
January 1996

**Health
Education
Employment
Social Security
Welfare
Veterans**

Preface

The General Accounting Office (GAO), an arm of the Congress, was established to independently audit government agencies. GAO's Health, Education, and Human Services (HEHS) Division reviews the government's health, education, employment, social security, disability, welfare, and veterans programs administered in the Departments of Health and Human Services, Labor, Education, Veterans Affairs, and some other agencies.

This booklet lists the GAO products issued on these programs. It is divided into two major sections:

- **Most Recent GAO Products:** This section identifies reports and testimonies issued during the past month and provides summaries for selected key products.
- **Comprehensive 1-Year Listings:** This section lists all products published in the last year, organized chronologically by subject as shown in the table of contents. When appropriate, products may be included in more than one subject area.

You may obtain single copies of the products free of charge, by telephoning your request to (202) 512-6000 or faxing it to (301) 258-4066. Additional ordering details appear at the end of this booklet. Instructions for getting on GAO's mailing list appear on page 41 of this booklet.

You may access the Most Recent GAO Products section of this booklet on Internet. Instructions appear on the last two pages of this booklet.

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Abbreviations

AFDC	Aid to Families With Dependent Children
AFIP	Armed Forces Institute of Pathology
COLA	Cost of living allowance
CSRS	Civil Service Retirement System
DC	District of Columbia
DOD	Department of Defense
DODDS	Department of Defense Dependents Schools
DOE	Department of Energy
DOL	Department of Labor
EEO	Equal Employment Opportunity
EEOC	Equal Employment Opportunity Commission
ERISA	Employee Retirement Income Security Act of 1974
FDA	Food and Drug Administration, Department of Health and Human Services
GAO	General Accounting Office
GSA	General Services Administration
HBCU	Historically Black Colleges and Universities
HEHS	Health, Education, and Human Services Division, GAO
HHS	Department of Health and Human Services
HMO	health maintenance organization
HRD	Human Resources Division, GAO
JOBS	Job Opportunities and Basic Skills program
MSHA	Mine Safety and Health Administration, DOL
NASA	National Aeronautics and Space Administration
NIH	National Institutes of Health
NPR	National Performance Review
NRC	Nuclear Regulatory Commission
OCR	Office for Civil Rights, Department of Education
OHA	Office of Hearings and Appeals, Social Security Administration
OSHA	Occupational Safety and Health Administration, DOL
PBGC	Pension Benefit Guarantee Corporation
SSA	Social Security Administration
SSI	Supplemental Security Income
T&A	time and attendance
TRICARE	DOD nationwide managed health care program
VA	Department of Veterans Affairs

Most Recent GAO Products (December 1995)

Health

Health Products

FDA Export Reform (Letter, 12/21/95, GAO/HEHS-96-60R).

Medigrant: Hawaii's Base Year Funding (Letter, 12/15/95, GAO/HEHS-96-74R).

Changes in FDA Structure (Letter, 12/8/95, GAO/HEHS-96-53R).

Small Employer Association Health Plans (Letter, 12/6/95, GAO/HEHS-96-59R).

Education

Selected Summaries

Head Start: Information on Federal Funds Unspent by Program Grantees (Report, 12/29/95, GAO/HEHS-96-64).

The Department of Health and Human Services (HHS) permits Head Start grantees to carry over unspent funds into a subsequent grantee budget year or years to complete any program objectives that remain unmet from the previous year. HHS generally handles carryover funds in two ways: (1) carryover balances from a previous year or years are added to an award that a grantee receives in a subsequent year, and (2) carryover balances from a previous year or years offset or reduce the award that a grantee receives in a subsequent year. GAO found that about two-thirds of the 1,197 Head Start grantees included in GAO's study had unspent balances at the end of each grantee budget year from 1992 through 1994. GAO's analysis of data for grantee budget years 1993 and 1994 showed that Head Start regional offices either added to or offset from about 70 to 90 percent of grantee awards with carryover funds within 2 grantee budget years after an unspent balance occurred. According to grantee files, carryover funds were added to grantee awards in grantee budget years 1993 and 1994 combined to expand Head Start enrollments (40 percent) and build or renovate facilities (37 percent)—activities that are often not completed by grantees in a single year. Information in the grantee files also indicated that an additional 23 percent of funds carried over were to be used for capital equipment; supplies; and other purposes, such as staff training.

For more information, contact Fred E. Yohey at (202) 512-7218.

School Finance: Three States' Experiences With Equity in School Funding
(Report, 12/19/95, GAO/HEHS-96-39).

GAO reviewed the experiences of Tennessee, Texas, and Minnesota to explore state school finance issues. Lawsuits led these three states to reform their school finance systems to address disparities in education funding among districts. All three states have crafted solutions, which may be subject to change. These solutions lessened disparities; they also helped poor districts without harming the education programs in wealthy districts. Officials' advice to other states undertaking similar reforms centered on (1) clearly defining whether the school finance system aims to either provide adequate educational resources for all students or to achieve a certain level of student performance, (2) linking funding reform with greater accountability for student performance, and (3) encouraging all groups affected by education finance reform to participate in making the decisions.

**For more information, contact Eleanor L. Johnson at
(202) 512-7209.**

Department of Education: Efforts by the Office for Civil Rights to Resolve Asian-American Complaints (Report, 12/11/95, GAO/HEHS-96-23).

As with many other federal agencies responsible for enforcing civil rights and equal employment opportunity laws, over the last several years the discrimination complaint workload of the U.S. Department of Education's Office for Civil Rights (OCR) has increased, but its staffing has remained level. GAO examined OCR's complaint investigations and compliance reviews of discrimination cases involving Asian-Americans who applied for or were enrolled colleges and universities. Eleven of the 13 cases GAO was asked to review have been resolved, and 2 remain open. On average, OCR has resolved complaints and completed compliance reviews in less than 180 days, which is its benchmark for assessing timeliness. Moreover, OCR has initiated administrative changes to improve the timeliness, documentation, and quality of all investigations and reviews.

**For more information, contact Lawrence J. Horinko at
(202) 512-7001.**

Financing College Facilities: Factors Limit Connie Lee's Ability to Help More Schools (Report, 12/8/95, GAO/HEHS-96-6).

From October 1991—when the College Construction Loan Insurance Association (Connie Lee) insured its first bond—through September 1995, Connie Lee insured 95 bonds worth a total of about \$2.6 billion. Ninety of these were rated BBB, and 5 were rated A or above. Connie Lee declined to insure 406 other bonds because it considered them to be too great a credit risk. During this same period, at least 23 Historically Black Colleges and Universities (HBCU) approached Connie Lee about obtaining insurance for 25 bonds. As of September 30, 1995, Connie Lee offered to insure 8 bonds; declined to insure 3 bonds it considered a credit risk; determined that 13 were rated above the category of risk that, at the time the schools applied, Connie Lee was authorized to insure; and had not decided whether to offer insurance for 1 bond. Connie Lee is limited in its ability to insure municipal bonds for a broader range of schools by federal law, which requires Connie Lee to insure bonds generally rated BBB or below (“noninvestment grade”); state laws that require Connie Lee to have 95 percent of its business in bonds rated BBB and above; and industry practice, which discourages bond insurers from insuring bonds rated below BBB—“noninvestment grade.” Connie Lee officials suggested federal legislative actions that would enable Connie Lee to insure bonds for more schools, including HBCUs, than it is now serving.

For more information, contact Joseph J. Eglin, Jr., at (202) 512-7014.

Employment

Employment Products

Postal Employment and Barcoding (Letter, 12/15/95, GAO/GGD-96-54R).

Legislative Branch Reductions (Letter, 12/15/95, GAO/GGD-96-57R).

Retention Allowances: Usage and Compliance Vary Among Federal Agencies (Report, 12/11/95, GAO/GGD-96-32).

Government Shutdown: Funding Lapse Furlough Information (Letter, 12/1/95, GAO/GGD-96-52R).

Veterans Affairs and Military Health

Selected Summaries

VA Health Care: Trends in Malpractice Claims Can Aid in Addressing Quality of Care Problems (Report, 12/21/95, GAO/HEHS-96-24).

From fiscal year 1990 to fiscal year 1994, malpractice claims against VA medical centers have steadily increased from 678 to 978, with payments made to claimants totaling over \$200 million. In 1992, VA entered into an agreement with the Armed Forces Institute of Pathology (AFIP) to analyze and identify trends and risk management issues in VA malpractice claims on a systemwide basis. However VA's Office of Quality Assurance and risk management and quality assurance personnel in individual VA medical centers are making only limited use of the information VA asked AFIP to develop. DOD information may be useful to VA to draw comparisons in areas in which malpractice claims are being generated, such as surgery-, diagnosis-, and medication-related incidents.

For more information, contact Patricia A. Jones at (202) 512-7175.

VA Health Care: How Distance From VA Facilities Affects Veterans' Use of VA Services (Report, 12/20/95, GAO/HEHS-96-31).

Living within 5 miles of a VA hospital or outpatient clinic significantly increases the likelihood that a veteran will use VA health care services. Use of VA health care services does not decline with distance as rapidly among veterans receiving VA compensation or pension payments as it does among other veterans. Even those veterans with service-connected disabilities who live more than 100 miles from a VA outpatient clinic are more likely to use VA outpatient services than are higher-income veterans without service-connected disabilities who live within 5 miles of a VA outpatient clinic. A number of factors, including broader eligibility and entitlement to outpatient care for veterans with service-connected disabilities and low-income veterans, veterans' ages, and differences in available resources, could also contribute to the differences in use of VA services.

For more information, contact James R. Linz at (202) 512-7116.

**Other Veterans Affairs and
Military Health Products**

Veterans' Preference: Data on Employment of Veterans (Report, 12/29/95,
GAO/GGD-96-13).

Health (Comprehensive 1-Year Listing)

Access and Infrastructure

For more information, contact Sarah F. Jaggat at (202) 512-7119.

Mammography Services: Initial Impact of New Federal Law Has Been Positive (Report, 10/27/95, GAO/HEHS-96-17).

Ryan White Care Act: Access to Services by Minorities, Women, and Substance Abusers (Testimony, 7/17/95, GAO/T-HEHS-95-212). Report on same topic (1/13/95, GAO/HEHS-95-49).

Employee and Retiree Health Benefits

For more information, contact Michael F. Gutowski at (202) 512-7119.

Small Employer Association Health Plans (Letter, 12/6/95, GAO/HEHS-96-59R).

Employer-Based Health Plans: Issues, Trends, and Challenges Posed by ERISA (Report, 7/25/95, GAO/HEHS-95-167). Testimony on same topic (7/25/95, GAO/T-HEHS-95-223).

Financing

For more information, contact Jonathan Ratner or William J. Scanlon at (202) 512-7119.

Ryan White Care Act of 1990: Opportunities to Enhance Funding Equity (Report, 11/13/95, GAO/HEHS-96-26). Testimony on same topic (4/5/95, GAO/T-HEHS-95-126, and 2/22/95, GAO/T-HEHS-95-91). Correspondence on same topic (2/14/95, GAO/HEHS-95-79R, and 3/31/95, GAO/HEHS-95-119R).

Community Health Center Grants (Letter, 10/11/95, GAO/HEHS-96-13R).

Medical Liability: Impact on Hospital and Physician Costs Extends Beyond Insurance (Report, 9/29/95, GAO/AIMD-95-169).

Health Insurance Portability: Reform Could Ensure Continued Coverage for up to 25 Million Americans (Report, 9/19/95, GAO/HEHS-95-257).

Cost Factors in CARE Act Formula (Letter, 9/15/95, GAO/HEHS-95-256R).

Medigap Insurance: Insurers' Compliance With Federal Minimum Loss Ratio Standards, 1988-93 (Report, 8/23/95, GAO/HEHS-95-151).

Health Insurance For Children: Many Remain Uninsured Despite Medicaid Expansion (Report, 7/19/95, GAO/HEHS-95-175).

Health Insurance Regulation: National Portability Standards Would Facilitate Changing Health Plans (Testimony, 7/18/95, GAO/T-HEHS-95-205).

Health Insurance Regulation: Variation in Recent State Small Employer Health Insurance Reforms (Report, 6/12/95, GAO/HEHS-95-161FS).

Health Care Reform Related Issues

For more information, contact Michael F. Gutowski, Rosamond Katz, or Scott L. Smith at (202) 512-7119.

Health Care Task Force (Letter, 11/9/95, GAO/GGD-96-45R).

Cost of Health Care Task Force Related Activities (Testimony, 3/14/95, GAO/T-GGD-95-114).

HHS Public Health Service Agencies

For more information, contact Bruce D. Layton, James O. McClyde, or Sarah F. Jaggar at (202) 512-7119.

FDA Export Reform (Letter, 12/21/95, GAO/HEHS-96-60R).

Changes in FDA Structure (Letter, 12/8/95, GAO/HEHS-96-53R).

Medical Devices: FDA Review Time (Letter Report, 10/30/95, GAO/PEMD-96-2).

FDA Drug Approval: Review Time Has Decreased in Recent Years (Report, 10/20/95, GAO/PEMD-96-1).

FDA Import Automation: Serious Management and Systems Development Problems Persist (Report, 9/28/95, GAO/AIMD-95-188).

Cancer Drug Research: Contrary to Allegation, NIH Hydrazine Sulfate Studies Were Not Flawed (Report, 9/13/95, GAO/HEHS-95-141).

Health Care Shortage Areas: Designations Not a Useful Tool for Directing Resources to the Underserved (Report, 9/8/95, GAO/HEHS-95-200).

Health Research Misconduct: HHS' Handling of Cases is Appropriate, but Timeliness Remains a Concern (Report, 8/3/95, GAO/HEHS-95-134).

Practice Guidelines: Overview of Agency for Health Care Policy and Research Efforts (Testimony, 7/25/95, GAO/T-HEHS-95-221).

Reassignment of Two NIH Employees (Letter, 7/5/95, GAO/OSI-95-14R).

Immunization: HHS Could Do More to Increase Vaccination Among Older Adults (Report, 6/8/95, GAO/PEMD-95-14).

Health and Human Services: Opportunities to Realize Savings (Testimony, 1/12/95, GAO/T-HEHS-95-57).

Long-Term Care and Aging

For more information, contact James C. Musselwhite or William J. Scanlon at (202) 512-7119.

Immunization: HHS Could Do More to Increase Vaccination Among Older Adults (Report, 6/8/95, GAO/PEMD-95-14).

Long-Term Care: Current Issues and Future Directions (Report, 4/13/95, GAO/HEHS-95-109).

Managed Care

For more information, contact Sarah F. Jaggar, Jonathan Ratner, or William J. Scanlon at (202) 512-7119.

Medicare Managed Care Growth (Letter, 10/18/95, GAO/HEHS-96-47R).

Medicare Managed Care: Enrollment Growth Underscores Need to Revamp HMO Payment Methods (Testimony, 7/12/95, GAO/T-HEHS-95-207).

Medicare Managed Care: Program Growth Highlights Need to Fix HMO Payment Problems (Testimony, 5/24/95, GAO/T-HEHS-95-174).

Community Health Centers: Challenges in Transitioning to Prepaid Managed Care (Report, 5/4/95, GAO/HEHS-95-138). Testimony on same topic (5/4/95, GAO/T-HEHS-95-143).

Defense Health Care: DOD's Managed Care Program Continues to Face Challenges (Testimony, 3/28/95, GAO/T-HEHS-95-117).

Medicare and Medicaid

For more information, contact Kathryn G. Allen, Thomas G. Dowdal, or Barry D. Tice at (202) 512-7119.

Medigrant: Hawaii's Base Year Funding (Letter, 12/15/95, GAO/HEHS-96-74R).

Medicare: Enrollment Growth and Payment Practices for Kidney Dialysis Services (Report, 11/22/95, GAO/HEHS-96-33).

Medicare Transaction System: Strengthened Management and Sound Development Approach Critical to Success (Testimony, 11/16/95, GAO/T-AIMD-96-12).

Medicaid Section 1115 Waivers: Flexible Approach to Approving Demonstrations Could Increase Federal Costs (Report, 11/8/95, GAO/HEHS-96-44).

Medicare Managed Care: Growing Enrollment Adds Urgency to Fixing HMO Payment Problem (Report, 11/8/95, GAO/HEHS-96-21).

Fraud and Abuse: Medicare Continues to Be Vulnerable to Exploitation by Unscrupulous Providers (Testimony, 11/2/95, GAO/T-HEHS-96-7).

Medicaid and Children's Insurance (Letter, 10/20/95, GAO/HEHS-96-50R).

Medicare Managed Care Growth (Letter, 10/18/95, GAO/HEHS-96-47R).

Fraud and Abuse Provisions in H.R. 2425 (Letter, 10/7/95, GAO/HEHS-96-37R).

Arizona Medicaid: Competition Among Managed Care Plans Lowers Program Costs (Report, 10/4/95, GAO/HEHS-96-2).

Medigrant: Florida (Letter, 10/2/95, GAO/HEHS-96-11R).

Medicare Spending: Modern Management Strategies Needed to Curb Billions in Unnecessary Payments (Report, 9/19/95, GAO/HEHS-95-210).

Durable Medical Equipment: Regional Carriers' Coverage Criteria Are Consistent With Medicare Law (Report, 9/19/95, GAO/HEHS-95-185).

Preventing Abusive Medicare Billing (Letter, 9/5/95, GAO/HEHS-95-260R).

Medicaid: Tennessee's Program Broadens Coverage but Faces Uncertain Future (Report, 9/1/95, GAO/HEHS-95-186).

Medicare: Antifraud Technology Offers Significant Opportunity to Reduce Health Care Fraud (Report, 8/11/95, GAO/AIMD-95-77).

Medicare Competitive Bidding (Letter, 8/11/95, GAO/HEHS-95-238R).

Medicare: Excessive Payments for Medical Supplies Continue Despite Improvements (Report, 8/8/95, GAO/HEHS-95-171).

Medicare: Increased HMO Oversight Could Improve Quality and Access to Care (Report, 8/3/95, GAO/HEHS-95-155). Testimony on same topic (8/3/95, GAO/T-HEHS-95-229).

Medicare: Modern Management Strategies Could Curb Fraud, Waste, and Abuse (Testimony, 7/31/95, GAO/T-HEHS-95-227).

Medicaid: Local Contributions (Letter, 7/28/95, GAO/HEHS-95-215R).

Medicare: Enhancing Health Care Quality Assurance (Testimony, 7/27/95, GAO/T-HEHS-95-224).

Medicaid: Matching Formula's Performance and Potential Modifications (Testimony, 7/27/95, GAO/T-HEHS-95-226).

Medicare: Adapting Private Sector Techniques Could Curb Losses to Fraud and Abuse (Testimony, 7/19/95, GAO/T-HEHS-95-211).

Health Insurance For Children: Many Remain Uninsured Despite Medicaid Expansion (Report, 7/19/95, GAO/HEHS-95-175).

Medicare: Allegations Against ABC Home Health Care (Testimony, 7/19/95, GAO/T-OSI-95-18). Report on same topic (7/19/95, GAO/OSI-95-17).

Medicare Providers' Legal Expenses (Letter, 7/18/95, GAO/HEHS-95-214R).

Medicare Managed Care: Enrollment Growth Underscores Need to Revamp HMO Payment Methods (Testimony, 7/12/95, GAO/T-HEHS-95-207).

Medicaid: State Flexibility in Implementing Managed Care Programs Requires Appropriate Oversight (Testimony, 7/12/95, GAO/T-HEHS-95-206).

Medicare: Rapid Spending Growth Calls for More Prudent Purchasing
(Testimony, 6/28/95, GAO/T-HEHS-95-193).

Medicaid: Statewide Section 1115 Demonstrations' Impact on Eligibility,
Service Delivery, and Program Cost (Testimony, 6/21/95, GAO/T-HEHS-95-182).

Medicare: Modern Management Strategies Needed to Curb Program
Exploitation (Testimony, 6/15/95, GAO/T-HEHS-95-183).

Medicare Managed Care: Program Growth Highlights Need to Fix HMO
Payment Problems (Testimony, 5/24/95, GAO/T-HEHS-95-174).

Medicare: Reducing Fraud and Abuse Can Save Billions (Testimony,
5/16/95, GAO/T-HEHS-95-157).

Medicare Claims: Commercial Technology Could Save Billions Lost to
Billing Abuse (Report, 5/5/95, GAO/AIMD-95-135).

Medicaid Managed Care: More Competition and Oversight Would Improve
California's Expansion Plan (Report, 4/28/95, GAO/HEHS-95-87).

Medicaid: Spending Pressures Drive States Toward Program Reinvention
(Report, 4/4/95, GAO/HEHS-95-122). Testimony on same topic
(GAO/T-HEHS-95-129).

Medicaid: Restructuring Approaches Leave Many Questions (Report,
4/4/95, GAO/HEHS-95-103).

Medicare: Tighter Rules Needed to Curtail Overcharges for Therapy in
Nursing Homes (Report, 3/30/95, GAO/HEHS-95-23).

Medicaid: Experience With State Waivers to Promote Cost Control and
Access to Care (Testimony, 3/23/95, GAO/T-HEHS-95-115).

Medicare and Medicaid: Opportunities to Save Program Dollars by
Reducing Fraud and Abuse (Testimony, 3/22/95, GAO/T-HEHS-95-110).

Medicare Secondary Payer Program (Letter, 3/6/95, GAO/HEHS-95-101R).

GAO's 1995 High Risk Reports: Medicare Claims (Report, 2/95, GAO/HR-95-8).

Medicare Secondary Payer Program: Actions Needed to Realize Savings
(Testimony, 2/23/95, GAO/T-HEHS-95-92).

Uninsured and Children on Medicaid (Letter, 2/14/95, GAO/HEHS-95-83R).

Medicare: Opportunities Are Available to Apply Managed Care Strategies
(Testimony, 2/10/95, GAO/T-HEHS-95-81).

Medicare: High Spending Growth Calls for Aggressive Action (Testimony,
2/6/95, GAO/T-HEHS-95-75).

Prescription Drugs

For more information, contact John C. Hansen at (202) 512-7119.

Pharmacy Benefit Managers: Early Results on Ventures With Drug
Manufacturers (Report, 11/9/95, GAO/HEHS-96-45).

Nonprescription Drugs: Value of a Pharmacist-Controlled Class Has Yet to
Be Demonstrated (Report, 8/24/95, GAO/PEMD-95-12).

Prescription Drugs and the Elderly: Many Still Receive Potentially Harmful
Drugs Despite Recent Improvements (Report, 7/24/95, GAO/HEHS-95-152).

Prescription Drug Prices: Official Index Overstates Producer Price
Inflation (Report, 4/28/95, GAO/HEHS-95-90).

Provider Issues

For more information, contact Sarah F. Jaggat at (202) 512-7119.

National Health Service Corps: Opportunities to Stretch Scarce Dollars
and Improve Provider Placement (Report, 11/24/95, GAO/HEHS-96-28).

Indian Health Service: Improvements Needed in Credentialing Temporary
Physicians (Report, 4/21/95, GAO/HEHS-95-46).

Public Health and Education

For more information, contact Sarah F. Jaggat at (202) 512-7119.

Community Health Center Grants (Letter, 10/11/95, GAO/HEHS-96-13R).

Montana's Medical Assistance Facilities (Letter, 10/2/95, GAO/HEHS-96-12R).

**Health
(Comprehensive
1-Year Listing)**

Planned Parenthood (Letter, 8/9/95, GAO/HEHS-95-216R).

Hospital-Based Home Health Agencies (Letter, 7/19/95, GAO/HEHS-95-209R).

Vaccines for Children: Reexamination of Program Goals and Implementation Needed to Ensure Vaccination (Report, 6/22/95, GAO/PEMD-95-22).

Immunization: HHS Could Do More to Increase Vaccination Among Older Adults (Report, 6/8/95, GAO/PEMD-95-14).

Vaccines for Children: Barriers to Immunization (Testimony, 5/4/95, GAO/T-PEMD-95-21).

Community Health Centers: Challenges in Transitioning to Prepaid Managed Care (Report, 5/4/95, GAO/HEHS-95-138). Testimony on same topic (5/4/95, GAO/T-HEHS-95-143).

Tuberculosis: Costly and Preventable Cases Continue in Five Cities (Report, 3/16/95, GAO/HEHS-95-11).

**Quality and Practice
Standards**

For more information, contact Sandra K. Isaacson at (202) 512-7174 or George F. Poindexter at (202) 512-7213.

Mammography Services: Initial Impact of New Federal Law Has Been Positive (Report, 10/27/95, GAO/HEHS-96-17).

Health Care: Employers and Individual Consumers Want Additional Information on Quality (Report, 9/29/95, GAO/HEHS-95-201).

Patient Self-Determination Act: Providers Offer Information on Advance Directives but Effectiveness Uncertain (Report, 8/28/95, GAO/HEHS-95-135).

Impact of Organ Allocation Variances (Letter, 7/31/95, GAO/HEHS-95-203R).

Medicare: Enhancing Health Care Quality Assurance (Testimony, 7/27/95, GAO/T-HEHS-95-224).

Maine Practice Guidelines (Letter, 4/4/95, GAO/HEHS-95-118R).

**Health
(Comprehensive
1-Year Listing)**

Electromagnetic Interference with Medical Devices (Letter, 3/17/95, GAO/RCED-95-96R).

**Substance Abuse and
Drug Treatment**

For more information, contact Sarah F. Jaggat at (202) 512-7119.

Treatment of Hardcore Cocaine Users (Letter, 7/31/95, GAO/HEHS-95-179R).

Other Health Issues

For more information, contact Sarah F. Jaggat at (202) 512-7119.

**Environmental Impact on
Health**

Superfund: Information on Current Health Risks (Report, 7/19/95, GAO/RCED-95-205).

Health and Safety: DOE's Epidemiological Data Base Has Limited Value for Research (Report, 6/6/95, GAO/RCED-95-126).

Miscellaneous

Financial Audit: U.S. Senate Health Promotion Revolving Fund for the Periods Ended 9/30/93 and 12/31/92 (Report, 5/3/95, GAO/AIMD-95-105).

Education (Comprehensive 1-Year Listing)

Department of Education

For more information, contact Joseph J. Eglin, Jr., at (202) 512-7009, Wayne B. Upshaw at (202) 512-7006, Beatrice F. Birman at (202) 512-7008, or Eleanor L. Johnson at (202) 512-7209.

Department of Education: Efforts by the Office for Civil Rights to Resolve Asian-American Complaints (Report, 12/11/95, GAO/HEHS-96-23).

Adult Education: Measuring Program Results Has Been Challenging (Report, 9/6/95, GAO/HEHS-95-153).

Student Financial Aid: Data Not Fully Utilized to Identify Inappropriately Awarded Loans and Grants (Report, 7/11/95, GAO/HEHS-95-89).

Federal Family Education Loan Information System: Weak Computer Controls Increase Risk of Unauthorized Access to Sensitive Data (Report, 6/12/95, GAO/AIMD-95-117).

Department of Education: Information on Consolidation Opportunities and Student Aid (Testimony, 4/6/95, GAO/T-HEHS-95-130).

Adult Education Act (Letter, 2/16/95, GAO/HEHS-95-65R).

Department of Education: Opportunities to Realize Savings (Testimony, 1/18/95, GAO/T-HEHS-95-56).

Early Childhood Development

For more information, contact Beatrice F. Birman at (202) 512-7008 or Eleanor L. Johnson at (202) 512-7209.

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For more information, contact Beatrice F. Birman at (202) 512-7008, Eleanor L. Johnson at (202) 512-7209, or Fred E. Yohey, Jr., at (202) 512-7218.

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For more information, contact Joseph J. Eglin, Jr., at (202) 512-7009 or Wayne B. Upshaw at (202) 512-7006.

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**Education
(Comprehensive
1-Year Listing)**

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Employment (Comprehensive 1-Year Listing)

Equal Employment Opportunities

For more information, contact Lawrence J. Horinko at (202) 512-7001.

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Labor and Management Relations

For more information, contact Charles A. Jeszeck at (202) 512-7036 or Sigurd R. Nilsen at (202) 512-7003.

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Training and Employment Assistance

For more information, contact Charles A. Jeszeck at (202) 512-7036, Sigurd R. Nilsen at (202) 512-7003, or Wayne B. Upshaw at (202) 512-7006, .

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For more information, contact Lawrence J. Horinko at (202) 512-7001, Charles A. Jeszeck at (202) 512-7036, or Sigurd R. Nilsen at (202) 512-7003.

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Other Employment Issues

For more information, contact Lawrence J. Horinko at (202) 512-7001, Charles A. Jeszeck at (202) 512-7036, or Sigurd R. Nilsen at (202) 512-7003.

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**Employment
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Social Security, Disability, and Welfare (Comprehensive 1-Year Listing)

Children's Issues

For more information, contact David P. Bixler at (202) 512-7201, Diana S. Eisenstat at (202) 512-5562, or Robert L. MacLafferty at (415) 904-2123.

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For more information, contact Michael D. Packard at (202) 512-7250 or Donald C. Snyder at (202) 512-7204.

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Social Security and
Disability

For more information, contact Cynthia A. Bascetta at (202) 512-7207, Michael T. Blair at (404) 679-1944, Christopher C. Crissman at (202) 512-7051, Cynthia M. Fagnoni at (202) 512-7202, or Rolland H. Miller at (202) 512-7246.

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**Social Security, Disability, and Welfare
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For more information, contact David P. Bixler at (202) 512-7201.

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Other Products Related to Social Security, Disability, and Welfare

For more information, contact Diana S. Eisenstat at (202) 512-5562.

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**Social Security, Disability, and Welfare
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Veterans Affairs and Military Health (Comprehensive 1-Year Listing)

Military Health Care

For more information, contact Daniel M. Brier at (202) 512-6803 or George F. Poindexter at (202) 512-7213.

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Veterans' Benefits

For more information, contact Irene P. Chu at (202) 512-7102.

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Veterans' Health Care

For more information, contact James R. Linz at (202) 512-7110 or Paul R. Reynolds at (202) 512-7109.

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**Veterans Affairs and Military Health
(Comprehensive
1-Year Listing)**

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