\$157,719	\$0
-- Tuberculosis (TB)	\$140,507	\$142,628	\$142,628	\$0
Emerging and Zoonotic Infectious Diseases	\$341,396	\$390,447	\$445,299	\$54,852
<i>Emerging and Zoonotic Infectious Diseases - BA</i>	\$297,222	\$338,447	\$393,549	\$55,102
<i>Emerging and Zoonotic Infectious Diseases - PPHF</i>	\$44,174	\$52,000	\$51,750	-\$250
-- Core Infectious Diseases ³	\$216,982	\$218,647	\$249,749	\$31,102
-- Food Safety	\$31,009	\$40,089	\$50,089	\$10,000
-- National HealthCare Safety Network	\$17,928	\$18,071	\$32,071	\$14,000
-- Quarantine	\$31,303	\$31,640	\$31,640	\$0
-- Federal Isolation and Quarantine	N/A	N/A	\$1,000	\$1,000
-- Advanced Molecular Detection (AMD)	\$0	\$30,000	\$30,000	\$0
-- Epi and Lab Capacity program (PPHF)	\$32,424	\$40,000	\$40,000	\$0
-- Healthcare-Associated Infections (PPHF)	\$11,750	\$12,000	\$11,750	-\$250
Chronic Disease Prevention and Health Promotion	\$1,002,550	\$1,187,962	\$1,077,957	-\$110,005
<i>Chronic Disease Prevention and Health Promotion - BA</i>	\$769,517	\$741,962	\$608,253	-\$133,709
<i>Chronic Disease Prevention and Health Promotion - PPHF</i>	\$233,033	\$446,000	\$469,704	\$23,704
-- Tobacco	\$130,784	\$105,767	\$105,767	\$0
-- Tobacco (PPHF)	\$60,302	\$105,000	\$105,000	\$0
-- Nutrition, Physical Activity and Obesity	\$43,604	\$5,092	\$36,092	\$31,000
-- Nutrition, Physical Activity and Obesity (PPHF)	\$0	\$35,000	\$4,000	-\$31,000
-- School Health	\$13,335	\$15,424	\$15,424	\$0
-- Health Promotion	\$17,707	\$19,483	\$19,483	\$0
-- Prevention Research Centers	\$8,667	\$25,530	\$0	-\$25,530
-- Prevention Research Centers (PPHF)	\$15,279	\$0	\$25,000	\$25,000
-- Heart Disease and Stroke	\$54,417	\$57,188	\$57,188	\$0
-- Heart Disease and Stroke (PPHF)	\$0	\$73,000	\$73,000	\$0
-- Diabetes	\$64,041	\$67,306	\$67,306	\$0
-- Diabetes (PPHF)	\$0	\$73,000	\$73,000	\$0
-- National Diabetes Prevention Program	\$0	\$10,000	\$10,000	\$0
-- Cancer Prevention and Control	\$337,919	\$350,982	\$308,012	-\$42,970
-- Cancer Prevention and Control (PPHF)	\$0	\$104,000	\$179,204	\$75,204
-- Cancer Prevention and Control - BA	\$337,919	\$246,982	\$128,808	-\$118,174
-- Breast and Cervical Cancer (BA and PPHF)	\$197,342	\$207,269	\$169,204	-\$38,065

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	FY 2013 Final ¹	FY 2014 Enacted ¹	FY 2015 President's Budget	2015 +/-2014
(dollars in thousands)				
-- Breast and Cervical Cancer (non-add)	\$197,342	\$103,269	\$0	-\$103,269
-- WISEWOMAN (non-add)	\$20,216	\$21,170	\$0	-\$21,170
-- Breast and Cervical Cancer (PPHF) (non-add)	\$0	\$104,000	\$169,204	\$65,204
-- WISEWOMAN (PPHF) (non-add)	N/A	N/A	\$21,170	\$21,170
-- New Cancer Demonstration Project (PPHF)	\$0	\$0	\$10,000	\$10,000
-- Oral Health	\$14,906	\$15,790	\$15,790	\$0
-- Safe Motherhood/Infant Health	\$45,057	\$45,589	\$45,589	\$0
-- Arthritis and Other Chronic Diseases	\$24,876	\$26,806	\$26,806	\$0
-- Community Grants	\$160,544	\$131,005	\$80,000	-\$51,005
-- Racial and Ethnic Approaches to Community Health	\$14,204	\$21,005	\$0	-\$21,005
-- Racial and Ethnic Approaches to Community Health (PPHF)	\$0	\$30,000	\$0	-\$30,000
-- Community Transformation Grants - BA	\$0	\$0	\$0	\$0
-- Community Transformation Grants (PPHF)	\$146,340	\$0	\$0	\$0
-- Partnerships to Improve Community Health	\$0	\$80,000	\$80,000	\$0
-- Million Hearts (PPHF)	\$4,612	\$4,000	\$4,000	\$0
-- Workplace Wellness (PPHF)	\$0	\$10,000	\$0	-\$10,000
-- Healthy Weight Task Force/Early Child Care Collaboratives (PPHF)	\$4,000	\$4,000	\$4,000	\$0
-- Hospitals Promoting Breastfeeding (PPHF)	\$2,500	\$8,000	\$2,500	-\$5,500
-- High Obesity Rate Counties (non-add)	\$0	\$5,000	\$0	-\$5,000
Birth Defects, Developmental Disabilities, Disability and Health	\$133,539	\$132,337	\$132,337	\$0
<i>Birth Defects, Developmental Disabilities, Disability and Health - BA</i>	\$133,539	\$132,337	\$61,541	-\$70,796
<i>Birth Defects, Developmental Disabilities, Disability and Health - PPHF</i>	\$0	\$0	\$70,796	\$70,796
-- Child Health and Development – BA	\$63,580	\$64,366	\$46,932	-\$17,434
-- Child Health and Development (PPHF)	\$0	\$0	\$17,434	\$17,434
-- Birth Defects	\$20,435	\$19,014	\$1,580	-\$17,434
-- Craniofacial Malformation (non-add)	\$1,711	N/A	\$0	\$0
-- Fetal Death (non-add)	\$845	\$893	\$893	\$0
-- All Other Birth Defects (non-add)	\$17,879	\$18,121	\$687	-\$17,434
-- All Other Birth Defects (non-add) (PPHF)	\$0	\$0	\$17,434	\$17,434
-- Fetal Alcohol Syndrome	\$10,168	\$10,532	\$10,532	\$0
-- Folic Acid	\$2,958	\$3,129	\$3,129	\$0
-- Infant Health	\$8,354	\$8,660	\$8,660	\$0
-- Autism	\$21,665	\$23,031	\$23,031	\$0
-- Health and Development with Disabilities - BA ⁴	\$50,603	\$53,362	\$0	-\$53,362
-- Health and Development with Disabilities (PPHF)	\$0	\$0	\$53,362	\$53,362
-- Disability and Health (includes Child Development Studies)	\$18,125	\$19,392	\$0	-\$19,392
-- Disability and Health (includes Child Development Studies) (PPHF)	\$0	\$0	\$19,392	\$19,392
-- Limb Loss	\$2,788	\$2,817	\$0	-\$2,817
-- Limb Loss (PPHF)	\$0	\$0	\$2,817	\$2,817
-- Tourette Syndrome	\$1,746	\$1,748	\$0	-\$1,748
-- Tourette Syndrome (PPHF)	\$0	\$0	\$1,748	\$1,748
-- Early Hearing Detection and Intervention	\$10,599	\$10,780	\$0	-\$10,780
-- Early Hearing Detection and Intervention (PPHF)	\$0	\$0	\$10,780	\$10,780
-- Muscular Dystrophy	\$5,903	\$5,984	\$0	-\$5,984
-- Muscular Dystrophy (PPHF)	\$0	\$0	\$5,984	\$5,984
-- Attention Deficit Hyperactivity Disorder	\$1,778	\$1,855	\$0	-\$1,855
-- Attention Deficit Hyperactivity Disorder (PPHF)	\$0	\$0	\$1,855	\$1,855
-- Fragile X	\$1,724	\$1,758	\$0	-\$1,758
-- Fragile X (PPHF)	\$0	\$0	\$1,758	\$1,758
-- Spina Bifida	\$5,939	\$6,011	\$0	-\$6,011
-- Spina Bifida (PPHF)	\$0	\$0	\$6,011	\$6,011
-- Congenital Heart Failure	\$2,001	\$3,017	\$0	-\$3,017
-- Congenital Heart Failure (PPHF)	\$0	\$0	\$3,017	\$3,017
-- Public Health Approach to Blood Disorders - BA	\$19,356	\$14,609	\$14,609	\$0
-- Public Health Approach to Blood Disorders	\$0	\$4,000	\$4,000	\$0
-- Hemophilia	\$17,249	\$3,504	\$3,504	\$0

Centers for Disease Control and Prevention

(dollars in thousands)	FY 2013 Final ¹	FY 2014 Enacted ¹	FY 2015 President's Budget	2015 +/-2014
-- Hemophilia Treatment Centers	\$0	\$5,000	\$5,000	\$0
-- Thalassemia	\$1,863	\$2,105	\$2,105	\$0
-- All Other Blood Disorder	\$244	\$0	\$0	\$0
Environmental Health	\$142,379	\$179,811	\$168,811	-\$11,000
<i>Environmental Health - BA</i>	\$121,639	\$166,811	\$131,811	-\$35,000
<i>Environmental Health - PPHF</i>	\$20,740	\$13,000	\$37,000	\$24,000
-- Environmental Health Laboratory	\$49,826	\$56,003	\$56,003	\$0
-- Environmental Health Activities	\$40,227	\$45,684	\$45,684	\$0
-- Environmental and Health Outcome Tracking Network	\$3,145	\$35,000	\$0	-\$35,000
-- Environmental and Health Outcome Tracking Network (PPHF)	\$20,740	\$0	\$24,000	\$24,000
-- Asthma	\$26,100	\$27,596	\$27,596	\$0
-- Childhood Lead Poisoning	\$2,341	\$2,528	\$2,528	\$0
-- Lead Poisoning Prevention (PPHF)	\$0	\$13,000	\$13,000	\$0
Injury Prevention and Control	\$138,943	\$150,839	\$194,304	\$43,465
<i>Injury Prevention and Control - BA</i>	\$138,943	\$150,839	\$188,699	\$37,860
<i>Injury Prevention and Control - PHS Eval. Transfer</i>	\$0	\$0	\$5,605	\$5,605
-- Intentional Injury	\$93,195	\$92,242	\$107,847	\$15,605
-- Domestic Violence and Sexual Violence	\$32,141	\$32,757	\$32,757	\$0
-- Child Maltreatment (non-add)	\$7,206	\$7,268	\$7,392	\$124
-- Youth Violence Prevention - BA	\$15,099	\$15,125	\$15,125	\$0
-- Domestic Violence Community Projects	\$5,355	\$5,428	\$5,428	\$0
-- Rape Prevention - BA	\$38,256	\$38,932	\$38,932	\$0
-- Rape Prevention - PHS Eval. Transfer	\$0	\$0	\$5,605	\$5,605
-- Gun Violence Prevention Research	\$0	\$0	\$10,000	\$10,000
-- All Other Intentional Injury	\$2,344	\$0	\$0	\$0
-- NVDRS - BA	\$3,421	\$11,333	\$23,570	\$12,237
-- Unintentional Injury	\$32,708	\$8,619	\$8,619	\$0
-- Traumatic Brain Injury (TBI)	\$6,367	\$6,564	\$6,564	\$0
-- Elderly Falls	\$0	\$2,055	\$2,055	\$0
-- All Other Unintentional Injury	\$26,341	\$0	\$0	\$0
-- Elderly Falls (non-add)	\$1,951	\$0	\$0	\$0
-- Injury Prevention Activities	\$0	\$29,023	\$44,646	\$15,623
-- Injury Control Research Centers	\$9,619	\$9,622	\$9,622	\$0
Public Health Scientific Services	\$492,508	\$482,957	\$525,809	\$42,852
<i>Public Health Scientific Services - BA</i>	\$193,238	\$397,266	\$377,723	-\$19,543
<i>Public Health Scientific Services - PHS Eval. Transfer</i>	\$247,769	\$85,691	\$95,086	\$9,395
<i>Public Health Scientific Services - PPHF</i>	\$51,501	\$0	\$53,000	\$53,000
-- Health Statistics	\$153,843	\$155,397	\$155,397	\$0
-- Health Statistics - BA	\$15,160	\$69,706	\$155,397	\$85,691
-- Health Statistics - PHS Eval. Transfer	\$138,683	\$85,691	\$0	-\$85,691
-- Surveillance, Epidemiology, and PH Informatics	\$275,122	\$275,156	\$303,008	\$27,852
-- Surveillance, Epidemiology, and PH Informatics - BA	\$130,144	\$275,156	\$169,922	-\$105,234
-- Surveillance, Epidemiology, and PH Informatics - PHS Eval	\$109,086	\$0	\$95,086	\$95,086
-- Surveillance, Epidemiology, and PH Informatics - PPHF	\$35,892	\$0	\$38,000	\$38,000
-- Community Guide (PPHF)	\$7,378	\$0	\$8,000	\$8,000
-- Public Health Research (PPHF)	\$0	\$0	\$5,000	\$5,000
-- Vital Statistics (PPHF)	\$0	\$0	\$5,000	\$5,000
-- Healthcare Surveillance/Health Statistics (PPHF) ⁵	\$28,514	\$0	\$20,000	\$20,000
-- Public Health Workforce and Career Development - BA	\$47,934	\$52,404	\$52,404	\$0
-- Public Health Workforce Capacity (PPHF)	\$15,609	\$0	\$15,000	\$15,000

Occupational Safety and Health	\$323,059	\$332,860	\$280,590	-\$52,270
Occupational Safety and Health - BA	\$212,335	\$220,860	\$0	-\$220,860
Occupational Safety and Health - PHS Eval. Transfer	\$110,724	\$112,000	\$280,590	\$168,590
-- NORA - BA	\$609	\$0	\$0	\$0
-- NORA - PHS Eval. Transfers	\$110,724	\$112,000	\$100,954	-\$11,046
-- Agriculture, Forestry, Fishing (AgFF) (non-add)	\$0	\$24,000	\$0	-\$24,000
-- Education and Research Centers	\$23,516	\$27,519	\$0	-\$27,519
-- Personal Protective Technology (non-add)	\$15,917	N/A	\$0	N/A
-- Personal Protective Technology - PHS Eval. Transfer	\$0	\$0	\$20,021	\$20,021
-- Healthier Workforce Center	\$4,942	\$4,989	\$0	-\$4,989
-- Healthier Workforce Center - PHS Eval. Transfer	\$0	\$0	\$5,433	\$5,433
-- Mining Research - BA	\$57,084	\$59,563	\$0	-\$59,563
-- Mining Research - PHS Eval. Transfer	\$0	\$0	\$62,374	\$62,374
-- Other Occupational Safety and Health Research - BA	\$110,267	\$128,789	\$0	-\$128,789
-- National Mesothelioma Registry and Tissue Bank (non-add)	\$0	\$1,109	\$0	-\$1,109
-- Other Occupational Safety and Health Research - PHS Eval. Transfer	\$0	\$0	\$91,808	\$91,808
-- National Mesothelioma Registry and Tissue Bank - PHS Eval. Transfer (non-add)	\$0	\$0	\$0	\$0
Global Health (realigned)	\$362,792	\$416,801	\$464,301	\$47,500
-- Global HIV/AIDS Program	\$125,254	\$128,735	\$128,735	\$0
-- Global Immunization Program	\$159,469	\$200,892	\$210,892	\$10,000
-- Polio Eradication	\$110,346	\$150,928	\$160,928	\$10,000
-- Measles and Other Vaccine Preventable Diseases	\$49,123	\$49,964	\$49,964	\$0
-- Parasitic Diseases and Malaria	\$23,725	\$24,421	\$24,421	\$0
-- Global Public Health Protection	\$54,344	\$62,753	\$100,253	\$37,500
-- Global Disease Detection and Emergency Response	\$44,839	\$45,470	\$45,470	\$0
-- Global Public Health Capacity Development	\$9,505	\$17,283	\$9,783	-\$7,500
-- National Public Health Institutes (non-add)	N/A	\$7,500	\$0	-\$7,500
Public Health Preparedness and Response	\$1,278,870	\$1,371,198	\$1,317,375	-\$53,823
-- State and Local Preparedness and Response Capability	\$630,198	\$662,849	\$617,026	-\$45,823
-- Public Health Emergency Preparedness Cooperative Agreement (non-add)	\$613,571	\$645,373	\$617,026	-\$28,347
-- CDC Preparedness and Response Capability	\$155,522	\$157,532	\$157,532	\$0
-- Strategic National Stockpile	\$493,150	\$550,817	\$542,817	-\$8,000
Cross-Cutting Activities and Program Support	\$250,619	\$298,649	\$123,570	-\$175,079
Cross-Cutting Activities and Program Support - BA	\$228,034	\$138,649	\$123,570	-\$15,079
Cross-Cutting Activities and Program Support - PPHF	\$22,585	\$160,000	\$0	-\$160,000
-- Preventive Health and Health Services Block Grants (non-add)	\$75,406	\$0	\$0	\$0
-- Preventive Health and Health Services Block Grant (PPHF)	\$0	\$160,000	\$0	-\$160,000
-- Business Services Support (non-add)	\$0	\$0	\$0	\$0
-- Building and facilities (non-add)	\$23,648	\$24,000	\$10,000	-\$14,000
-- Public Health Leadership and Support (non-add)	\$113,603	\$114,649	\$113,570	-\$1,079
-- National Prevention Strategy (PPHF)	\$922	\$0	\$0	\$0
-- National Public Health Improvement Initiative (PPHF)	\$21,663	\$0	\$0	\$0
Total CDC – BA (adjusted for proposed ACL transfer)	\$5,430,402	\$5,807,120	\$5,399,706	-\$407,414
Total CDC - BA and PHS Eval (adjusted for proposed ACL transfer)	\$5,805,450	\$6,017,675	\$5,796,851	-\$220,824
Program Level - BA, PHS Eval, PHSSEF & PPHF (adjusted for proposed ACL transfer)	\$6,280,195	\$6,848,975	\$6,606,361	-\$242,614
Agency for Toxic Substances and Disease Registry	\$72,228	\$74,691	\$74,691	\$0
Public Health and Social Services Emergency Fund (Transfer) (non-add)	\$11,829	\$0	\$0	\$0
ATSDR Affordable Care Act (Mandatory)	\$0	\$0	\$20,000	\$20,000
Affordable Care Act- Prevention and Public Health Fund Transfer (non-add)	\$462,916	\$831,300	\$809,510	-\$21,790
Vaccines for Children	\$3,607,256	\$3,562,470	\$4,076,617	\$514,147
Energy Employees Occupational Illness Compensation Program Act (EEOICPA) ⁷	\$50,984	\$49,933	\$55,358	\$5,425

World Trade Center (Mandatory) ⁸	\$230,680	\$268,180	\$281,941	\$13,761
PHS Evaluation Transfers (non-add)	\$375,048	\$210,555	\$397,145	\$186,590
Other User Fees	\$2,114	\$2,226	\$2,226	\$0
Total CDC/ATSDR (adjusted for proposed ACL transfer)	\$10,243,456	\$10,806,475	\$11,117,194	\$310,719

¹The FY 2013 and FY 2014 levels have been made comparable to FY 2015 using FY 2013 BSS consumption data to reflect BSS transfers to implement the Working Capital Fund.

²FY 2013 and FY 2014 Domestic HIV lines have been made comparable to the FY 2015 PB proposed structure.

³The Core Infectious Disease line consolidates multiple budget lines under the Emerging and Zoonotic Infectious Diseases budget line. The FY 2013 and FY 2014 Core Infectious Disease amount has been comparably adjusted.

⁴FY 2013 Disabilities and Health line has been comparably adjusted to reflect the transfer of \$6.7 million for Paralysis Resource Center to ACL.

⁵A portion of Healthcare Surveillance/Statistics funding supports NCHS activities.

⁶The FY 2013 level reflects an estimated funding level. The FY 2014 and FY 2015 levels represent anticipated transfers from Medicaid.

⁷The FY 2014 amount reflects mandatory sequestration reduction.

⁸The FY 2013 through FY 2015 amounts reflect the federal government's estimated net obligations.