

DEPARTMENT of HEALTH and HUMAN SERVICES

Fiscal Year

2012

Agency for Toxic Substances and Disease Registry

Justification of Estimates for Appropriation Committees

INTRODUCTION

The FY 2012 Congressional Justification is one of several documents that fulfill the Department of Health and Human Services' (HHS) performance planning and reporting requirements. HHS achieves full compliance with the Government Performance and Results Act of 1993 and Office of Management and Budget Circulars A-11 and A-136 through the HHS agencies' FY 2012 Congressional Justifications and Online Performance Appendices, the Agency Financial Report, and the HHS FY 2010 Summary of Performance and Financial Information. These documents are available at http://www.hhs.gov/asrt/ob/docbudget/index.html.

The FY 2012 Congressional Justifications and accompanying Online Performance Appendices contain performance summaries and performance strategic plan. The Agency Financial Report provides fiscal and high-level performance results. The Summary of Performance and Financial Information summarizes key past and planned performance and financial information.

MESSAGE FROM THE DIRECTOR

We are pleased to present the FY 2012 Congressional Justification for the Agency for Toxic Substances and Disease Registry (ATSDR). ATSDR serves the public through responsive public health actions to promote healthy and safe environments and to prevent harmful exposures. ATSDR continues to prevent, determine, and mitigate health effects at sites with toxic exposures, and its successes in doing so across the nation illustrate how funding for ATSDR directly benefits Americans. Just a few of ATSDR's successes in FY 2010 are highlighted below:

- Completed a multiyear, multisite study in North Carolina of health effects due to toluene diisocyanate (TDI), a substance known to be the largest contributor to occupationally-induced asthma. This study is important because while much is known about job-related exposures, there is very little information on how low levels of TDI exposure affect the health of the general public. To examine community level health effects, ATSDR utilized new methods for detecting the chemical in the communities' ambient air, by testing people's blood for exposures, and by assessing the prevalence of asthma and other respiratory diseases in participants near emitting facilities as compared to residents further from these TDI emitting facilities.
- Completed a research study of Ig Gene Sequencing for Monoclonal B-Cell Lymphocytosis (MBL) cases to help increase knowledge of fundamental events associated with the neoplastic process in B-cell lymphoproliferative diseases (BLPD) and permit early detection of the BLPD. The study helped determine whether MBL can be used as a biomarker associated with exposure to hazardous wastes and whether individuals with MBL who are more likely to progress to a BLPD can be identified.
- Collaborated with EPA on the development of human health benchmarks for chemical contaminants in the Gulf of Mexico from the Deepwater Horizon Oil Spill.

ATSDR monitors its performance through long-term performance measures that evaluate our success in mitigating exposures at the most urgent and hazardous sites. These measures assess and document the impact of ATSDR's efforts on the health of people exposed to toxic substances.

This FY 2012 Congressional Justification provides more detail of ATSDR's successes, highlights current efforts, and describes how the budget request will allow us to continue serving Americans productively through the upcoming fiscal year.

Sincerely,

Thomas R. Frieden, MD MPH

Director, Centers for Disease Control and Prevention /Administrator, Agency for Toxic Substances and

Disease Registry

Christopher Portier, PhD

Director, CDC National Center for Environmental Health/ Agency for Toxic

Substances and Disease Registry

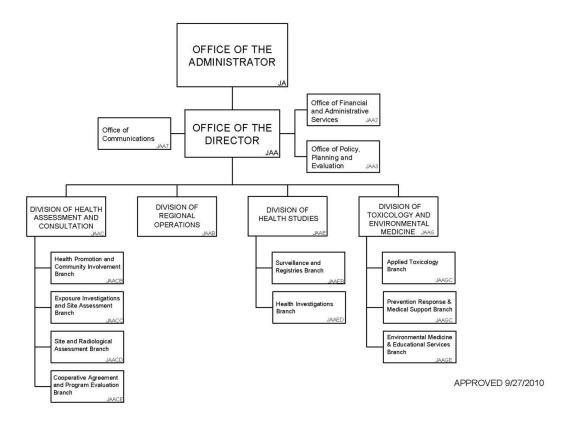
TABLE OF CONTENTS SUPPLEMENTAL MATERIAL31

Detail of Positions 36

ORGANIZATIONAL CHART

DEPARTMENT OF HEALTH AND HUMAN SERVICES

AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY (J)



EXECUTIVE SUMMARY

INTRODUCTION AND MISSION

The Agency for Toxic Substances and Disease Registry (ATSDR), along with National Center for Environmental Health (NCEH) at the Centers for Disease Control and Prevention (CDC), is committed to the vision of safer, healthier people in safer, healthier environments.

First organized in 1985, ATSDR was created by the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) of 1980, more commonly known as the Superfund law. In 1986, Congress passed the Superfund Amendments and Reauthorization Act (SARA). Through these and other legislative actions, Congress responded to the public's demand for a more complete accounting of toxic chemicals and releases. In addition, Congress was—and remains—concerned by other pathways of potential exposure, including food, water, air, and consumer goods.

While ATSDR shares common concerns with other federal agencies and institutes, such as the Environmental Protection Agency (EPA) or CDC's National Institute for Occupational Safety and Health (NIOSH), ATSDR is unique in its focus on the human health impact of exposures to hazardous substances. The agency's mission is to serve the public through responsive public health actions to promote healthy and safe environments and prevent harmful exposures.

ATSDR seeks to accomplish that mission through its work, which includes conducting public health assessments of waste sites, providing health consultations concerning specific hazardous substances, developing health surveillance and registries, responding to emergency releases of hazardous substances, conducting applied research in support of public health assessments, developing and disseminating information on hazardous substances, and providing education and training on hazardous substances.

Since the creation of ATSDR, thousands of hazardous sites have been identified around the country. The Superfund program remains responsible for finding and cleaning up the most dangerous hazardous waste sites in the country. ATSDR has also been at the forefront in protecting people from acute toxic exposures that occur from hazardous leaks and spills, environment-related poisonings, and natural and terrorism-related disasters.

ATSDR's work falls into the following functional areas:

- Protecting the public from environmental hazardous and toxic exposures;
- Promoting healthy environments;
- Building the science base on environmental public health;
- Supporting environmental public health practice, including maintaining health registries;
- Educating communities, partners, and policymakers about toxic chemicals, environmental health risks, and protective measures;
- Promoting environmental justice and reducing health disparities associated with environmental exposures; and
- Providing unique scientific and technical expertise to advance public health science and practice.

Through its work in these areas, ATSDR continues to prevent and mitigate exposures and related health effects at hazardous waste sites across the nation.

BUDGET OVERVIEW

The FY 2012 President's Budget Request of \$76,337,000 for ATSDR represents a decrease of \$455,000 below the FY 2010 level for administrative savings. The FY 2012 request also reflects a decrease of the one-time appropriation of \$23,000,000, from the Affordable Care Act that is available from FY 2010-FY 2014. The FY 2012 funds will support public health activities to assess and mitigate the health risks of exposures to hazardous substances and to advance scientific research on means to prevent future exposures, as well as communicate information on hazardous substances to health care providers and the public.

OVERVIEW OF PERFORMANCE

The Agency for Toxic Substances and Disease Registry (ATSDR) is the principal non-regulatory federal public health agency responsible for addressing health effects associated with toxic exposures. The agency's mission is to use the best science, take responsive action, and provide trustworthy health information to prevent and mitigate harmful exposures to toxic substances and related disease. State-level staff, along with field staff located in Environmental Protection Agency (EPA) regional offices, comprise a national network of dedicated scientists and public health practitioners who work to serve the public through responsive public health actions to promote healthy and safe environments and prevent harmful exposures.

ATSDR has three core functions that support Health and Human Services (HHS) strategic goals and objectives:

- 1. Assess and mitigate health risks from hazardous exposures
- 2. Advance the science on hazardous exposures
- 3. Deliver information on hazardous substances to health professionals and the public

These support the following HHS strategic goals and objectives:

- Increase our understanding of what works in public health and human services practice
- Advance the health, safety, and well-being of the American people
- Use HHS data to improve the health and well-being of the American people
- Improve HHS environmental, energy, and economic performance to promote sustainability
- Strengthen the Nation's health and human service infrastructure and workforce

Agency Accomplishments

Assess and mitigate health risks from hazardous exposures

- Completed evaluations of environmental exposures at more than 500 sites in 2010 by issuing more than 200 public health assessments and consultations. Federal, state, and local authorities adopted 87 percent of ATSDR's recommendations.
- Released a public health advisory for Garfield, New Jersey, alerting EPA leadership of the need for immediate action because of dangerous levels of hexavalent chromium infiltrating from groundwater into the basements of homes and other buildings. As a result, EPA took immediate actions to clean up basements, thus eliminating the threat.
- Identified public health concerns that prompted Mirant Potomac River, LLC and the City of Alexandria (Va.) to collaboratively reduce local ambient air levels in the Mirant Power Plant. The Plant made changes to its boiler stack emissions configuration to increase emission velocity, thereby reducing local sulfur dioxide concentrations and resulting human exposure. Additionally, at the time of ATSDR's evaluation of the ambient air data, EPA's national ambient air quality standards did not include short-term peak levels. ATSDR identified levels for short-term public health concern. EPA recently changed the national standards to include short-term peak levels, which are now in line with the values identified by ATSDR.

Advance the science on hazardous exposures

- Completed research that helped determine whether Monoclonal B-Cell Lymphocytosis (MBL)
 can be used as a biomarker associated with exposure to hazardous wastes and whether individuals
 with MBL who are more likely to progress to B-cell lymphoproliferative diseases can be
 identified.
- Completed a multiyear, multisite study in North Carolina of health effects due to toluene
 diisocyanate (TDI), a substance known to be the largest contributor to occupationally-induced
 asthma. Because little is known about how low levels of TDI exposure affect the health of the
 general public, ATSDR utilized new methods for detecting TDI in the communities' ambient air
 by testing participants' blood for exposures and by assessing the prevalence of asthma and other
 respiratory diseases in participants near emitting facilities.
- Launched the website for the National Toxic Substance Incidents Program (NTSIP)—a surveillance system for chemical events. This included the HazMat Intelligence Portal to estimate the number of events in non-NTSIP states (currently limited to transportation events).
- Developed the web portal for the National Amyotrophic Lateral Sclerosis (ALS) Registry in response to a congressional directive. From October 19 to December 1, 2010, over 1,900 ALS patients enrolled in the Registry.

Deliver information on hazardous substances to health professionals and the public

- Released six final and six draft-for-public-comment ToxProfiles, including corresponding English and Spanish Public Health Statements, ToxFAQs, and ToxGuides.
- Developed and verified 19 minimal risk levels for 11 different hazardous substances published in the corresponding ToxProfiles.
- Collaborated with the Pediatric Environmental Health Specialty Unit (PEHSU), University of California at San Francisco (Region 9), to train pediatric care providers to deliver anticipator preventive environmental health counseling to parents of their patients. ATSDR also supported PEHSU to assist medical educators in California and Arizona with integrating pediatric environmental health into medical school and pediatric residency curricula.
- Collaborated with EPA on the development of human health benchmarks for chemical contaminants in the Gulf of Mexico from the Deepwater Horizon Oil Spill.

ATSDR monitors its performance through long-term performance measures that evaluate success in mitigating exposures at the most urgent and hazardous sites. These measures assess and document the impact of ATSDR's efforts on the health of people exposed to toxic substances. Additionally, internal agency performance management processes have been instituted to track progress on a broader set of programmatic activities, yielding useful data on a more frequent basis to make timely and informed decisions regarding program design and resource allocation.

Alignment to Administration Priorities and Initiatives

ATSDR's mission, focus and overarching strategic goals are complementary to the HHS Strategic Plan and support the agency's congressional mandate. ATSDR and the Environmental Protection Agency are joining with other federal departments and agencies on the President's Task Force on Environmental Health Risks and Safety Risks to Children. This group will collaborate to address the most critical children's environmental health issues facing the Nation. Together with HHS, ATSDR is supporting the Interagency Working Group on Environmental Justice (EJ IWG). Through this Task Force, HHS is working with other federal departments and agencies to identify and address disproportionately high and adverse human health or environmental effects of their programs, policies, and activities on minority

populations and low-income populations. In addition, the Working Group is to assist in coordinating research by, and stimulating cooperation among all relevant government agencies.

In addition, related to ATSDR's site work, the Affordable Care Act (PPACA), contains a provision for establishing a program to make competitive grants to eligible entities for the purpose of (1) screening atrisk individuals for environmental health conditions, such as current and past residents of Libby and Troy, Montana; (2) developing and disseminating public information and education concerning the availability of screening, the detection, prevention, and treatment of environmental health conditions; and the availability of Medicare benefits for certain individuals diagnosed with these environmental health conditions. The first phase of the screening program will focus on current residents of Libby. A second phase will include previous residents of Libby and Troy who have since moved away.

SUMMARY OF TARGETS AND RESULTS

The table below provides a summary of targets and results for ATSDR's performance measures.*

Fiscal Year	Total Targets	Target with Results Reported	Percent of Targets with Results Reported	Total Targets Met	% of Targets Met
2007	5	5	100%	5	100%
2008	5	5	100%	5	100%
2009	6	6	100%	6	100%
2010	6	6	100%	6	100%
2011	6	N/A	N/A	N/A	N/A
2012	6	N/A	N/A	N/A	N/A

^{*}Table does not reflect discontinued measures

ALL PURPOSE TABLE

(dollars in thousands)	FY 2010 Enacted	FY 2011 Continuing Resolution	FY 2012 President's Budget
Agency for Toxic Substances and Disease			
Registry	\$99,792	\$76,792	\$76,337
ACA ¹	\$23,000	\$0	\$0
Agency for Toxic Substances and Disease			
Registry – Budget Authority	\$76,792	\$76,792	\$76,337

¹The FY 2010 total reflects \$23,000,000 appropriated to ATSDR under the Affordable Care Act (ACA), available for five years.

BUDGET EXHIBITS

APPROPRIATIONS LANGUAGE

ATSDR

Agency for Toxic Substances and Disease Registry

For necessary expenses for the Agency for Toxic Substances and Disease Registry (ATSDR) in carrying out activities set forth in sections 104(i) and 111(c)(4) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA), as amended; section 118(f) of the Superfund Amendments and Reauthorization Act of 1986 (SARA), as amended; and section 3019 of the Solid Waste Disposal Act, as amended, \$76,337,000, of which up to \$1,000 per eligible employee of the Agency for Toxic Substance and Disease Registry shall remain available until expended for Individual Learning Accounts: Provided, That notwithstanding any other provision of law, in lieu of performing a health assessment under section 104(i)(6) of CERCLA, the Administrator of ATSDR may conduct other appropriate health studies, evaluations, or activities, including, without limitation, biomedical testing, clinical evaluations, medical monitoring, and referral to accredited health care providers: Provided further, That in performing any such health assessment or health study, evaluation, or activity, the Administrator of ATSDR shall not be bound by the deadlines in section 104(i)(6)(A) of CERCLA: Provided further, That none of the funds appropriated under this heading shall be available for ATSDR to issue in excess of 40 toxicological profiles pursuant to section 104(i) of CERCLA during fiscal year 2012 [2011], and existing profiles may be updated as necessary.

AMOUNTS AVAILABLE FOR OBLIGATION

FY 2012 BUDGET SUBMISSION CENTERS FOR DISEASE CONTROL AND PREVENTION/ATSDR DISEASE, CONTROL, RESEARCH AND TRAINING AMOUNTS AVAILABLE FOR OBLIGATION 1 FY 2012 FY 2011 President's Budget FY 2010 Actual **Annualized CR** Request Discretionary Appropriation: Annual \$76,792,000 \$76,792,000 \$76,337,000 (\$326,000) Transfers to Other Accounts (CDC) (\$326,000)(\$326,000)Subtotal, adjusted Discretionary Appropriation 76,466,000 76,466,000 76,011,000 Mandatory Appropriation: Appropriation (Health Reform) \$23,000,000 \$0 \$0 \$23,000,000 \$0 \$0 Subtotal, adjusted Mandatory Appropriation Recovery of prior year Obligations 2,140,000 \$0 \$0 2,973,000 (\$24,000,000) (\$24,000,000) Unobligated balance start of year Unobligated balance expiring \$0 \$0 Unobligated balance end of year 24,000,000 24,000,000 24,000,000 **Total Obligations** 128,579,000 76,466,000 76,011,000

¹ Excludes the following amounts for reimbursements: FY 2010: \$15,404,591; FY 2011: \$5,757,000; and FY 2012: \$5,757,000;

AUTHORIZING LEGISLATION

DOLLARS IN THOUSANDS	FY 2011CR AMOUNT AUTHORIZED	FY 2011 CONTINUING RESOLUTION	FY 2012 AMOUNT AUTHORIZED	FY 2012 BUDGET
AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY				
ATSDR	INDEFINITE	\$76,792	INDEFINITE	\$76,337
The Great Lakes Critical Programs Act of 1990, 33 U.S.C. 1268				
Section 104(i) of the Comprehensive Environmental Response, Compensation and Liability Act of 1980 (CERCLA), as amended by the Superfund Amendments and Reauthorization Act of 1986 (SARA), 42 U.S.C 9604(i)				
The Defense Environmental Restoration Program, 10 U.S.C. 2704				
The Resource Conservation and Recovery Act, as amended, 42 U.S.C 321 et seq				
The Clean Air Act, as amended, 42 U.S.C. 7401 et seq Social Security Act § 1881A (42 USC 1395rr-1)				

APPROPRIATIONS HISTORY

FY 2012 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY APPROPRIATIONS HISTORY TABLE (dollars in millions) **Budget Estimate to** House Senate Fiscal Year Congress Allowance Allowance Appropriation 1997 58,000,000 60,200,000 60,200,000 64,000,000 1998 64,000,000 80,000,000 80,000,000 74,000,000 1999 64,000,000 74,000,000 74,000,000 76,000,000 2000 64,000,000 70,000,000 70,000,000 70,000,000 2001 64.000.000 70.000.000 75,000,000 75,000,000 2001 Rescission -165,000 2002 78,235,000 78,235,000 78,235,000 78,235,000 2002 Rescission -32,000 2003 77,388,000 88,688,000 81,000,000 82,800,000 2003 Rescission -538,200 2004 73,467,000 73,467,000 73,467,000 73,467,000 2004 Rescission -433,455 2005 76,654,000 76,654,000 76,654,000 76,654,000 2005 Rescission -613,000 2006 76,024,000 76,024,000 76,024,000 76,024,000 2006 Rescission¹ -361,874 2006 Rescission -756,620 2007 75,004,000 76,754,000 75,004,000 74,905,000 75,212,000 75,004,000 2008 75,004,000 75,212,000 2008 Rescission -1,173,000 2009 72,882,000 74,039,000 72,882,000 74,039,000 2010 76,792,000 76.792.000 76,792,000 76,792,000 2011 76,337,000 76,337,000 2012 76,337,000

¹FY 2006 funding for ATSDR includes a rescission of 0.476% for Interior, Environment, and Related Agencies.

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NARRATIVE By Activity

AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY

(dollars in thousands)	FY 2010 Enacted	FY 2011 Continuing Resolution	FY 2012 President's Budget	FY 2012 +/- FY 2010
Budget Authority	\$76,792	\$76,792	\$76,337	-\$455
ACA ¹	\$23,000	\$0	\$0	-\$23,000
Total	\$99,792	\$76,792	\$76,337	-\$23,455
FTEs	290	290	290	0

¹The FY 2010 total reflects \$23,000,000 appropriated to ATSDR under the Affordable Care Act, available for five years.

SUMMARY OF THE REQUEST

ATSDR's FY 2012 request of \$76,337,000 is an overall decrease of \$455,000 below the FY 2010 level for administrative savings. The FY 2012 budget request includes \$2,000,000 to continue the epidemiological studies of health conditions caused by non-occupational exposures to uranium released from mining and milling operations in the Navajo Nation. The FY 2012 request also reflects a decrease of the one-time appropriation of \$23,000,000, from the Affordable Care Act, that is available from FY 2010 through FY 2014 to conduct medical monitoring of persons living in (or have lived in) communities declared a public health emergency.

FY 2012 funds will support public health activities to assess and mitigate the health risks of hazardous exposures, advance the science on the health effects of hazardous substances, and deliver information on hazardous substances to health providers and the public. As a Congressionally-mandated federal public health agency, ATSDR strives to prevent hazardous exposures and related health effects in communities across America. ATSDR works with public health and environmental officials to prevent harmful exposures and protect the health of people impacted by hazardous wastes. ATSDR and funded partners meet with individuals to listen to their environmental health concerns, provide information, and conduct investigations. By working with communities, ATSDR helps to ensure that the places where people live, work and play are safe and healthy.

AUTHORIZING LEGISLATION

Specific Authorities: The Great Lakes Critical Programs Act of 1990 (33 U.S.C. 1268); Section 104(i) of the Comprehensive Environmental Response, Compensation and Liability Act of 1980 (CERCLA), as amended by the Superfund Amendments and Reauthorization Act of 1986 (SARA) (42 U.S.C 9604(i)); The Defense Environmental Restoration Program (10 U.S.C. § 2704); The Resource Conservation and Recovery Act, as amended (42 U.S.C 6939); The Clean Air Act, as amended (42 U.S.C. 7401 et seq); The Affordable Care Act Prevention and Public Health Fund of 2010 (P.L.111-148); Social Security Act § 2009 (42 USC 1397h).

Allocation Methods: Direct Federal/Intramural; Competitive Grants/Cooperative Agreements; Contracts; Other

FUNDING HISTORY

Fiscal Year	Amount
FY 2007	\$74,905,000
FY 2008	\$75,212,000
FY 2009	\$74,039,000
FY 2010	\$99,792,000
FY 2011CR	\$76,792,000

^{*} See Exhibits tab for a complete list of CDC/ATSDR General Authorities

BUDGET REQUEST

ATSDR's FY 2012 request of \$76,337,000 is \$455,000 below the FY 2010 level for administrative savings. ATSDR's FY 2012 budget request will support work to safeguard communities from chemical exposures. ATSDR will continue to work closely with Federal, Tribal, State, and local agencies to identify potential exposures; assess associated health effects; and recommend actions to stop, prevent, or minimize these harmful effects. ATSDR's field staff, located in Environmental Protection Agency (EPA) regional offices, and state-level staff supported by the cooperative agreement program, comprise a national network of public health experts who respond to a broad range of hazardous waste and chemical release related issues. ATSDR's FY 2012 activities will serve three complementary functions: assess and mitigate health risks from hazardous exposures; advance the science on hazardous exposures; and deliver information on hazardous substances to health professionals and the public. Additional information about these areas is presented below.

Assess and Mitigate Health Risks from Hazardous Exposures

In FY 2012, ATSDR will:

- Fund up to 25 State health departments and one Tribal government (average award of \$400,000) to assess risks from hazardous exposures at sites, make recommendations for risk mitigation, and deliver health education and community-based interventions.
- Assess possible hazards at 300-400 sites to identify sites where corrective actions are necessary. The recommendations from these assessments will be used to protect communities from hazardous exposures to chemicals.
- Provide over 1,400 technical assists in response to requests from external stakeholders (e.g., regulatory agencies, public health agencies, and the public). ATSDR's technical input and/or educational information will inform decision-making regarding environmental health issues.
- Implement public health activities to mitigate exposures in at least 50 sites with a significant public health focus that requires enhanced collaboration with regulatory agencies, communities, and/or others. ATSDR will collect and analyze data regarding site activities, goals and objectives, findings, recommendations, follow-up activities, and public health impacts in order to inform specific mitigation recommendations.
- Provide health expertise to local governments and developers to inform policy and practice at 20 Brownfield redevelopment sites. This includes support for site assessment activities, emergencies, national exposure issues, and community education and outreach.
- Respond to at least 100 time-critical requests from Federal, State, and/or local emergency
 response personnel addressing chemical releases associated with emergency events. These time
 critical requests will result in reduction of exposures to chemical contaminants in air, soil, and
 water to the public. These time-critical responses will initiate from the 10 ATSDR regional
 offices.

<u>Performance</u>: ATSDR works to prevent and eliminate harmful environmental exposures by recommending and implementing effective public health protection actions. Human exposures to hazardous substances decrease when ATSDR's recommendations are followed, resulting in a reduction in the negative health impacts that are associated with exposures. In FY 2010, the EPA, state regulatory agencies, or private industries accepted ATSDR's recommendations at 87 percent of sites with documented exposures. Since FY 2005, ATSDR exceeded all of the performance targets that track acceptance of their recommendations at sites with documented exposures (Measure 14.1.1). Additionally, ATSDR works to protect human health by preventing or mitigating human exposures to toxic substances or related health effects at sites with documented exposures. Based on current data, interventions have been implemented at 78 percent of sites posing an urgent or public health hazard (Measure 14.3.1). Since

FY 2006, ATSDR has met or exceeded targets that track the percent of sites where ATSDR and funded partners have assessed environmental hazards and actions were taken to reduce or eliminate health risks. (Measures 14.1.1, 14.3.1, 14.B, 14.C, 14.D, and 14.F)

<u>Program Description and Recent Accomplishments</u>: ATSDR works to decrease exposures that can lead to a range of adverse health outcomes. This includes: investigating and preventing health effects related to human exposures to environmental hazards; preparing for and responding to emergencies, man-made disasters, and natural disasters; investigating and responding to acute hazards and exposures; and promoting prevention, control, and elimination of long-term hazardous exposures. While the complete impact of ATSDR's evaluation work is difficult to quantify, the examples described below provide a glimpse into the substantial health benefits that result from ATSDR's work.

Recent accomplishments include:

- Completed evaluations of environmental exposures at more than 500 sites in 2010 by issuing more than 200 public health assessments and consultations. Federal, State, and local authorities adopted 87 percent of ATSDR's recommendations made in these assessments, resulting in healthier and safer environments for communities.
- Released a public health advisory alerting EPA leadership of the need to take immediate actions because of very high levels of hexavalent chromium from groundwater infiltrating basements of homes and other buildings in Garfield, New Jersey. As a result, EPA took immediate action to clean up basements, thus eliminating the threat. In September 2010, the EPA began an assessment of this site for inclusion on the Superfund National Priorities List and the need to implement a permanent remedy to groundwater contamination.
- Conducted a Health Promotion Campaign in Mossville, Louisiana, a community surrounded by 14 industrial facilities, including vinyl production facilities, an oil refinery, a coal-fired power plant, and several petrochemical manufacturers. This campaign provided 30 individuals free health education on at least nine different topics that provided the community with actionable behaviors that they could employ to improve or maintain good health.
- Completed an evaluation (both peer-review and public comment) of exposures and associated public health effects of a release of 5.4 million cubic yards of coal ash that covered more than 300 acres and caused the evacuation of 22 residents in Kingston, Tennessee ATSDR and its Sate partners within the Tennessee Department of Health did not identify any exposures to coal ash contaminants at levels of health concern.
- Assessed the urgent public health hazards posed by a phosphine gas leak in Eastern Michaud Flats, Idaho in cooperation with the Idaho Department of Health and Welfare. This request from EPA included working with regulatory agencies and the site owner to install fencing and additional warning signs to prevent trespass and alert on-site workers of the hazards posed by phosphine gas, as well as implementing a robust fence line-monitoring program, and educating local emergency responders.
- Identified public health concerns that prompted Mirant Corporation and the City of Alexandria to work together to find solutions to reduce local emissions from the Mirant power plant in Virginia. The plant made changes to its boiler stack emissions configuration to increase emission velocity, thereby reducing local sulfur dioxide concentrations and resulting human exposure. At the time of ATSDR's evaluation of the ambient air data, EPA's national ambient air quality standards for sulfur dioxide did not include short-term peak levels. ATSDR identified levels for short-term public health concern. EPA recently changed the national standards to include short-term peak levels and these levels are in line with the values identified by ATSDR.

Responded to 35 mercury spills in 2010 that affected children, some of who required medical interventions from their exposures. To reduce these events, ATSDR and EPA are working on a national outreach campaign "Don't Mess with Mercury." Materials produced for this campaign include a video, video game, and educational outreach materials for teachers and school nurses. The campaign will be posted on the EPA's national website (http://www.dontmesswithmercury.org/). Educational efforts will be conducted at schools and in areas where recent mercury spills have occurred involving adolescents.

Advance the Science on Hazardous Exposures

In FY 2012, ATSDR will:

- Establish a "Program for Early Detection of Certain Medical Conditions Related to Environmental Health Hazards" pursuant to the Affordable Care Act. This program will provide screening, health education, and outreach services for residents of a geographic area subject to declared public health emergencies under the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA).
- Collaborate with industry and other Federal agency partners on epidemiologic research to fill up to 13 scientific information gaps that have been identified related to the health effects of hazardous substances.
- Apply emerging technological tools and methods (including computational toxicology, exposuredose reconstruction, and geospatial information systems) to enhance ATSDR's effectiveness in assessing exposures and studying linkages between environmental contamination and health effects.
- Continue to fund seven state and local health departments to collect data on uncontrolled or illegal releases of hazardous substances and the injuries and evacuations associated with those events for the National Toxic Substance Incidents Program (NTSIP) database.
- Study health effects and exposures in specific communities through applied epidemiological studies, including exposures to solvent-contaminated drinking water in Camp LeJeune, North Carolina and uranium exposure and pregnancy and neonatal complications of mothers on the Navajo Reservation.
- Provide assistance to CDC to maintain up to three registries to identify people with exposures to toxic substances, track them over time, and provide appropriate health information, including the National Amyotrophic Lateral Sclerosis (ALS) Registry to describe the incidence and prevalence burden of ALS in the United States. The registry will also examine factors, such as environmental and occupational, that might be associated with the disease. Using the ALS registry, ATSDR will provide technical assistance to the medical, public health and stakeholders' communities to advance the understanding of the contributing factors of ALS. These activities are funded by, and coordinated with, CDC.

<u>Performance</u>: ATSDR engages in surveillance and research activities to increase the knowledge base on the health effects of toxic substances. The findings are used by scientists, health providers, and policy makers across the country to design and implement community/site clean-up activities, emergency responses, individual treatments and environmental/land use policies. ATSDR develops and applies new tools, like modeling and geographic analysis, in order to answer questions from communities. ATSDR's research and registries allow policy-makers, government agencies, and health providers to make science-based decisions to protect the public from exposures to hazardous substances and their associated health impacts. For example, ATSDR provides technical assistance for the National Toxic Substance Incidents Program (NTSIP) database. The NTSIP—a surveillance system for chemical events—collects data regarding (1) the number of spills each state experiences per year, (2) the amount of chemicals stored,

produced and transported in states, (3) the population demographics and proximity to where chemicals are released, stored, produced and transported, (4) the health impact of spills, and (5) increased focus on the use of the data, including increased prevention, treatment, and evaluation activities. No other surveillance system collects both chemical release and public health data. (Measures 14.2.2, 14.E, 14.G, 14.H, 14.I, and 14.J)

<u>Program Description and Recent Accomplishments</u>: ATSDR works to educate and enhance awareness of the scientific community, policymakers, and medical professionals regarding the effects of hazardous substances on humans. ATSDR conducts applied research using toxicological and epidemiological methods and often collaborates with other government agencies, universities, and volunteer organizations to address critical data needs. ATSDR's scientific research often grows out of site-specific public health activities.

Recent accomplishments include:

- Launched the website for the NTSIP and developed and distributed a training manual to the seven funded NTSIP state partners. Additionally, the HazMat Intelligence Portal portion of the NTSIP webpage was launched to estimate the number of events in non-NTSIP states (only transportation events currently available).
- Supported development of the web portal for the National ALS Registry in response to a congressional directive. This registry gathers information that can be used to; (1) estimate the number of new cases of ALS each year; (2) estimate the number of people who have ALS at a specific point in time; (3) better understand who is diagnosed with ALS and what factors affect the disease; (4) examine the connection between ALS and other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS; and (5) improve care for people with ALS. From October 19 to December 1, 2010, over 1,900 ALS patients enrolled in the registry.
- Completed a multiyear, multisite study in North Carolina of health effects due to toluene diisocyanate (TDI), a substance known to be the largest contributor to occupationally-induced asthma. While much is known about job-related exposures, there is very little information on how low levels of TDI exposure affects the health of the general public. To examine community-level health effects, ATSDR utilized new methods for detecting the chemical in the communities' ambient air, by testing people's blood for exposures, and by assessing the prevalence of asthma and other respiratory diseases in participants near emitting facilities as compared to residents further from these TDI emitting facilities.
- Completed a research study of immunoglobulin gene sequencing for monoclonal B-Cell lymphocytosis (MBL) cases to help increase knowledge of fundamental events associated with the neoplastic process in B-cell lymphoproliferative diseases (BLPD) and permit early detection of the BLPD. The study helped determine whether MBL can be used as a biomarker associated with exposure to hazardous wastes and whether individuals with MBL, who are more likely to progress to a BLPD, can be identified.

Deliver Information on Toxic Chemicals to Health Professionals and the Public

In FY 2012, ATSDR will:

- Continue to develop toxicological profiles (ToxProfilesTM). The ToxProfilesTM are used by health and environmental professionals around the world to make decisions about cleaning up sites, responding to emergencies, and treating patients exposed to chemicals. ToxProfilesTM were cited 900 times in peer reviewed health and environmental literature. ToxProfilesTM and associated documents (e.g. ToxFAQsTM, ToxGuidesTM, Public Health Statements) are among the most widely accessed agency webpages. ATSDR will also continue to update literature databases for the 172 existing ToxProfilesTM in order to provide the most current toxicological and epidemiological data to scientists, health providers, and the public.
- Support a network of 11 regional Pediatric Environmental Health Specialty Units (PEHSU) that provide unique pediatric environmental health services, including medical consultation to pediatric care providers, and education to both health professionals and the public.
- Continue to support the Michigan Blue Cross/Blue Shield Pilot Project. This pilot project has prepared 370 physicians in the Blue Cross/Blue Shield provider network to integrate environmental health knowledge with clinical preventive practice to identify environmental exposures and reduce the burden of environmentally-based disease.
- Provide health professional education to more than 29,000 health care professionals through ATSDR online services and cooperative agreement partner training activities.
- Develop more than 30 chemical and general topic plain language fact sheets to assist the general public and raise awareness of ways to mitigate exposure.
- Educate more than 133,000 community members through public meetings, emails, factsheets, and online videos. Community members can trust the guidance to make informed and unbiased decisions about minimizing exposures and seeking appropriate treatment. Work with communities to use available resources to address their health concerns as part of an enhanced community engagement model (Corpus Christi, Texas, Mossville, Louisiana, Elkhart, Indiana, and Papelera, Puerto Rico, Millsboro, Delaware, Blackwell, Oklahoma, Lincoln Park, Colorado, Hormigas and Cabo Rojo, Puerto Rico and Dwyer, Maryland. Community partners can rely on information to the develop community involvement initiatives and guide planning to reduce the health disparities in their neighborhoods.

<u>Performance</u>: ATSDR plays a primary communication role by sharing environmental health information with health-care providers; Federal, Tribal, State, and local leaders; and affected communities. ATSDR educates the public about chemicals present in their homes, schools, and communities. Informed community members can take the steps they need to reduce their exposures to chemicals and other hazardous exposures, thus reducing health effects associated with those exposures. ATSDR's support for the education of healthcare providers care providers and other health professionals will ensure that these health professionals know how to prevent, diagnose, and treat illnesses caused by hazardous substances to ensure people exposed to chemicals can then obtain early and proper treatment. (Measures 14.2.1, 14.K, 14.L, and 14.M)

<u>Program Description and Recent Accomplishments</u>: ATSDR translates and communicates scientific information on the human health effects of exposures to toxic substances and provides education to community groups and health professionals on how to prevent the health effects of toxic substance exposures. ATSDR provides targeted education at the community level to meet local needs and also broadly distributes educational materials through the internet and other mechanisms. ATSDR develops and provides medical education to assist health professionals in diagnosing and treating conditions related to hazardous exposures. During chemical spills and other emergency events, ATSDR provides medical

guidance to healthcare providers, addressing exposure to chemicals advises local officials about when to evacuate communities, when to allow residents to return, and how to ensure the safety of responders and medical professionals.

Recent accomplishments include:

- Released six final and six draft-for-public-comment ToxProfilesTM in FY 2010, including corresponding English and Spanish Public Health Statements, ToxFAQsTM, and ToxGuidesTM.
- Developed and verified 19 health guidance values, known as minimal risk levels, for 11 different hazardous substances published in the corresponding ToxProfilesTM.
- Released 12 literature update addenda to existing ToxProfilesTM.
- Supported the Pediatric Environmental Health Specialty Unit (PEHSU) University of California
 at San Francisco (Region 9) to assist medical educators in California and Arizona to integrate
 pediatric environmental health into medical school and pediatric residency curricula. This action
 was prompted by a 90-minute education module developed by PEHSU and ATSDR to train
 pediatric care providers to deliver preventive environmental health counseling to parents of their
 patients.
- Collaborated with EPA on the development of human health benchmarks for chemical contaminants in the Gulf of Mexico from the Deepwater Horizon Oil Spill.

IT INVESTMENTS

ATSDR invests in Information Technology (IT) systems that support strategic and performance outcomes. The Sequoia Database System is a scientific and administrative database developed to track, retain, and report information on the planning, execution, follow-up, and evaluation of activities at hazardous waste sites (e.g., Superfund sites, emergency events) and releases. The Geographic Information Systems (GIS) provides a visual tool for identifying the location of events, the spatial relationship between incidents and the population they may impact. Mapping technology also assists in the collection of information from exposed individuals to help identify the source of an unknown release. Another IT investment, Project Profile, is a centralized database, management tool, and reporting mechanism that capture ATSDR's projects and activities. This database is a tool that captures agency and center strategic planning and performance, current project status, and final agency expenditures.

AFFORDABLE CARE ACT

The Affordable Care Act, Public Law 111-148, contains a provision for establishing a program to make competitive grants to eligible entities for the purpose of (1) screening at-risk individuals for environmental health conditions, such as current and past residents of Libby and Troy, Montana; (2) developing and disseminating public information and education concerning the availability of screening, the detection, prevention, and treatment of environmental health conditions; and the availability of Medicare benefits for certain individuals diagnosed with these environmental health conditions. The screening will include evaluation via chest radiographs, chest high-resolution computed tomography scans, and fecal occult blood testing (FOBT), as appropriate. Participants with radiologic asbestosis, pleural thickening or plaques, positive FOBT test results, or diagnosis of select cancers will be eligible for Medicare benefits. The first phase of the screening program will focus on current residents of Libby, Montana. A second phase will include previous residents of Libby and Troy who have since moved away. The Affordable Care Act appropriated \$23,000,000 for the period of fiscal years 2010-2014 and \$20,000,000 for each five fiscal year period thereafter for this program. Funds appropriated are available until expended.

PROGRAM ACTIVITIES TABLE

(dollars in thousands)	FY 2010 Enacted	FY 2011 Continuing Resolution	FY 2012 President's Budget	FY 2012 +/- FY 2010	
Agency for Toxic Substances and Disease Registry	\$99,792	\$76,792	\$76,337	-\$23,455	
- Affordable Care Act ¹	\$23,000	\$0	\$0	-\$23,000	
- Budget Authority	\$76,792	\$76,792	\$76,337	-\$455	

¹ The FY 2010 total reflects \$23,000,000 appropriated to ATSDR under the Affordable Care Act available for five years.

MEASURE TABLE

Measure	Most Recent Result	FY 2010 Target	FY 2012 Target	FY 2012 +/- FY 2010
14.E.2: Increase the percentage of cost savings each year for NCEH/ATSDR as a result of the Public Health Integrated Business Services HPO (Efficiency) Section 1.01 Long Term Objective: Assess curr	FY 2009: 38 % (Target Exceeded)	39%	N/A toxic substance	N/A
human health effects.	•	•		
14.1.1: Reduce exposures to toxic substances and mitigate the likelihood of future toxic exposures by increasing EPA's, state regulatory agencies', or private industries' acceptance of ATSDR's recommendations at sites with documented exposures (Outcome)	FY 2010: 87% (Target Exceeded)	85%	87%	+2
Section 1.02 Long Term Objective: Determine	human health effects	associated with	exposures to p	riority
hazardous substances.				
14.2.1: Advance understanding of the relationship between human exposures to hazardous substances and adverse health effects by completing toxicological profiles for substances hazardous to human health. (Outcome) ¹	FY 2010: 12 (Target Exceeded)	11	11	Maintain
14.2.2: Fill data needs for human health effects/risks relating to hazardous exposures. (Output) ²	FY 2010: 10 (Target Met)	10	10	Maintain
Section 1.03 Long Term Objective: Mitigate the	e risks of human hea	lth effects from	toxic exposures	S.
14.3.1: Protect human health by preventing or mitigating human exposures to toxic substances or related health effects at sites with documented exposures (Outcome)	FY 2010: 78% (Target Exceeded)	74%	76%	+2
14.3.2: Provide services to mitigate the risks of health effects from exposure to hazards from disasters (Output)	FY 2010: 100% (Target Exceeded)	Deploy staff as requested to emergency events in a timely manner 100% of the time.	Deploy staff as requested to emergency events in a timely manner 100% of the time.	N/A

¹Measure 14.2.1 reflects the number of Toxicological Profiles released rather than number of priority data needs filled. ATSDR will report the number of ToxProfilesTM released to the public.

²ATSDR revised the methodology for measuring data needs. The target will now reflect data needs filled (i.e. brought to closure) and not those

that are still in progress.

OTHER OUTPUTS

Outputs	Most Recent Result	FY 2010 Target 1		FY 2012 +/- FY 2011
14.A: Cooperative Agreements	FY 2010: 30	≤ 25	≤ 25	Maintain
14.B: Sites Evaluated/Chemical Release Responses	FY 2010: 818	500	500	Maintain
14.C: Public Health Assessments/Health Consults (includes chemical specific health consults)	FY 2010: 332	≤ 260	≤ 300	+40
14.D: Technical Assists	FY 2010: 800	≤ 1400	≤ 1400	Maintain
<u>14.E</u> : Exposure Investigations	FY 2010: 3	2	2	Maintain
14.F: Emergency Responses and Exercises ³	FY 2010: 94	58	58	Maintain
14.G: Registries (# of registries by exposure type)	FY 2010: 1	2	2	Maintain
14.H: National Toxic Substances Incident Program (surveillance states and events) 1	FY 2010: 7 states/3,578 events	7 states/3,000 events ²	7 states/3,000 events ²	Maintain
14.I: Great lakes Research Projects (studies)	FY 2010: 4	4	4	Maintain
14.J: Minority Health Professions Foundation (grants)	FY 2010: 2	2	2	Maintain
14.K: Pediatric Environmental Health Specialty Units	FY 2010: 11	11	11	Maintain
14.L: Health Professionals Trained	FY 2010: 62,112	47,097	47,097	Maintain
14.M: Community Members Educated ²	FY 2010: 336, 263	133, 000	133, 000	Maintain

¹The target was lowered from 14 in 2009 to 7 in 2010 and future years because CERCLA funding is no longer available to support the states in HSEES surveillance activities.

² There was a drastic increase in the FY 2009 number of community members educated due to a prevention activity that targeted 250,000 local utility customers by giving out a fact sheet in a newsletter. Since these large activities cannot be foreseen the targets for 2011 and 2012 have not been increased based on this result.

³ Emergency response support at ATSDR is provided on-demand at the request of the lead federal agency or our partners; there is no requirement

³ Emergency response support at ATSDR is provided on-demand at the request of the lead federal agency or our partners; there is no requirement to access ATSDR support. Projections have been based on past performance. Maintenance is based on marketing the program to potential clients. Marketing efforts have curtailed over the past several years and it is anticipated that requests will decrease over the next two years.

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SUPPLEMENTAL MATERIAL

DISCUSSION OF THE ADMINISTRATIVE CAP

In FY 2009 and FY 2010, the administrative charge to ATSDR was \$12,090,000. ATSDR provided these funds to CDC via an interagency agreement to fund activities including, but not limited to, rent/utilities/maintenance, Human Resources management, Information Technologies Systems, telecommunications and financial management.

In FY 2011, the administrative charge will remain at \$12,090,000. Over the past several fiscal years, reorganizations and changes in budget structure have rendered CDC's administrative cost formula outdated. CDC re-commissioned a study to update the method for determining administrative costs to programs such as ATSDR. The results of the impending study will be used to assist in determining ATSDR's administrative charge in FY 2012. Until a new formula is determined, CDC will continue to apply the existing method to determine administrative charges.

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BUDGET AUTHORITY BY OBJECT

FY 2012 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY **OBJECT CLASSIFICATION - DIRECT OBLIGATIONS** (DOLLARS IN THOUSANDS) FY 2011 FY 2012 Continuing President's FY 2012 +/-**Object Class** Resolution **Budget FY 2011 CR** Personnel Compensation: Full-Time Permanent(11.1) \$23,423 \$23,423 \$0 \$814 \$0 Other than Full-Time Permanent (11.3) \$814 Other Personnel Comp. (11.5) \$982 \$982 \$0 \$3,586 \$3,586 Military Personnel (11.7) \$0 Special Personal Service Comp. (11.8) \$0 \$0 \$0 **Total Personnel Compensation** \$28,805 \$28,805 \$0 Civilian personnel Benefits (12.1) \$7,091 \$7,091 \$0 Military Personnel Benefits (12.2) \$1,521 \$1,521 \$0 Benefits to Former Personnel (13.0) \$0 \$0 \$0 SubTotal Pay Costs \$37,417 \$37,417 \$0 Travel (21.0) \$1,100 \$1,118 \$18 Transportation of Things (22.0) \$63 \$64 \$1 \$11,063 \$11,251 \$188 Rental Payments to GSA (23.1) Rental Payments to Others (23.2) \$20 \$20 \$0 Communications, Utilities, and Misc.Charges (23.3) \$1,378 \$1,400 \$22 NTWK Use Data TRANSM SVC (23.8) \$0 \$3 \$3 Printing and Reproduction (24.0) \$100 \$102 \$2 Other Contractual Services: Advisory and Assistance Services (25.1) \$2,415 \$2,111 (\$304)Other Services (25.2) \$5,375 \$5,371 (\$4) Purchases from Government Accounts (25.3) \$2,726 \$2,383 (\$343)Operation and Maintenance of Facilities (25.4) \$1 \$1 (\$0) Research and Development Contracts (25.5) \$0 \$0 \$0 Medical Services (25.6) \$0 \$0 \$0 Operation and Maintenance of Equipment (25.7) \$357 \$312 (\$45) Subsistence and Support of Persons (25.8) \$1 \$1 (\$0)Consultants, other and misc (25.9) \$147 \$128 (\$19)**Subtotal Other Contractual Services** \$10,307 \$11,022 (\$715)Supplies and Materials (26.0) \$572 \$593 \$21 \$562 \$571 Equipment (31.0) \$9 Land and Structures (32.0) \$0 \$0 \$0 Investments and Loans (33.0) \$0 \$0 \$0 Grants, Subsidies, and Contributions (41.0) \$13,492 \$13,492 \$0 Insurance Claims and Indemnities (42.0) \$0 \$0 \$0 Interest and Dividends (43.0) \$0 \$0 \$0 Refunds (44.0) \$0 \$0 \$0 **Subtotal Non-Pay Costs** \$39.375 \$38.920 (\$455) **Total Budget Authority** \$76,792 \$76,337 (\$455)

SALARIES AND EXPENSES

FY 2012 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY **SALARIES AND EXPENSES** (DOLLARS IN THOUSANDS) FY 2012 FY 2011 FY 2012 +/ Continuing President's FY2011 CR Resolution **Budget Personnel Compensation:** \$23,423 \$23,423 \$0 Full-Time Permanent(11.1) \$814 \$814 \$0 Other than Full-Time Permanent (11.3) \$982 \$982 \$0 Other Personnel Comp. (11.5) \$3,586 \$3,586 \$0 Military Personnel (11.7) \$0 \$0 \$0 Special Personal Service Comp. (11.8) \$28,805 \$28,805 \$0 **Total Personnel Compensation** \$7,091 \$7,091 \$0 Civilian personnel Benefits (12.1) \$1,521 \$0 \$1,521 Military Personnel Benefits (12.2) \$0 \$0 \$0 Benefits to Former Personnel (13.0) \$37,417 \$37,417 \$0 SubTotal Pay Costs \$1,100 \$1.118 \$18 Travel (21.0) \$63 \$64 \$1 Transportation of Things (22.0) \$1,378 \$1,400 \$22 Communications, Utilities, and Misc. Charges (23.3) \$100 \$102 \$2 Printing and Reproduction (24.0) Other Contractual Services: Advisory and Assistance Services (25.1) \$2,415 \$2,111 (\$304)\$5,375 \$5,371 (\$4)Other Services (25.2) \$2,383 \$2,726 (\$343)Purchases from Government Accounts (25.3) \$1 \$1 Operation and Maintenance of Facilities (25.4) (\$0)\$0 \$0 \$0 Medical Services (25.6) \$357 \$312 (\$45)Operation and Maintenance of Equipment (25.7) \$1 \$1 (\$0)Subsistence and Support of Persons (25.8) **Subtotal Other Contractual Services** \$10,875 \$10,178 (\$697)Supplies and Materials (26.0) \$572 \$593 \$21 **Subtotal Non-Pay Costs** \$14,088 \$13,454 (\$634)Rental Payments to Others (23.2) \$20 \$20 \$0 Total, Salaries & Expenses and Rent \$51,525 \$50,892 (\$633)

Direct FTE

290

290

DETAIL OF FULL-TIME EQUIVALENT EMPLOYMENT (FTE)

FY 2012 BUDGET SUBMISSION							
AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY							
DETAIL OF FULL-TIME EQUIVALENT EMPLOYMENT (FTE)							
FY 2010 FY 2011 FY 2012						′ 2012	
Direct FTEs	Civilian	Comm Corp	Civilian	Comm Corp	Civilian	Comm Corp	
Agency for Toxic Substances and Disease Registry	247	43	247	43	247	43	
Reimbursable FTEs							
Agency for Toxic Substances and Disease Registry	20	1	19	2	19	2	
TOTAL, ATSDR FTE	267	44	266	45	266	45	

DETAIL OF POSITIONS

FY 2012 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY PROGRAM ADMINISTRATION DETAIL OF POSITIONS 1 FY 2011 FY 2010 FY 2012 Actual CR Estimate **Executive Level** Executive level I Executive level II Executive level III Executive level IV Executive level V Subtotal **Total-Executive Level Salary** Total - SES **Total - SES Salary** GS-15 12 12 12 GS-14 81 81 81 GS-13 71 71 71 GS-12 35 35 35 GS-11 11 11 11 GS-10 1 1 GS-9 14 14 14 GS-8 4 4 4 GS-7 13 13 13 GS-6 4 4 4 0 0 GS-5 0 GS-4 1 1 1 GS-3 0 0 0 GS-2 0 0 0 GS-1 0 0 Subtotal - GS 247 247 247 Total - GS Salary \$24,459,846 \$25,169,181 \$25,899,087 Average GS Grade 12.4 12.4 12.4 Average GS Salary 92,145 92,145 92,145 Average Special Pay Categories Average Comm. Corps Salary 80,515 80,515 80,515

Average Wage Grade Salary

66,443

66,443

66,443

¹ This table reflects "positions" not full-time equivalent(s) (FTEs)

SIGNIFICANT ITEMS

SIGNIFICANT ITEMS IN APPROPRIATIONS REPORT

SIGNIFICANT ITEMS FOR INCLUSION IN THE FY 2012 CONGRESSIONAL JUSTIFICATION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY

There are no significant items for inclusion for ATSDR