

# Federal Budget and Appropriations An Issue Brief by the National Minority AIDS Council

#### Introduction

The federal appropriations process is one of the most important aspects in constituting the formation of public policy. Unlike authorization bills, which create programs and policies, appropriations bills fund programs and must pass every year or the federal government shuts down. As an AIDS service organization (ASO), your group has the unique expertise and understanding of what happens when federal programs reach the ground. Unfortunately, congressional members—especially those who decide how programs are funded—do not hear from community-based organizations often enough. Sharing your expertise will help Congress make more informed decisions and ensure your voice is heard. It will also affect how much money is spent on the programs most critical to the mission of your organization. This issue brief is intended to overview the federal appropriations process and outline key points at which your organization can engage it.

#### Overview

The Constitution requires all government spending bills to originate in the House of Representatives. House bills often respond to proposals from the Administration. The Administration prioritizes these proposals with the yearly release of the president's budget. Once the House introduces funding legislation, the Senate then responds to the House. The House and Senate Appropriations Committees, through twelve subcommittees, provide funding for authorized federal programs and

agencies and oversee the use of those funds. The Budget Committees determine overall discretionary spending levels for Congress, and the Appropriations Committees then determine allocations for each of the subcommittees. Such allocations are formally termed 302b allocations and they set absolute limits on expenditures for the subcommittees. Discretionary spending impacts programs such as the Ryan White Care Act, while entitlement spending that impacts programs such as Medicare and Medicaid is not subject to this process.

The Labor, Health and Human Services, Education (L-HHS-E) Appropriations Subcommittee writes the Health and Human Services spending bill, which funds most agencies and programs critical to HIV/AIDS prevention, care, treatment, and research. The L-HHS-E spending bill funds over one hundred different agencies, including the Center for Disease Control and Prevention, Health Resources and Services Administration, Centers for Medicare and Medicaid, the National Institute of Health, as well as the Substance Abuse and Mental Health Services Administration.

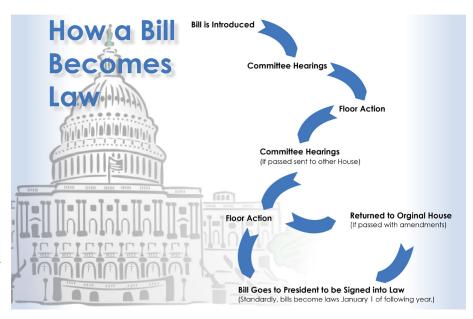
## Get Involved

- Write your representative and senators, both in district offices and DC.
- Discuss how federal money established results in your organization or community.
- Follow up with phone calls to both DC and district offices
- Make appointments in the district office when your Congressman is not in the capital—the federal legislative calendar will assist with this (www.house.gov.legislative).
- Create fact sheets on how federal programs have helped your projects.
- Build coalitions with likeminded organizations that share a similar focus on HIV/AIDS issues.



### **Mechanics**

The appropriations process is unique in that it must happen every year to keep the government operating. The government's fiscal year begins in October, and the appropriations process traditionally begins in March after the president's budget is released in February. The legislative path of an appropriations bill in the House or the Senate generally begins with its introduction by a subcommittee chair. The subcommittee then holds hearings to consider constituent concerns and the Administration's priorities. A markup is then held by Subcommittee members to retool the bill in an effort to reflect their priorities. Report language is also drafted, which accompanies the appropriations bill and provides direction to the agencies



executing the funded programs. The subcommittee votes on the final bill proposal, and passes it to the full committee. The full committee can also make changes before voting and passing the bill for action on the House or Senate floor. The bill is then considered on the floor of the House or the Senate. After the chamber in question votes, House and Senate members are appointed to a conference committee to reconcile language and differences between House and Senate versions of the bill. The House and Senate vote on the final bill arising from the conference and submit to the president for signature. If the president signs the bill, it becomes law. If the president vetoes it, a two-thirds vote of the House and Senate is needed to override the veto. If Congress reaches the start of the fiscal year without a funding bill in place, it usually passes a continuing resolution for temporary funding.

## Riders

A rider is an additional provision added to a bill and often has little connection to the subject matter of the bill. Riders are usually created as a tactic to pass a controversial provision that would not pass as its own bill. Occasionally, a controversial rider is attached to a bill not to be passed but to prevent the bill from being passed. The recent ban on the use of federal dollars to support syringe exchange programs exemplifies how the rider process can detrimentally impact HIV/AIDS programs—in this case, prevention efforts.

## **Sequestration**

A budget sequester is when money that would otherwise be spent under current law is held back and is used instead for deficit reduction. The Budget Control Act of 2011 (BCA) provides for a complex process of mechanisms to reduce government spending and reach a balanced budget—a process commonly termed sequestration. Under sequestration, appropriations for defense and non-defense spending must be both capped and cut equally. Caps and cuts to non-defense federal spending will impact funding for critical HIV/AIDS discretionary programs such as the Ryan White Care Program and prevention efforts at the Center for Disease Control and Prevention. Sequestration, if enacted as provided for in the BCA, will take effect January 1st 2013.