



**DEPARTMENT
of HEALTH
and HUMAN
SERVICES**

**Fiscal Year
2009**

**Agency for Toxic Substances
and Disease Registry**

*Justification of
Estimates for
Appropriation Committees*

INTRODUCTION

The FY 2009 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 HHS agencies' FY 2009 Congressional Justifications and Online Performance Appendices, the Agency Financial Report and the HHS Performance Highlights. These documents can be found at <http://www.hhs.gov/budget/docbudget.htm> and <http://www.hhs.gov/afr/>.

The Performance Highlights briefly summarize key past and planned performance and financial information. The Agency Financial Report provides fiscal and high-level performance results. The FY 2009 Department's Congressional Justifications fully integrate HHS' FY 2007 Annual Performance Report and FY 2009 Annual Performance Plan into its various volumes. The Congressional Justifications are supplemented by the Online Performance Appendices. Where the Justifications focus on key performance measures and summarize program results, the Appendices provide performance information that is more detailed for all HHS measures.

The ATSDR Congressional Justification and Online Performance Appendix can be found at <http://www.CDC.gov>.

MESSAGE FROM THE DIRECTOR

We are pleased to present the FY 2009 Congressional Justification for the Agency for Toxic Substances and Disease Registry (ATSDR). This budget request includes the FY 2009 Annual Performance Plan and the FY 2007 Annual Performance Report as required by the Government Performance and Results Act of 1993.

ATSDR employs the best science, takes responsive action, and provides trustworthy health information to prevent and mitigate harmful exposures and related disease. 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. FY 2007 successes for ATSDR include the following:

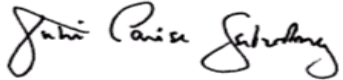
- Helped reduce the risk to humans—and save the state’s \$63 million crop—after cranberries grown in Massachusetts tested positive for Eastern Equine Encephalitis (EEE) by providing support to the state health department through a cooperative agreement;
- Protected the health of employees of a construction and demolition debris landfill in Florida who were exposed to dangerous levels of hydrogen sulfide by conducting a joint study with the local health department to assess the air quality in the surrounding area;
- Helped reduce cancer risk in a Wisconsin community due to exposure to trichloroethylene (TCE) by preparing a health consultation with the Wisconsin Department of Health and Family Services that prompted a metal working shop to voluntarily change its manufacturing process;
- Through coordinated effort with the EPA and a CSX Transportation contractor to test air quality, clean the effected area, and evacuate local residents, ATSDR protected residents in a Kentucky community from hazardous exposures following a train derailment which released hazardous substances into the environment; and
- Helped protect the health of 5,000 to 8,000 residents evacuated during a fire at a magnesium recycling facility in Anderson, Indiana by providing guidance on effective placement of air monitoring equipment and by developing a protocol to help prevent asbestos exposure during the clean-up.

Under its Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) mandate, these examples illustrate ATSDR’s continuing work in preventing and mitigating exposures and related health effects at sites across the nation.

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 2009 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,

Handwritten signature of Julie Louise Gerberding in black ink.

Julie Louise Gerberding, M.D., M.P.H.

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

Handwritten signature of Howard Frumkin in blue ink.

Howard Frumkin, M.D., Dr. P.H.

Director, National Center for Environmental Health/
Agency for Toxic Substances and Disease Registry

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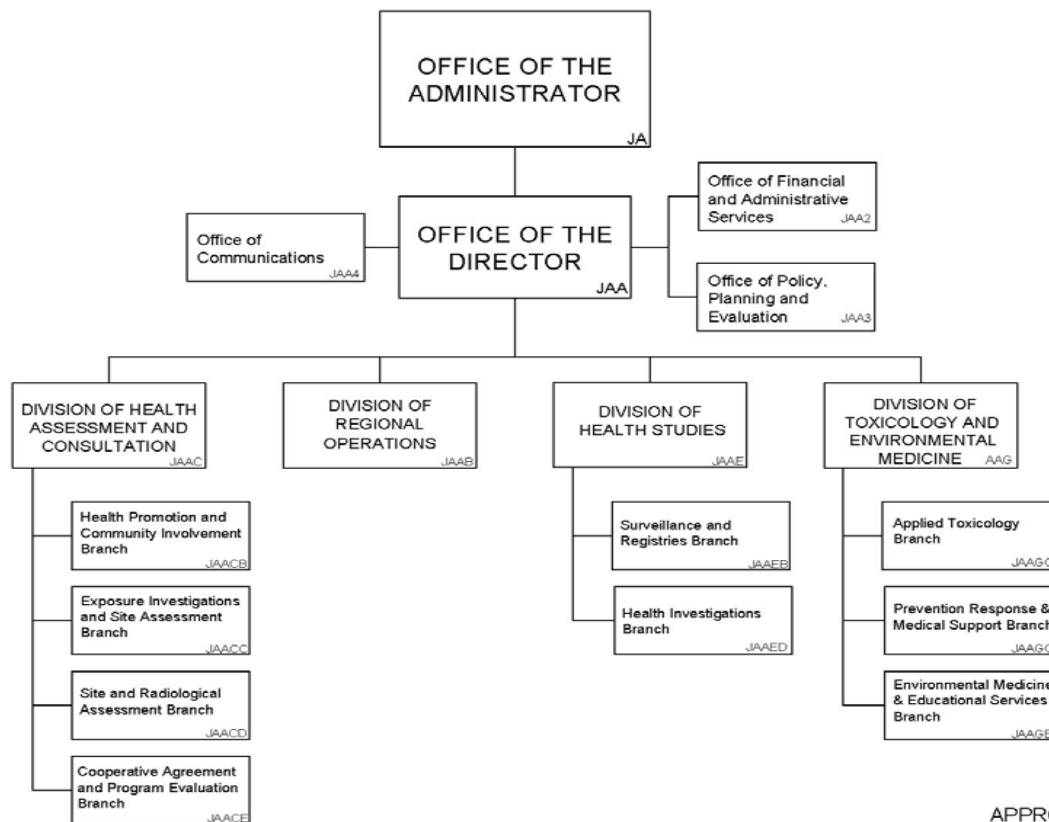
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ORGANIZATIONAL CHART

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY (J)**



APPROVED 9/25/2006

EXECUTIVE SUMMARY

INTRODUCTION AND MISSION

AGENCY MISSION

The Agency for Toxic Substances and Disease Registry (ATSDR) is the nation's public health agency for chemical safety. The agency's mission is to use the best science, take responsive action, and provide trustworthy health information to prevent and mitigate harmful exposures and related disease.

The discovery of contamination in New York State's Love Canal during the 1970s first brought the problem of hazardous wastes to national attention. Similarly, the health threat from sudden chemical releases came into focus in December 1984, when a cloud of methyl isocyanate gas released from a Union Carbide facility in Bhopal, India, seriously injured or killed thousands of people.

Both events represent the kinds of issues at the core of ATSDR's congressional mandate. 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 pieces of legislation, 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.

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.

Under its CERCLA mandate, ATSDR's work falls into four functional areas:

- Protecting the public from hazardous exposures;
- Increasing knowledge about toxic substances;
- Educating health care providers and the public about toxic chemicals; and
- Maintaining health registries.

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

STRATEGIC GOALS

ATSDR's mission, focus and overarching strategic goals are complementary to the HHS Strategic Plan and support the agency's congressional mandate. ATSDR developed long-term strategic goals when the agency participated in its first PART review process in 2003. In 2007, ATSDR was reassessed by OMB. As a result of the reassessment, ATSDR's efficiency and long-term/annual measures were modified. The efficiency and health goals represent core aspects of ATSDR's public health efforts, and are aligned with CDC's Health Protection Goals to ensure efficient and effective use of resources to achieve health impact.

Efficiency Goal: Reduce cost to deliver health findings and recommendations.

In the event of a known or suspected public health threat, the timeliness with which critical information is delivered to the public may greatly influence the speed with which site managers, public health agencies, and the American people can take protective actions. Toward this end, ATSDR is working to provide critical public health findings and recommendations to the public in the most expedient and economically efficient manner.

Goal 1: Assess current and prevent future exposures to toxic substances and related human health effects.

ATSDR prevents ongoing and future exposures by responding to toxic substance releases when they occur or as they are discovered. The agency is successful in preventing ongoing and future exposures when EPA, state regulatory agencies, or private organizations accept the agency's recommendations and take appropriate actions. Therefore, ATSDR takes an active approach of following up on its recommendations with the regulatory agencies to ensure they adopt ATSDR's public health and safety recommendations.

Goal 2: Determine human health effects associated with exposures to priority hazardous substances.

A significant part of ATSDR's work is determining the relationship between human exposures to hazardous substances and health effects. As required by law, ATSDR prepares toxicological profiles (ToxProfiles) for hazardous substances found at National Priorities List (NPL) sites and upon request from the scientific community. Each profile provides a summary and comprehensive evaluation, and an interpretation of available scientific information on a substance. Because ToxProfiles are intended to be comprehensive in nature, when there are insufficient data to provide a complete picture of the health effects of a toxic substance, ATSDR identifies what data are needed, and works to collect information to complete the profile.

Goal 3: Mitigate the risks of human health effects from toxic exposures.

A key indicator of the success of ATSDR's work with its partners is not only to identify exposures to toxic substances, but also to take action and follow-up to ensure that the effect of these risks on exposed individuals is minimal. Therefore, ATSDR assesses the impact of the agency on human health in communities where actual or potential exposures exist. Depending on the toxic substance(s) and route(s) of exposure, the impact of interventions on human health can be measured through morbidity/mortality rates, biomarkers test, environmental monitoring and behavioral change that documents changes in behavior that prevent future exposures.

BUDGET OVERVIEW

The FY 2009 budget of \$72,882,000 for ATSDR represents a decrease of \$1,157,000 below the FY 2008 Enacted level of \$74,039,000. The decrease includes an Individual Learning Account (ILA) and administrative reduction. Funding for the ILA has given ATSDR staff the ability to participate in educational and career development activities related to the employee's federal employment at ATSDR. ATSDR's FY 2009 Request eliminates this funding.

ALL PURPOSE TABLE

	FY 2007 ACTUAL	FY 2008 ENACTED	FY 2009 ESTIMATE	FY 2009 +/- FY 2008
BA	\$75,212,000	\$74,039,000	\$72,882,000	-\$1,157,000

BUDGET EXHIBITS

APPROPRIATION LANGUAGE

ATSDR

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), 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, ~~\$75,212,000 \$72,882,000, of which up to \$1,500,000, to remain available until expended, is for Individual Learning Accounts for full-time equivalent employees of the Agency for Toxic Substances and Disease Registry: 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 2009, and existing profiles may be updated as necessary.*~~

APPROPRIATIONS LANGUAGE ANALYSIS

PURCHASE AND LANGUAGE PROVISION	EXPLANATION
["...of which up to \$1,500,000, to remain available until expended, is for Individual Learning Accounts for full-time equivalent employees of ATSDR..."]	The FY 2009 Budget request for ATSDR does not include funding for Individual Learning Accounts.
"...to issue in excess of 40 toxicological profiles pursuant to section 104(i) of CERCLA..."	This provision provides authority to assist ATSDR in meeting the Superfund Amendments and Reauthorization Act of 1986 (SARA) requirement related to completion and revision of toxicological profiles.

AMOUNTS AVAILABLE FOR OBLIGATION

FY 2009 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY AMOUNTS AVAILABLE FOR OBLIGATION ¹			
	FY 2007 Actual	FY 2008 Enacted	FY 2009 Budget
Appropriation:			
Annual	75,212,000	75,212,000	72,882,000
Rescission	-	(1,173,000)	
Subtotal, adjusted Appropriation	75,212,000	74,039,000	72,882,000
Unobligated balance start of year	(539,000)	(843,000)	(800,000)
Unobligated balance lapsing	-	-	
Unobligated balance end of year	1,079,000	800,000	800,000
Total obligations	75,752,000	73,996,000	72,882,000

¹Excludes the following amounts for reimbursements: FY 2007 - \$5,000,000; FY 2008 - \$6,000,000; and FY 2009 - \$6,000,000.

SUMMARY OF CHANGES

FY 2009 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY SUMMARY OF CHANGES (DOLLAR IN THOUSANDS)				
	Dollars		FTEs	
2009 Budget (Budget Authority)	\$0		320	
2008 Enacted (Budget Authority)	\$0		313	
Net Change	\$0		7	
	2008 Enacted		Change from Base	
	FTE	Base Funding	FTE	Proposed Level
Increases:				
	N/A	\$0	N/A	\$0
Total Increases	N/A	\$0	0	\$0
Decreases:				
1. Individual Learning Accounts	N/A	\$0	---	(\$1,157)
Total Decreases	N/A	\$0	0	(\$1,157)
Built-In:				
1. January 2009 Pay Raise/Locality Pay	---	---	---	662
2. Annualization of FY 2008 Pay Increase	---	---	---	264
3. One Less Day of Pay	---	---	---	(115)
4. Within-Grade Increases	---	---	---	543
5. Rental Payments to GSA and Others	---	---	---	66
6. Inflation Costs on Other Objects	---	---	---	517
Total Built-In	313	\$0	0	\$1,937
1. Absorption of Current Services			0	(\$1,937)
Total	N/A	N/A	0	(\$1,937)
Total, Increases (Budget Authority)	N/A	N/A	7	\$1,937
Total, Decreases (Budget Authority)	N/A	N/A	0	(\$3,094)
NET CHANGE - INTERIOR, ENVIRONMENT, AND RELATED AGENCIES BUDGET AUTHORITY	313	\$0	7	(\$1,157)

AUTHORIZING LEGISLATION

<i>DOLLARS IN THOUSANDS</i>	<i>FY 2008 AMOUNT AUTHORIZED</i>	<i>FY 2008 ENACTED</i>	<i>FY 2009 AMOUNT AUTHORIZED</i>	<i>FY 2009 BUDGET</i>
<i>AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY (ATSDR)</i>	<i>INDEFINITE</i>	<i>\$74,039</i>	<i>INDEFINITE</i>	<i>\$72,882</i>
<i>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.</i>				
<i>TOTAL APPROPRIATION</i>		<i>\$74,039</i>		<i>\$72,882</i>

APPROPRIATIONS HISTORY

FY 2009 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY APPROPRIATIONS HISTORY TABLE				
	Estimate	House Allowance	Senate 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 Rescission ¹				(361,874)
2006 Rescission				(756,620)
2007 ²	75,004,000	76,754,000	75,004,000	74,905,000
2008	75,004,000	75,212,000	75,004,000	75,212,000
2008 Rescission				(1,173,000)
2009	72,882,000			

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

NARRATIVE BY ACTIVITY

NARRATIVE BY ACTIVITY

	FY 2007 ACTUAL	FY 2008 ENACTED	FY 2009 ESTIMATE	FY 2009 +/- FY 2008
BA	\$75,212,000	\$74,039,000	\$72,882,000	-\$1,157,000

AUTHORIZING LEGISLATION

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.

FY 2009 Authorization..... Indefinite
 Allocation Methods.....Direct
 Federal/Intramural; Competitive Grants/Cooperative Agreements; Contracts; Other

PROGRAM DESCRIPTION AND ACCOMPLISHMENTS

In 1980, the Agency for Toxic Substances and Disease Registry (ATSDR) was created by the Comprehensive Environmental Response, Compensation and Liability Act (CERCLA), also known as the Superfund law. ATSDR's purpose is to lead federal public health efforts at Superfund and other sites with known or potential toxic exposures. Its mission is to use the best science, take responsive action, and provide trustworthy health information to prevent and mitigate harmful exposures and related disease

ATSDR shares common concerns with other federal agencies and institutes, such as the Environmental Protection Agency (EPA), the National Institute of Occupational Health and Safety (NIOSH), and the Chemical Safety and Hazard Investigation Board (CSHIB). What distinguishes ATSDR is its unique focus. In the area of toxic substances, other federal agencies' efforts address substances in the environment and/or the workplace. ATSDR concentrates almost exclusively on the human health effects of substances in the environment. A non-regulatory agency, ATSDR often serves in an advisory capacity to other agencies, delivering authoritative scientific expertise on the human health effects of hazardous environmental exposures. ATSDR's programs are also distinctive in their emphasis on both community involvement and environmental justice.

The ATSDR Cooperative Agreement Program helps the Agency accomplish its mission in communities nationwide. This extramural grant program funds 30 states and one tribal government to build their ability to assess and respond to site-specific issues involving human exposure to hazardous substances in the environment. The Agency's partners use these funds to support approximately 100 environmental public health professionals who serve as front-line responders in site assessments, emergency spills, and community concerns. In addition, ATSDR maintains regional staff located in EPA regional offices around the country. This structure enables ATSDR to respond quickly to emergencies. In 2007, ATSDR and its partners served approximately 1.6 million people in approximately 206 communities.

ATSDR is directed by congressional mandate to perform specific activities concerning the effect on public health of hazardous substances in the environment. These activities generally fall into one of four functional areas:

- 1) Protecting the public from hazardous exposures – ATSDR applies its public health expertise to the task of preventing and responding to exposures at hazardous waste sites; the Agency also leads the public health component of responses to acute or short-term releases of hazardous substances resulting from accidents, natural disasters, and terrorist events. To accomplish this work, ATSDR performs a variety of site-specific activities, including the following:
 - *Public Health Assessments (PHAs)* review information about hazardous substances found at a waste site. PHAs evaluate whether people living or working at the site or nearby may be exposed to harmful levels of these substances. These assessments may also recommend that EPA or other agencies take certain actions to protect public health such as conducting blood tests for children or remediating a waste site. ATSDR conducts a PHA for each site proposed for the National Priorities List (NPL) and for other sites in response to petitions from communities.
 - *Exposure Investigations* collect and analyze site information and perform biological tests, and, when appropriate, determine whether people have been exposed to hazardous substances.
 - *Health Consultations (HCs)* provide guidance on specific, health-related questions about hazardous wastes in communities. More limited in scope than PHAs, health consultations may be written or oral, and may contain recommendations.
 - *Technical Assistance* reports provide public health input to address specific requests from regulatory agencies, public health agencies, and the public, related to hazardous waste sites, chemical releases, hazardous chemicals, and related environmental public health issues. Technical assistance reports are more limited in scope than PHAs and Health Consultations and address requests that are very limited in scope.
 - *Emergency Responses* help protect public health during emergencies. ATSDR provides resources, staff, and technical assistance when needed anywhere in the U.S.
- 2) Increasing knowledge about toxic substances – ATSDR increases knowledge of the scientific community, decision-makers, and the general public regarding the human health effects from toxic substances by regularly reviewing existing scientific knowledge and summarizing this work in a variety of state-of-the-art scientific publications. ATSDR also identifies information gaps, and takes steps to fill these data gaps by encouraging research by others, conducting research, or sponsoring partners. Under this function, ATSDR's products and services include:
 - *Toxicological Profiles (ToxProfiles)* summarize, interpret, and evaluate available data and possible health effects of hazardous substances found at NPL sites. To date, 296 toxicological profiles have been published or are under development. Of these, 281 profiles have been published as final eight are being revised on the basis of public comments, and seven are out for public comment. These ToxProfiles are regularly updated and are used by health and scientific professionals worldwide.
 - *Toxicologic Research*, especially computational toxicology, provides rapid, cost-effective information on health effects of chemicals, especially useful in assessing emergency releases.
 - *Collaboration in interagency research priorities* with EPA, NIOSH and the National Institute for Environmental Health Sciences (NIEHS). This Tri-Agency Superfund Applied Research Committee (TASARC) coordinates research related to filling priority

data needs. ATSDR partners with industry via a voluntary research program to aid in the completion of research questions related to hazardous substances.

- *Health Studies* help determine whether exposures to hazardous substances can lead to increased risk for various health problems, such as cancer, birth defects, auto-immune or neurological disorders, respiratory diseases, and other illnesses. ATSDR conducts its own health studies and supports others through agreements with state health departments and universities.
- *ATSDR's Hazardous Substances Emergency Events Surveillance (HSEES) System* is recognized as the only federal database collecting information on the public health impact of acute hazardous substance releases. In collaboration with 14 state agencies and the National Response Center, HSEES tracks and reports hazardous substances releases, enabling ATSDR and its partners to depict patterns of releases, as well as plan for release prevention and response.

3) Educating health care providers and the public about toxic chemicals – ATSDR informs the public and local health care providers about local circumstances, if toxic substances represent a public health hazard, and advises the public and agencies on how to minimize the hazard. Under this function, ATSDR's products and services include:

- *Health Education* provides information and training to affected communities and medical professionals about ways to assess, control, or prevent exposure to hazardous substances in the environment.
- *Continuing Education* provides information and training to physicians, nurses and other professionals on environmental health issues. Materials include the Case Studies in Environmental Medicine (CSEM) series and webcasts for health care professionals.
- *The ATSDR ToxGuides™* are quick reference pocket guides. Developed for field use, they provide information such as chemical and physical properties, sources of exposure, routes of exposure, minimal risk levels, children's health, and health effects. The ToxGuides™ also discuss how the substance might interact in the environment. ToxGuides™ are excerpted from the corresponding toxicological profiles.
- *ToxFAQs™* provide a quick and easy to understand version of ATSDR's ToxProfiles and Public Health Statements. Each document provides answers to the most frequently asked questions (FAQs) about exposures to hazardous substances found around sites and the effects of these exposures on human health. The ToxFAQs™ and Public Health Statements have been translated into Spanish.

4) Maintaining health registries – ATSDR maintains selected exposure registries that enumerate people with defined exposures to toxic substances, track them over time to understand associated health impacts, and provide health information to registrants as appropriate. Registries can help scientists understand the extent of exposures and provide data that can be used to demonstrate exposures and health outcomes. ATSDR is currently maintaining the following registries:

- *Tremolite Asbestos Registry* which traces, locates, and tracks individuals affected by the tremolite asbestos mined in Libby, Montana.
- *World Trade Center Registry* tracks long-term health effects among workers, residents, and school children who were the most directly exposed to smoke, dust, and debris resulting from the World Trade Center disaster. This registry is maintained in collaboration with the New York City Department of Health and Mental Hygiene.

Program Assessment Rating Tool (PART) Results

In 2007, ATSDR was reassessed by the Office of Management and Budget (OMB) – the Agency achieved an “Effective” rating, the highest rating for federal programs. The OMB cited ATSDR’s ability to demonstrate impact on the health of people living in communities exposed to toxic substances, as well as recognizing numerous efficiency efforts by the agency, including its new cost-savings efficiency measure, as strong attributes of the program. As a result of the PART review, ATSDR is taking steps to track efficiencies throughout the agency and participating in agency-wide budget and performance integration activities.

Goals and Measures

CDC implemented four overarching Health Protection Goals to ensure efficient and effective use of resources to achieve health impact. The goals guide activities and performance, organize the agency’s portfolio by priority to activities that have the greatest health impact and reduce health disparities, align the agency’s annual budget to the priorities, and demonstrate accountability.

Efficiency Goal: Reduce cost to deliver health findings and recommendations.

Measure: Reduce the average cost per site to deliver public health findings and recommendations to the public.

In the event of a known or suspected public health threat, the timeliness with which critical information is delivered to the public may greatly influence the speed with which site managers, public health agencies, and the American people can take protective actions. Toward this end, ATSDR is working to provide critical public health findings and recommendations to the public in the most expedient manner. Historical data demonstrate that ATSDR’s HCs can be conducted in a fraction of the time (and therefore at less cost) required to conduct PHAs. In many cases, HCs are sufficient to provide the public with the information they need, therefore ATSDR is working to increase the proportion of sites that are addressed with HCs rather than PHAs, where appropriate.

In FY 2007, ATSDR did not meet its target of 21 percent, because many of the sites were addressed through technical assists rather than through HCs. Technical assists are often the most efficient and cost-effective way to address site-related requests. However, this method was not included in the original baseline used to estimate the original PART targets. While ATSDR did not meet the numeric PART target, it did meet the intent of the goal by using a more cost-effective method of addressing the sites.

Goal 1: Assess current and prevent future exposures to toxic substances and related human health effects.

Measure: 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.

ATSDR responds to toxic substance releases when they occur or as they are discovered. One of the agency’s primary responsibilities during these events is to provide information and to recommend actions, from a public health perspective, to the agency or industry responsible for cleaning up the released toxins and/or mitigating the likelihood of future releases. Since ATSDR serves in an advisory capacity, with no regulatory or enforcement authority, the protection of the public’s health from toxic substance releases is dependent on the extent to which 1) ATSDR’s recommendations are adopted by those entities that do have enforcement authority,(e.g., (EPA and state regulatory agencies); and 2) private industries adhere to ATSDR’s recommendations and regulations. This measure reports the percentage of ATSDR’s public health and safety recommendations accepted by EPA, state

regulatory agencies, and private organizations. The annual results may fluctuate as decisions are made regarding pending adoption of ATSDR recommendations.

In FY 2006, ATSDR tracked a total of 373 recommendations for urgent and public hazard conclusion category. The FY 2006 target of 80 percent was exceeded, with a result of 89 percent of the recommendations accepted.

Goal 2: Determine human health effects associated with exposures to priority hazardous substances.

Measure 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.

A significant part of ATSDR's work is determining the relationship between human exposures to hazardous substances and health effects. As required by law, ATSDR prepares ToxProfiles for hazardous substances found at the NPL sites and upon request from the scientific community. This "Priority List of Hazardous Substances" is a catalog of the hazardous substances most commonly found at NPL facilities and those that pose significant potential threat to human health. Hazardous substances may be added or deleted from the NPL annually; therefore, each year there may be substances for which ToxProfiles must be developed.

Each profile provides a summary and comprehensive evaluation, and an interpretation of available scientific information on a substance. Because ToxProfiles are intended to be comprehensive in nature, when there are insufficient data to provide a complete picture of the health effects of a toxic substance, ATSDR identifies what data are needed, and works to collect needed information to complete the profile. This measure tracks the number of identified data gaps that are resolved annually.

Data needs were filled for 18 substances including heptachlor, ethylbenzene and xylene. Many of the data needs were filled by information/studies that were identified during the development of the updated toxicological profiles. For example, for heptachlor, using recent studies available, acute- and intermediate-duration oral Minimal Risk Levels (MRLs) were derived which fill the priority data need for dose-response animal data for acute- and intermediate-duration oral exposures. Also, priority data needs for chloroethane and cyanide are being filled through the ATSDR/EPA test rule.

Measure 2: Fill data needs for human health effects/risks relating to hazardous exposures.

ATSDR also works to determine the relationship between toxic exposures and disease through health studies, disease tracking, and surveillance activities. ATSDR's research findings help determine whether exposures to hazardous substances can lead to increased risk for various health problems, such as cancer, leukemia, multiple sclerosis, asthma, and other illnesses.

This measure tracks the number of data needs (i.e., gaps in knowledge about effects from exposure to hazardous substances) that ATSDR fills through the completion of site-specific or broader research studies. A data need is a specific question posed by a community or other stakeholders at sites where ATSDR provides services. It may also be a question ATSDR seeks to answer under its research agenda.

In FY 2007, ATSDR met its target of completing 30 site-specific and research data needs. Examples of these data needs include:

- A community report on Environmental Beryllium Disease (November 2006)
- A journal article on Arsenic Exposure in Mongolia in the Human and Ecological Risk Assessment (HERA) journal (July 2007);
- A journal article on B-Cell Lymphocytic Abnormalities published on the Clinical Cytometry web site.

Goal 3: Mitigate the risks of human health effects from toxic exposures.

Measure: Protect human health by preventing or mitigating human exposures to toxic substances or related health effects at sites with documented exposures.

This outcome measure captures the impact of the agency on human health in communities where actual or potential exposures exist. The long-term measure tracks the percentage of sites where human health risks or effects have been mitigated. The measure compares documented human health risks or effects at the time of the initial site assessment to those after intervention, thus measuring the reduction in people's actual or potential exposures. Depending on the toxic substance(s) and route(s) of exposure, the impact of interventions on human health can be measured through the following:

- Morbidity/Mortality rates that measure, for example, the reduction in childhood cancer or birth defects rates.
- Biomarkers, which signal the presence of toxic substances in the body, are used in cases where reliable and affordable tests are available.
- Environmental monitoring that measures reduction in environmental contaminants to below levels of human health concern.
- Behavioral change that documents changes in behavior that prevent future exposures.

In FY 2007, ATSDR continued to work with the EPA and other partners to assess the status of the implementation of interventions. Based on current data, interventions have been implemented at 70 percent of those sites posing an urgent or public health hazard.

Recent ATSDR accomplishments include the following:

- A Reason to Give Thanks in Massachusetts — The Massachusetts Department of Public Health (MDPH), an ATSDR-funded partner, successfully reduced the risk to humans for contracting Eastern Equine Encephalitis (EEE)—and helped save the state's 1.97 million-barrel cranberry crop, which accounts for some 29 percent of the nation's cranberries. In response to a public health emergency, MDPH and the Massachusetts Department of Agricultural Resources applied for and received an emergency exemption in August 2006 to apply the pesticide Anvil 10+10 over agricultural lands. Aerial application of Anvil began immediately to reduce the level of adult mosquitoes in southeastern Massachusetts, where surveillance of mosquitoes and birds showed the presence of EEE in mosquitoes. MDPH's Center for Environmental Health and the Cape Cod Cranberry Growers Association tested samples of cranberries both before and after the aerial applications of Anvil for the presence of sumithrin, the active ingredient in Anvil. Since no method yet existed for the direct analysis of sumithrin, MDPH worked with a laboratory in California with experience analyzing pesticides in other agricultural products to confirm the absence of detectable limits of sumithrin. This coordinated action by government and industry interests helped avoid an EEE outbreak and saved the state's cranberry crop, which was valued at \$63 million.

- **Community Air Monitoring Uncovers Hazards to Workers in Florida** – Since March 2006, ATSDR, the Florida Department of Health, and the Escambia County Health Department have responded to community concerns and health complaints due to hydrogen sulfide emissions from an adjacent construction and demolition debris landfill. As part of a joint study, ATSDR conducted air monitoring for hydrogen sulfide and found dangerous levels of hydrogen sulfide where landfill employees worked. The Escambia County Health Department immediately requested the Occupational Safety and Health Administration (OSHA) to inspect the site. OSHA declared the site unsafe and ordered the facility to be shut down until the recommendations for proper training and protective gear were implemented. The company implemented the order and subsequently hired remediation specialists trained to work in hazardous environments.
- **Public-Private Cooperation Helps Reduce Cancer Risks** – ATSDR and the Wisconsin Department of Health and Family Services (DHFS) helped protect a community from cancer risk due to trichloroethylene (TCE) exposures when a DHFS health consultation prompted a metal working shop to voluntarily change its manufacturing process. Air modeling revealed that Trent Tube, a large metal working facility in East Troy, Wisconsin, was a significant source of TCE air emissions into the surrounding community. Modeling and supplementary sampling showed that most of the 3,500 residents had increased levels of exposure to TCE. DHFS investigated and prepared a health consultation on the exposure risks predicted by the air modeling. DHFS recommended that the company reduce their emissions of TCE. Despite already being in compliance with their existing emissions permit, the company voluntarily agreed to processing changes to curtail TCE emissions. Trent Tube's voluntary initiative to reduce emissions illustrates how cooperation between a private and public entity can help protect public health. Without this intervention, the community would have continued to experience an increased cancer risk from TCE exposure.
- **Train Derailment Prompts Emergency Response** – ATSDR helped protect residents in a Kentucky community from toxic chemical exposures following a train derailment 25 miles south of Louisville. On January 16, 2007, a CSX Transportation freight train derailed, releasing hazardous substances into the environment. The incident prompted an evacuation of homes, schools, and businesses within a one-mile radius. It also forced authorities to shut down an eight-mile stretch of Interstate 65 for 12 hours. The derailment involved tank cars of 1,3-butadiene, c-hexane, and methyl ethyl ketone (MEK). ATSDR, EPA, and the Coast Guard responded.
- **ATSDR, working with EPA and a CSX contractor, the Center for Toxicology and Environmental Health (CTEH), established air-monitoring action levels for the chemicals and particulate matter (PM).** Two teams conducted air monitoring at the northern and southern edges of plume along Interstate 65. A third conducted air monitoring and reconnaissance in Ruhl Acres neighborhood and areas around Shepardsville, Kentucky. All air data was forwarded to ATSDR for review and comment. ATSDR worked with EPA and CTEH to establish action levels for cleanup and assisted in several media briefings. Working with the county health department, ATSDR provided guidance for returning residents and employees on reoccupation and pet protection. ATSDR also assisted in the inspection and care of residents' pets and several horses left behind during the evacuation.
- **AMACOR Magnesium Fire and Residential Clean-up in Indiana** -- ATSDR worked with EPA to protect the health of some 5,000–8,000 residents evacuated during a fire at the AMACOR magnesium recycling facility in Anderson, Indiana. ATSDR helped determine where air-monitoring equipment needed to be located to be effective. The fire burned for

about 48 hours, and roofing material was blown from the buildings and scattered around the surrounding residential community. The impacted area covered a two-mile radius and affected approximately 1,300 residences. ATSDR and others developed a neighborhood clean-up clearance sampling protocol to help protect against residential exposures to asbestos-containing debris potentially left behind after the clean up.

FUNDING HISTORY TABLE

FISCAL YEAR	AMOUNT
FY 2004	\$73,034,000
FY 2005	\$76,041,000
FY 2006	\$74,905,000
FY 2007	\$75,212,000
FY 2008	\$74,039,000

BUDGET REQUEST

The ATSDR FY 2009 request includes \$72,882,000, a decrease of \$1,157,000 below the FY 2008 Enacted level for an Individual Learning Account (ILA) and administrative reduction.

FY 2009 funds will support public health assessments of waste sites, health consultations concerning specific hazardous substances, health surveillance and registries, response to emergency releases of hazardous substances, applied research in support of public health assessments, information development and dissemination, and education and training concerning hazardous substances, and approximately 31 cooperative agreement programs to states and partners.

Examples of ATSDR current and FY 2009 activities include the following:

- **Brownfield Sites - Redevelopment** is occurring nationwide, with approximately 450,000 sites being reutilized to prevent further urban sprawl. Most of these properties are labeled as Brownfield sites, which are defined as real properties of which the expansion, redevelopment, or reuse may be complicated by the presence of hazardous substances. There are public health concerns regarding redevelopment of these properties. Engagement by local public health in land reuse decisions is limited because of the shortage of environmental public health staff at the municipal level. In order, to optimize the participation of the available environmental health staff in redevelopment issues, ATSDR is developing a number of tools to help health officials prioritize which sites need their immediate attention.
- **Mercury Vapors - Synthetic gymnasium flooring** and out door track surfaces installed in schools in 1960's -1980's were formulated with polyurethane containing mercury. Over the past several years, ATSDR has addressed health concerns that mercury vapors may have been released from the flooring at levels that cause health effects. School age children are the most likely receptor of these exposures. There is a high degree of variability in the mercury vapor concentrations released from the flooring. In order, to be able to make generalized conclusions about why some floors are emitting unacceptable amounts of mercury vapor, while others are not, ATSDR will analyze the conditions of several schools sites to determine what conditions result in exposure risks to students.
- **Minority Health Professions Schools** - ATSDR offers funds through the Association of Minority Health Professions Schools, Inc. for toxicologic research and training at 12 member institutions. The arrangement is mutually beneficial: to date, the institutions have filled 14 specific priority data needs; at the same time, ATSDR supports the

development of environmental health scientists and students at minority institutions. This work has been carried out at schools of medicine, pharmacy, and veterinary science at several historically black colleges and universities, including Charles R. Drew University, Morehouse School of Medicine, Hampton University, Howard University, Texas Southern University, Florida A & M University, Xavier University of Louisiana, Meharry Medical College, and Tuskegee University.

- Digital X-Rays use in Classifying Occupational Dust Diseases - ATSDR is conducting a study to compare digital x-rays with film x-rays to see if they are equivalent with regard to detecting and classifying occupational dust disease such as pleural (outer lining of the lung) abnormalities, which are typically considered a marker of asbestos exposures. If digital x-rays are equivalent with film x-rays in detecting pleural abnormalities, current U.S. and international screening methods can be updated to use the more efficient digital technology. The advantages of digital radiography included decreased processing time, increased efficiency of radiology departments, remote reading capability, and enhanced image quality compared to film.
- Evaluating Environmental Exposures - ATSDR is funding the development of physiologically-based pharmacokinetic models that will evaluate environmental exposures to a class of emerging environmental contaminants called perfluorochemicals (PFCs). These chemicals have documented endpoints for cancer and noncancer effects in rats, mice, rabbits, monkeys, and humans. However, numerous uncertainties and extreme species and gender variability have slowed the understanding of the toxicological and public health issues surrounding PFCs. They are resistant to both physical and biological degradation and very recent investigations have shown that the contaminants are persistent in humans, wildlife, and the environment world-wide. PFCs are widely used as water, stain, and grease repellants for food wrappings, carpet, furniture, and clothing. The completion of the project is expected to produce exposure evaluation tools that will have applications world-wide.
- Environmental Exposure to TDI and Respiratory Effects - ATSDR is supporting the North Carolina Department of Health and Human Services in a study of environmental exposures to toluene diisocyanate (TDI) and respiratory health effects as some workers exposed to this chemical develop asthma. TDI is a chemical used in production of many products, including polyurethane foam (used for bedding, furniture, and automobiles), and floor coatings. The purposes of the study are to determine whether community members living near TDI sources (such as foam factories) have a higher proportion of residents reporting asthma-like symptoms than those living further away; whether community members living near TDI sources have more antibodies to this chemical in their blood than people living further away; and if air samples collected in communities near these facilities detect this chemical in the air more often than in communities further away.
- Asbestos Exposure Review - ATSDR is helping protect Americans from exposures to asbestos fibers and resulting health effects. Over 200 facilities around the country received and processed vermiculite ore from Libby, Montana, which is known to have contained asbestos. ATSDR's national Asbestos Exposure Review continues to investigate these sites and is helping local agencies educate those who may have been exposed to asbestos, particularly plant workers and their families, about preventing and coping with asbestos-related disease. ATSDR is also conducting the National Asbestos Health Project (NAHP) to identify persons with past radiographic or spirometry-related evidence of asbestos associated health conditions. To date, the NAHP has successfully screened former workers of the former Zonolite/W.R. Grace & Company site in Hamilton

Township, NJ and their household members. In 2007, the NAHP will conduct additional screenings at additional facilities in California, Arizona, and Minneapolis. A manuscript will also be developed detailing reported exposure and frequency of radiographic and spirometry-related abnormalities.

- Toxic Chemical Education for Primary Care Providers - ATSDR continues to develop Case Studies in Environmental Medicine (CSEM). These are interactive, self-study educational documents available in electronic or printed form. The series is designed to assist primary care providers to understand the health effects of toxic chemicals on human health and to deliver appropriate care to those impacted by environmental causes. Continuing education credit specific to physicians, nurses, health educators, and other health professionals will be offered.
- Tremolite Asbestos Registry - ATSDR continues to passively enroll registrants to the Tremolite Asbestos Registry (TAR) through the Montana Asbestos Screening and Surveillance Activity (MASSA) program. ATSDR implemented the registry in FY 2003 to include persons eligible for medical testing (e.g., chest x-rays and pulmonary function tests) as well as vermiculite workers and their household contacts. To date, 83 percent of former workers and their household contacts in Libby have been located. Approximately 4,150 persons from the MASSA program and the first new screening site have been added to the TAR.
- World Trade Center Health Registry - Over 71,000 registrants in the World Trade Center Health Registry, launched in September 2003, will be interviewed periodically over the next 20 years to track the long-term health effects of exposures during the event. The first follow-up interviews were conducted in November 2006 and will continue through FY 2007. Data collected from participants on health outcomes will be analyzed and reported in quarterly newsletters and peer reviewed publications.

OUTCOME TABLE

#	Key Outcomes	FY 2004 Actual	FY 2005 Actual	FY 2006		FY 2007		FY 2008 Target	FY 2009 Target	FY 2012 Target
				Target	Actual	Target	Actual			
Efficiency Goal: Reduce cost to deliver health findings and recommendations.										
1	Reduce the average cost per site to deliver public health findings and recommendations to the public.	\$36,174	10%	N/A	17%	21%	6% (Unmet)	24%	27%	30%
Long-Term Objective 1: Assess current and prevention future exposures to toxic substances and related human health effects.										
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.	>83% (Exceeded)	91% (Exceeded)	80%	89% (Exceeded)	82%	12/2008	>83%	>84%	>87%
Long-Term Objective 3: Mitigate the risks of human health effects from toxic exposures.										
1	Protect human health by preventing or mitigating human exposures to toxic substances or related health effects at sites with documented exposures	33% (Met)	54% (Exceeded)	65%	65% (Met)	70%	70% (Met)	72%	74%	75%

OUTPUT TABLE

#	Key Outputs	FY 2004 Actual ¹	FY 2005 Actual	FY 2006		FY 2007		FY 2008 Target	FY 2009 Target	Out-Year Target
				Target	Actual	Target	Actual			
Long-Term Objective 2: Determine human health effects associated with exposures to priority hazardous substances.										
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.	10 (Met)	15 (Met)	18	18 (Met)	18	18	18	18	18
2	Fill data needs for human health effects/risks relating to hazardous exposures.	N/A	N/A	Determine baseline	24 (Met)	30	30 (Met)	32	34	34
Other ATSDR Outputs										
1	Cooperative Agreements	NA	29	29	31	31	31	31	31	31
2	Sites Evaluated/Chemical Release Responses	NA	399	400	742	720	1001	730	730	730
3	Public Health Assessments/Health Consults (includes chemical specific health consults)	NA	388	300	527	526	310	300	300	300
4	Technical Assists	NA	1,842	2,000	10,429	7,062	1996 ²	1900	1900	1900
5	Exposure Investigations	NA	9	10	8	8	10	9	9	9
6	Emergency Responses and Exercises	NA	126	126	58	58	179	58	58	58
7	Health Studies	NA	53	48	45	43	46	45	45	45
8	Surveillance (# of states) and Registries (# of registries by exposure type)	NA	15	12	17	11	14	11	11	11
9	Hazardous Substances Emergency Event Surveillance (states and events)	NA	15 states/ 8,858 events	15 states/ 8,000 events	14 states/ 8,062 events	14 states/ 8,062 events	14 states/ 8,150 events	14 states/ 8,062 events	14 states/ 8,062 events	14 states/ 8,062 events

NARRATIVE BY ACTIVITY

#	Key Outputs	FY 2004 Actual ¹	FY 2005 Actual	FY 2006		FY 2007		FY 2008 Target	FY 2009 Target	Out-Year Target
				Target	Actual	Target	Actual			
10	Great lakes Research Projects (studies)	NA	5	5	5	6	4 ³	4	4	4
11	Minority health Professions Foundation (grants)	NA	7	7	7	5	5	5	5	5
12	Toxicological Profiles	NA	16	13	13	13	14	13	13	13
13	Information Dissemination	NA	2,589,843	2,580,000	6,859,883	7,000,000	8,413,182	8,700,000	9,100,000	9,500,00
14	Pediatric Environmental health Specialty Units	NA	11	11	11	11	11	11	11	11
15	Health Professionals Trained	NA	42,145	40,000	60,970	63,600	68,675	63,600	63,600	NA
16	Community Members Educated	NA	183,649	29,000	142,943	133,000	172,231	133,000	133,000	NA
	Appropriated Amount⁴ (\$ Million)	\$73.0	\$76.0	\$74.9		\$75.2		\$74.0	\$72.9	

¹ In FY 2005, outputs were reorganized into different categories. Information comprising FY 2004 outputs are not consistent with those reported in FY 2005 and beyond.

² FY 2007 actual represents Technical Assists which were ATSDR –specific. For FY 2007 and forward, Technical Assists are now accomplished among other CDC CIOs (CDC Information Center, the Director’s Emergency Operations Center, and the Office of Terrorism Preparedness and Emergency Response) and therefore not tabulated by ATSDR. Future target years have been adjust to reflect this change.

³ In FY 2007, the Great Lakes Human Health Effects Research (GLHHRP) program began its new cycle of competitive funding which resulted in funding 4 projects.

⁴ The outputs/outcomes are not necessarily reflective of all programmatic activities funded by the appropriated amount.

SUPPLEMENTAL MATERIAL

BUDGET AUTHORITY BY OBJECT

FY 2009 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY OBJECT CLASSIFICATION - DIRECT OBLIGATIONS (DOLLARS IN THOUSANDS)			
Object Class	FY 2008 Estimate	FY 2009 Estimate	FY 2009 +/- FY 2008
Personnel Compensation:			
Full-Time Permanent(11.1)	\$18,475	\$18,876	\$401
Other than Full-Time Permanent (11.3)	\$914	\$934	\$20
Other Personnel Comp. (11.5)	\$817	\$834	\$16
Military Personnel (11.7)	\$3,282	\$3,365	\$84
Special Personal Service Comp. (11.8)	\$0	\$0	\$0
Total Personnel Compensation	\$23,489	\$24,010	\$521
Civilian personnel Benefits (12.1)	\$5,315	\$5,430	\$115
Military Personnel Benefits (12.2)	\$1,505	\$1,543	\$38
Benefits to Former Personnel (13.0)	\$0	\$0	\$0
SubTotal Pay Costs	\$30,309	\$30,983	\$674
Travel (21.0)	\$1,126	\$1,109	(\$18)
Transportation of Things (22.0)	\$107	\$105	(\$2)
Rental Payments to GSA (23.1)	\$3,110	\$3,062	(\$49)
Rental Payments to Others (23.2)	\$16	\$16	(\$0)
Communications, Utilities, and Misc. Charges (23.3)	\$7,640	\$7,520	(\$119)
Printing and Reproduction (24.0)	\$154	\$152	(\$2)
Other Contractual Services:	\$0	\$0	\$0
Advisory and Assistance Services (25.1)	\$3,400	\$3,162	(\$238)
Other Services (25.2)	\$8,450	\$7,565	(\$884)
Purchases from Government Accounts (25.3)	\$1,570	\$1,546	(\$25)
Operation and Maintenance of Facilities (25.4)	\$66	\$65	(\$1)
Research and Development Contracts (25.5)	\$1,405	\$1,383	(\$22)
Medical Services (25.6)	\$104	\$102	(\$2)
Operation and Maintenance of Equipment (25.7)	\$520	\$512	(\$8)
Subsistence and Support of Persons (25.8)	\$0	\$0	\$0
Subtotal Other Contractual Services	\$15,514	\$14,334	(\$1,180)
Supplies and Materials (26.0)	\$361	\$356	(\$6)
Equipment (31.0)	\$564	\$555	(\$9)
Land and Structures (32.0)	\$0	\$0	\$0
Investments and Loans (33.0)	\$0	\$0	\$0
Grants, Subsidies, and Contributions (41.0)	\$15,131	\$14,684	(\$447)
Insurance Claims and Indemnities (42.0)	\$6	\$5	(\$0)
Interest and Dividends (43.0)	\$0	\$0	\$0
Refunds (44.0)	\$0	\$0	\$0
Subtotal Non-Pay Costs	\$43,730	\$41,899	(\$1,831)
Total Budget Authority	\$74,039	\$72,882	(\$1,157)

SALARIES AND EXPENSES

FY 2009 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY SALARIES AND EXPENSES (DOLLARS IN THOUSANDS)			
	FY 2008 Estimate	FY 2009 Estimate	FY 2009 +/- FY 2008
Personnel Compensation:			
Full-Time Permanent(11.1)	\$18,475	\$18,876	\$401
Other than Full-Time Permanent (11.3)	\$914	\$934	\$20
Other Personnel Comp. (11.5)	\$817	\$834	\$16
Military Personnel (11.7)	\$3,282	\$3,365	\$84
Special Personal Service Comp. (11.8)	\$0	\$0	\$0
Total Personnel Compensation	\$23,489	\$24,010	\$521
Civilian personnel Benefits (12.1)	\$5,315	\$5,430	\$115
Military Personnel Benefits (12.2)	\$1,505	\$1,543	\$38
Benefits to Former Personnel (13.0)	\$0	\$0	\$0
SubTotal Pay Costs	\$30,309	\$30,983	\$674
Travel (21.0)	\$1,126	\$1,109	(\$18)
Transportation of Things (22.0)	\$107	\$105	(\$2)
Rental Payments to Others (23.2)	\$16	\$16	(\$0)
Communications, Utilities, and Misc. Charges (23.3)	\$7,640	\$7,520	(\$119)
Printing and Reproduction (24.0)	\$154	\$152	(\$2)
Other Contractual Services:			
Advisory and Assistance Services (25.1)	\$3,290	\$3,050	(\$241)
Other Services (25.2)	\$8,450	\$7,565	(\$884)
Purchases from Government Accounts (25.3)	\$260	\$209	(\$51)
Operation and Maintenance of Facilities (25.4)	\$66	\$65	(\$1)
Medical Services (25.6)	\$104	\$102	(\$2)
Operation and Maintenance of Equipment (25.7)	\$520	\$512	(\$8)
Subsistence and Support of Persons (25.8)	\$0	\$0	\$0
Subtotal Other Contractual Services	\$12,689	\$11,502	(\$1,186)
Supplies and Materials (26.0)	\$361	\$356	(\$6)
Subtotal Non-Pay Costs	\$22,094	\$20,760	(\$1,333)
Total Salary and Expense	\$52,402	\$51,743	(\$659)
Direct FTE	295	302	7

DETAIL OF FULL-TIME EQUIVALENT EMPLOYMENT (FTE)

**FY 2009 BUDGET SUBMISSION
AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY
DETAIL OF FULL-TIME EQUIVALENT EMPLOYMENT (FTE)**

	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate
Agency for Toxic Substances and Disease Registry	304	313	320

DETAIL OF POSITIONS

FY 2009 BUDGET SUBMISSION AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY PROGRAM ADMINISTRATION DETAIL OF POSITIONS			
	FY 2007 Actual	FY 2008 Estimate	FY 2009 Estimate
Executive level I	-	-	-
Executive level II	-	-	-
Executive level III	-	-	-
Executive level IV	-	-	-
Executive level V	-	-	-
<i>Subtotal</i>	-	-	-
Total-Executive Level Salary	-	-	-
<i>Total - SES</i>	-	-	-
Total - SES Salary	-	-	-
GS-15	18	18	18
GS-14	86	86	86
GS-13	70	70	70
GS-12	40	40	40
GS-11	10	10	10
GS-10	1	1	1
GS-9	13	13	13
GS-8	2	2	2
GS-7	15	15	15
GS-6	3	3	3
GS-5	0	0	0
GS-4	0	0	0
GS-3	0	0	0
GS-2	0	0	0
GS-1	0	0	0
<i>Subtotal - GS</i>	<i>258</i>	<i>258</i>	<i>258</i>
Total - GS Salary	\$23,632,701	\$24,459,846	\$25,169,181
Average GS Grade	12.6	12.6	12.6
Average GS Salary	91,600	94,806	97,555
Average Special Pay Categories			
Average Comm. Corps Salary ¹	99,139	102,609	106,098
Average Wage Grade Salary	0	0	0

¹ Includes special pay and allowances.

SIGNIFICANT ITEMS

SIGNIFICANT ITEM IN APPROPRIATIONS REPORT - HOUSE

**SIGNIFICANT ITEM FOR INCLUSION IN
THE FY 2009 CONGRESSIONAL JUSTIFICATION
AND OPENING STATEMENTS
HOUSE REPORT NO. 110-187**

AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY

Item

ATSDR -- The Committee directs the Agency to prepare future Budget Justifications using the following four functional areas, which the Committee believes captures the work of the Agency very well: protecting the public from hazardous exposure; increasing knowledge about toxic substances; educating health care providers and the public about toxic chemicals; and maintaining registries to track the effects of exposures to hazardous substances. To the extent possible, the Agency should display prior year budgets by these four functional areas, to facilitate comparisons. (Page 148)

Action taken or to be taken

ATSDR's budget submission is described using the following four functional areas: protecting the public from hazardous exposure; increasing knowledge about toxic substances; educating health care providers and the public about toxic chemicals; and maintaining registries to track diseases and the effects of exposures to hazardous substances.