

January 1995

**Health
Education
Employment
Social Security
Welfare
Veterans**

**Five-Year Report
1990-94**

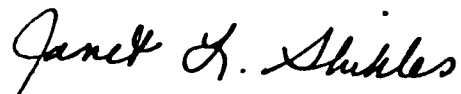
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Preface

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 during the five years from January 1990 through December 1994. It is 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, as well as instructions for getting on our mailing list, appear at the end of this booklet.



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Assistant Comptroller General

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Abbreviations

AFDC	Aid to Families with Dependent Children
AIDS	acquired immunodeficiency syndrome
CDC	Centers for Disease Control and Prevention
CDR	continuing disability review
CHAMPUS	Civilian Health and Medical Program of the Uniformed Services
CRS	Congressional Research Service, Library of Congress
DEA	Drug Enforcement Agency
DC	District of Columbia
DOD	Department of Defense
DODDS	DOD Dependents Schools
DOE	Department of Energy
EEO	Equal Employment Opportunity
EEOC	Equal Employment Opportunity Commission
ERISA	Employee Retirement Income Security Act of 1974
ESEA	Elementary and Secondary Education Act
FDA	Food and Drug Administration
GAO	General Accounting Office
HEAF	Higher Education Assistance Foundation, Department of Education
HEHS	Health, Education, and Human Services Division, GAO
HCFA	Health Care Financing Administration
HealthPASS	Philadelphia Accessible Services System
HHS	Department of Health and Human Services
HMO	health maintenance organization
HRD	Human Resources Division, GAO

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INS	Immigration and Naturalization Service
IRS	Internal Revenue Service
JOBS	Job Opportunities and Basic Skills program
JTPA	Job Training Partnership Act
NAFTA	North American Free Trade Agreement
NAFTA/TAA	NAFTA/Trade Adjustment Assistance
NAGB	National Assessment Governing Board, Department of Education
OBRA	Omnibus Budget Reconciliation Act of 1990
PBGC	Pension Benefit Guarantee Corporation
PFIA	Pension Funding Improvement Act of 1993
PPA	Pension Protection Act
PATH	Projects for Assistance in Transition from Homelessness
SBA	Small Business Administration
SBHC	school-based health center
SEA	state education agency
SSA	Social Security Administration
SSI	Supplemental Security Income
UMWA	United Mine Workers of America Combined Benefit Fund
VA	Department of Veterans Affairs
VHA	Veterans Affairs Veterans Health Administration
VAMC	Veterans Affairs Medical Center
WARN	Worker Adjustment and Retraining Notification Act
WHD	Department of Labor, Wage and Hour Division
WIC	Special Supplemental Food Program for Women, Infants, and Children

Health (Comprehensive 5-Year Listing)

Access and Infrastructure

Health Care: Federal and State Antitrust Actions Concerning the Health Care Industry (Report, 8/5/94, GAO/HEHS-94-220).

Health Professions Education: Role of Title VII/VIII Programs in Improving Access to Care Is Unclear (Report, 7/8/94, GAO/HEHS-94-164).

Health Reform: Purchasing Cooperatives Have an Increasing Role in Providing Access to Insurance (Testimony, 6/30/94, GAO/T-HEHS-94-196).
Report on same topic (5/31/94, GAO/HEHS-94-142).

Primary Care Physicians: Managing Supply in Canada, Germany, Sweden, and the United Kingdom (Report, 5/18/94, GAO/HEHS-94-111).

Health Care Access: Innovative Programs Using Nonphysicians (Report, 8/27/93, GAO/HRD-93-128).

Nonprofit Hospitals: For-Profit Ventures Pose Access and Capacity Problems (Report, 7/22/93, GAO/HRD-93-124).

Organ Transplants: Increased Effort Needed to Boost Supply and Ensure Equitable Distribution of Organs (Report, 4/22/93, GAO/HRD-93-56). Testimony on same topic (4/22/93, GAO/T-HRD-93-17).

Indian Health Service: Basic Services Mostly Available; Substance Abuse Problems Need Attention (Report, 4/9/93, GAO/HRD-93-48).

Health Care: Rochester's Community Approach Yields Better Access, Lower Costs (Report, 1/29/93, GAO/HRD-93-44).

Emergency Departments: Unevenly Affected by Growth and Change in Patient Use (Report, 1/4/93, GAO/HRD-93-4).

District of Columbia: Barriers to Medicaid Enrollment Contribute to Hospital Uncompensated Care (Report, 12/29/92, GAO/HRD-93-28).

Bone Marrow Transplants: National Program Has Greatly Increased Pool of Potential Donors (Report, 11/4/92, GAO/HRD-93-11).

Access to Health Care: States Respond to Growing Crisis (Report, 6/16/92, GAO/HRD-92-70). Testimony on same topic (6/9/92, GAO/T-HRD-92-40).

Federally Funded Health Services: Information on Seven Programs Serving Low-Income Women and Children (Report, 5/28/92, GAO/HRD-92-73FS).

Access to Health Insurance: States Attempt to Correct Problems in Small Business Health Insurance Market (Report, 5/14/92, GAO/HRD-92-90).
Testimony on same topic (5/14/92, GAO/T-HRD-92-30).

Small Group Market Reforms: Assessment of Proposals to Make Health Insurance More Readily Available to Small Businesses (Letter, 3/12/92, GAO/HRD-92-27R).

Hispanic Access to Health Care: Significant Gaps Exist (Report, 1/15/92, GAO/PEMD-92-6). Testimony on same topic (9/19/91, GAO/T-PEMD-91-13).

Rural Hospitals: Closures and Issues of Access (Testimony, 9/4/91, GAO/T-HRD-91-46).

Employee and Retiree Health Benefits

Early Retiree Health: Health Security Act Would Shift Billions in Costs to Federal Government (Report, 7/21/94, GAO/HEHS-94-203FS).

Retiree Health Plans: Health Benefits Not Secure Under Employer-Based System (Report, 7/9/93, GAO/HRD-93-125).

Family and Medical Leave Cost Estimate (Letter, 2/1/93, GAO/HRD-93-14R).

Federal Health Benefits Program: Analysis of Contingency and Special Reserves (Report, 12/4/92, GAO/GGD-93-26).

Employee Benefits: Financing Health Benefits of Coal Industry Retirees (Report, 7/22/92, GAO/HRD-92-137FS).

Employee Benefits: Financing Health Benefits of Retired Coal Miners (Report, 7/22/92, GAO/HRD-92-130FS).

Federal Health Benefits Program: Open Season Processing Timeliness (Report, 7/8/92, GAO/GGD-92-122BR).

Information on Federal Health Benefits Costs (Letter, 6/23/92, GAO/GGD-92-18R).

Federal Health Benefits Program (Letter, 5/4/92, GAO/GGD-92-11R).

Summary Information on Farmworkers (Letter, 4/10/92, GAO/HRD-92-30R).

Federal Health Benefits Program: Stronger Controls Needed to Reduce Administrative Costs (Testimony, 3/11/92, GAO/T-GGD-92-20). Report with same title (2/12/92, GAO/GGD-92-37).

Hired Farmworkers: Health and Well-Being at Risk (Report, 2/14/92, GAO/HRD-92-46).

Employee Benefits: Effect of Bankruptcy on Retiree Health Benefits (Report, 8/30/91, GAO/HRD-91-115).

Farmworkers Face Gaps in Protection and Barriers to Benefits (Testimony, 7/17/91, GAO/T-HRD-91-40).

Fraud and Abuse: Stronger Controls Needed in Federal Employees Health Benefits Program (Report, 7/16/91, GAO/GGD-91-95).

Retiree Health: Company-Sponsored Plans Facing Increased Costs and Liabilities (Testimony, 5/6/91, GAO/T-HRD-91-25).

Employee Benefits: Improvements Needed in Enforcing Health Insurance Continuation Requirements (Report, 12/18/90, GAO/HRD-91-37).

Employee Benefits: Trends in Retiree Health Coverage (Testimony, 7/27/90, GAO/T-HRD-90-51).

Employee Benefits: Extent of Multiemployer Plan Retiree Health Coverage (Report, 7/17/90, GAO/HRD-90-132).

Employee Benefits: Extent of Companies' Retiree Health Coverage (Report, 3/28/90, GAO/HRD-90-92).

Black Lung Program: Further Improvements Can Be Made in Claims Adjudication (Report, 3/21/90, GAO/HRD-90-75).

Financing

German Health Reforms: Changes Result in Lower Health Costs in 1993 (Report, 12/16/94, GAO/HEHS-95-27).

Health Care: Employers Urge Hospitals to Battle Costs Using Performance Data Systems (Report, 10/3/94, GAO/HEHS-95-1).

Hospital Compensation: Nationally Representative Data on Chief Executives' Compensation (Report, 8/16/94, GAO/HEHS-94-189).

Health Insurance For The Elderly: Owning Duplicate Policies Is Costly and Unnecessary (Report, 8/3/94, GAO/HEHS-94-185).

Indian Health Service: Efforts to Recruit Health Care Professionals (Report, 7/7/94, GAO/HEHS-94-180FS).

Health Care: Antitrust Enforcement Under Maryland Hospital All-Payer System (Report, 4/27/94, GAO/HEHS-94-81).

Blue Cross and Blue Shield: Experiences of Weak Plans Underscore the Role of Effective State Oversight (Report, 4/13/94, GAO/HEHS-94-71).

Medigap Loss Ratios, First 2 Years (Letter, 4/4/94, GAO/HEHS-94-131R).

Medical Review Saving (Letter, 2/28/94, GAO/HEHS-94-93R).

Medigap Insurance: Insurers' Compliance With Federal Minimum Loss Ratio Standards, 1988-91 (Report, 2/7/94, GAO/HEHS-94-47).

Health Insurance Regulation: Wide Variation in States' Authority, Oversight, and Resources (Report, 12/27/93, GAO/HRD-94-26). Testimony on same topic (11/5/93, GAO/T-HRD-94-55).

Hospitals: Chief Executives' Compensation (Testimony, 12/7/93, GAO/T-HRD-94-70).

Health Insurance: California Public Employees' Alliance Has Reduced Recent Premium Growth (Report, 11/22/93, GAO/HRD-94-40).

1993 German Health Reforms: Initiatives Tighten Cost Controls (Testimony, 10/13/93, GAO/T-HRD-94-2). Report on same topic (7/7/93, GAO/HRD-93-103).

1993 German Health Reforms: New Cost Control Initiatives (Report, 7/7/93, GAO/HRD-93-103). Testimony on same topic (10/13/93, GAO/T-HRD-94-2).

Health Insurance: Remedies Needed to Reduce Losses From Fraud and Abuse (Testimony, 3/8/93, GAO/T-HRD-93-8).

Health Insurance: Legal and Resource Constraints Complicate Efforts to Curb Fraud and Abuse (Testimony, 2/4/93, GAO/T-HRD-93-3). Report on same topic (5/7/92, GAO/HRD-92-69). Testimony on same topic (5/7/92, GAO/T-HRD-92-29).

Health Care: Rochester's Community Approach Yields Better Access, Lower Costs (Report, 1/29/93, GAO/HRD-93-44).

Removal of Breast Implants (Letter, 12/7/92, GAO/HRD-93-5R).

Bone Marrow Transplants: National Program Has Greatly Increased Pool of Potential Donors (Report, 11/4/92, GAO/HRD-93-11).

Trauma Care Reimbursement: Poor Understanding of Losses and Coverage for Undocumented Aliens (Report, 10/15/92, GAO/PEMD-93-1).

Employer-Based Health Insurance: High Costs, Wide Variation Threaten System (Report, 9/22/92, GAO/HRD-92-125).

Hospital Costs: Adoption of Technologies Drives Cost Growth (Report, 9/9/92, GAO/HRD-92-120).

State Health Care Reform: Federal Requirements Influence State Reforms (Testimony, 9/9/92, GAO/T-HRD-92-55). Report on same topic (6/16/92, GAO/HRD-92-70). Testimony on same topic (6/9/92, GAO/T-HRD-92-40).

Health Insurance: More Resources Needed to Combat Fraud and Abuse (Testimony, 7/28/92, GAO/T-HRD-92-49).

Federally Funded Health Services: Information on Seven Programs Serving Low-Income Women and Children (Report, 5/28/92, GAO/HRD-92-73FS).

Access to Health Insurance: States Attempt to Correct Problems in Small Business Health Insurance Market (Report, 5/14/92, GAO/HRD-92-90). Testimony on same topic (5/14/92, GAO/T-HRD-92-30).

Health Insurance: Vulnerable Payers Lose Billions to Fraud and Abuse (Report, 5/7/92, GAO/HRD-92-69). Testimony on same topic (5/7/92, GAO/T-HRD-92-29).

Insurer Failures: Life/Health Insurer Insolvencies and Limitations of State Guaranty Funds (Testimony, 4/28/92, GAO/T-GGD-92-15). Report on same topic (3/19/92, GAO/GGD-92-44).

Early Intervention: Federal Investments Like WIC Can Produce Savings (Report, 4/7/92, GAO/HRD-92-18).

Maternal and Child Health: Block Grant Funds Should be Distributed More Equitably (Report, 4/2/92, GAO/HRD-92-5).

Health Care: Problems and Potential Lessons for Reform (Testimony, 3/27/92, GAO/T-HRD-92-23).

Small Group Market Reforms: Assessment of Proposals to Make Health Insurance More Readily Available to Small Businesses (Letter, 3/12/92, GAO/HRD-92-27R).

Medigap Insurance: Insurers Whose Loss Ratios Did Not Meet Federal Minimum Standards in 1988-89 (Report, 2/28/92, GAO/HRD-92-54).

Health Care Spending: Nonpolicy Factors Account for Most State Differences (Report, 2/13/92, GAO/HRD-92-36).

Budget Issues: 1991 Budget Estimates: What Went Wrong (Report, 1/15/92, GAO/OCG-92-1).

Health Care Spending Control: The Experience of France, Germany, and Japan (Report, 11/15/91, GAO/HRD-92-9). French and German translations available (11/15/91, GAO/HRD-92-9ES). Testimony on same topic (11/19/91, GAO/T-HRD-92-12).

Off-Label Drugs: Reimbursement Policies Constrain Physicians in Their Choice of Cancer Therapies (Report, 9/27/91, GAO/PEMD-91-14).

Managed Care: Oregon Program Appears Successful But Expansion Should Be Implemented Cautiously (Testimony, 9/16/91, GAO/T-HRD-91-48).

Rural Hospitals: Closures and Issues of Access (Testimony, 9/4/91, GAO/T-HRD-91-46).

Nonprofit Hospitals: Better Standards Needed for Tax Exemption
(Testimony, 7/10/91, GAO/T-HRD-91-43). Report on same topic (5/30/90,
GAO/HRD-90-84). Testimony on same topic (6/28/90, GAO/T-HRD-90-45).

Private Health Insurance: Problems Caused by a Segmented Market
(Report, 7/2/91, GAO/HRD-91-114). Testimony on same topic (5/2/91,
GAO/T-HRD-91-21).

U.S. Health Care Spending: Trends, Contributing Factors, and Proposals
for Reform (Report, 6/10/91, GAO/HRD-91-102). French and German
translations available (6/10/91, GAO/HRD-91-102). Testimony on same topic
(4/17/91, GAO/T-HRD-91-16).

Canadian Health Insurance: Lessons for the United States (Report, 6/4/91,
GAO/HRD-91-90). Testimony on same topic (6/4/91, GAO/T-HRD-91-35).

Trauma Care: Lifesaving System Threatened by Unreimbursed Costs and
Other Factors (Report, 5/17/91, GAO/HRD-91-57).

Retiree Health: Company-Sponsored Plans Facing Increased Costs and
Liabilities (Testimony, 5/6/91, GAO/T-HRD-91-25).

Workers at Risk: Increased Numbers in Contingent Employment Lack
Insurance, Other Benefits (Report, 3/8/91, GAO/HRD-91-56).

Medigap Insurance: Better Consumer Protection Should Result From 1990
Changes to Baucus Amendment (Report, 3/5/91, GAO/HRD-91-49).

Rural Hospitals: Federal Efforts Should Target Areas Where Closures
Would Threaten Access to Care (Report, 2/15/91, GAO/HRD-91-41).

Health Insurance Coverage: A Profile of the Uninsured in Selected States
(Report, 2/8/91, GAO/HRD-91-31FS).

Employee Benefits: Improvements Needed in Enforcing Health Insurance
Continuation Requirements (Report, 12/18/90, GAO/HRD-91-37).

Budget Issues: Effects of the Fiscal Year 1990 Sequester on the
Department of Health and Human Services (Report, 8/9/90,
GAO/HRD-90-156FS).

Rural Hospitals: Factors That Affect Risk of Closure (Report, 6/19/90, GAO/HRD-90-134).

Rural Hospitals: Federal Leadership and Targeted Programs Needed (Report, 6/12/90, GAO/HRD-90-67).

Medigap Insurance: Proposals for Regulatory Changes and 1988 Loss Ratio Data (Testimony, 6/6/90, GAO/T-HRD-90-35).

Health Insurance: Availability and Adequacy For Small Businesses (Testimony, 6/5/90, GAO/T-HRD-90-33). Testimony on same topic (10/16/89, GAO/T-HRD-90-2).

Health Insurance: A Profile of the Uninsured in Michigan and the United States (Report, 5/31/90, GAO/HRD-90-97).

Health Insurance: Cost Increases Lead to Coverage Limitations and Cost Shifting (Report, 5/22/90, GAO/HRD-90-68).

Medigap Insurance: Premiums and Regulatory Changes After Repeal of the Medicare Catastrophic Coverage Act and 1988 Loss Ratio Data (Testimony, 3/13/90, GAO/T-HRD-90-16).

Medigap Insurance: Expected 1990 Premiums After Repeal of the Medicare Catastrophic Coverage Act (Testimony, 2/2/90, GAO/T-HRD-90-11). Testimony on same topic (1/8/90, GAO/T-HRD-90-9).

Health Care Reform Related Issues

Health Care Reform: "Report Cards" Are Useful but Significant Issues Need to Be Addressed (Report, 9/29/94, GAO/HEHS-94-219).

Health Care Reform: Considerations for Risk Adjustment Under Community Rating (Report, 9/22/94, GAO/HEHS-94-173).

Small Business: SBA's Health Care Reform Activities (Report, 9/6/94, GAO/RCED-94-240).

Early Retiree Health: Health Security Act Would Shift Billions in Costs to Federal Government (Report, 7/21/94, GAO/HEHS-94-203FS).

Health Security Act: Analysis of Veterans' Health Care Provisions (Report, 7/15/94, GAO/HEHS-94-205FS).

Health Care Reform: Potential Difficulties in Determining Eligibility for Low-Income People (Report, 7/11/94, GAO/HEHS-94-176).

Veterans' Health Care: Efforts to Make VA Competitive May Create Significant Risks (Testimony, 6/29/94, GAO/T-HEHS-94-197).

Health Reform: Purchasing Cooperatives Have an Increasing Role in Providing Access to Insurance (Testimony, 6/30/94, GAO/T-HEHS-94-196).
Report on same topic (5/31/94, GAO/HEHS-94-142).

Federal Administrative Costs Under Health Security Act (Letter, 6/15/94, GAO/HEHS-94-187R).

Health Care Reform: Proposals Have Potential to Reduce Administrative Costs (Report, 5/31/94, GAO/HEHS-94-158).

Health Care Reform: School-Based Health Centers Can Promote Access to Care (Report, 5/13/94, GAO/HEHS-94-166).

VA and the Health Security Act (Letter, 5/9/94, GAO/HEHS-94-159R).

VA Health Care Reform: Financial Implications of the Proposed Health Security Act (Testimony, 5/5/94, GAO/T-HEHS-94-148).

Health Care Alliances: Issues Relating to Geographic Boundaries (Report, 4/8/94, GAO/HEHS-94-139). Testimony on same topic (2/24/94, GAO/T-HEHS-94-108).

Health Care Reform: How Proposals Address Fraud and Abuse (Testimony, 3/17/94, GAO/T-HEHS-94-124).

Health Care in Hawaii: Implications for National Reform (Testimony, 3/16/94, GAO/T-HEHS-94-123). Report on same topic (2/11/94, GAO/HEHS-94-68).

Health Care Reform: Supplemental and Long-Term Care Insurance (Testimony, 11/9/93, GAO/T-HRD-94-58).

Health Insurance: How Health Care Reform May Affect State Regulation (Testimony, 11/5/93, GAO/T-HRD-94-55).

Veterans' Health Care: Potential Effects of Health Financing Reforms on Demand for VA Services (Testimony, 3/31/93, GAO/T-HRD-93-12).

Veterans' Health Care: Potential Effects of Health Reforms on VA Construction (Testimony, 3/3/93, GAO/T-HRD-93-7).

Transition Series: Health Care Reform (Report, 12/92, GAO/OCG-93-8TR).

State Health Care Reform: Federal Requirements Influence State Reforms (Testimony, 9/9/92, GAO/T-HRD-92-55). Report on same topic (6/16/92, GAO/HRD-92-70). Testimony on same topic (6/9/92, GAO/T-HRD-92-40).

Health Care: Problems and Potential Lessons for Reform (Testimony, 3/27/92, GAO/T-HRD-92-23).

HHS Public Health Service Agencies

Food and Drug Administration: Carrageenan Food Additive From the Philippines Conforms to Regulations (Report, 8/2/94, GAO/HEHS-94-141).

FDA User Fees: Current Measures Not Sufficient for Evaluating Effect on Public Health (Report, 7/22/94, GAO/PEMD-94-26).

FDA Regulation: Compliance by Dietary Supplement and Conventional Food Establishments (Report, 6/13/94, GAO/HEHS-94-134).

FDA Drug Enforcement Actions (Letter, 5/6/94, GAO/HEHS-94-136R).

Safe Medical Devices (Letter, 2/10/94, GAO/HEHS-94-86R).

FDA Safety Devices (Letter, 2/2/94, GAO/HEHS-94-90R).

CDC Activities Are Appropriate and Non-Duplicative (Letter, 8/30/93, GAO/HRD-93-32R).

FDA Regulation of Dietary Supplements (Letter, 7/2/93, GAO/HRD-93-28R).

Hospital Sterilants: Insufficient FDA Regulation May Pose a Public Health Risk (Report, 6/14/93, GAO/HRD-93-79).

Alleged Lobbying Activities: Office for Substance Abuse Prevention (Report, 5/4/93, GAO/HRD-93-100).

FDA Premarket Approval: Process of Approving Iodine as a Drug (Report, 4/12/93, GAO/HRD-93-81).

Public Health Service: Evaluation Set-Aside Has Not Realized Its Potential to Inform the Congress (Report, 4/8/93, GAO/PEMD-93-13).

Health and Human Services Issues (Report, 12/92, GAO/OCG-93-20TR).

Women's Health: FDA Needs to Ensure More Study of Gender Differences in Prescription Drug Testing (Report, 10/29/92, GAO/HRD-93-17).

Food Safety and Quality: FDA Strategy Needed to Address Animal Drug Residues in Milk (Report, 8/5/92, GAO/RCED-92-209).

Over the Counter Drugs: Gaps and Potential Vulnerabilities in the Regulatory System (Testimony, 4/28/92, GAO/T-PEMD-92-8). Report on same topic (1/10/92, GAO/PEMD-92-9).

Nonprescription Drugs: Over the Counter and Underemphasized (Testimony, 4/8/92, GAO/T-PEMD-92-5).

FDA Premarket Approval: Process of Approving Olestra as a Food Additive (Report, 4/7/92, GAO/HRD-92-86).

FDA Premarket Approval: Process of Approving Ansaïd as a Drug (Report, 4/7/92, GAO/HRD-92-85).

FDA Regulations: Sustained Management Attention Needed to Improve Timely Issuance (Testimony, 4/1/92, GAO/T-HRD-92-19). Report with same title (2/21/92, GAO/HRD-92-35).

HHS Staff for Board and Care Issues (Letter, 4/1/92, GAO/HRD-92-29R).

Medical Technology: Implementing the Good Manufacturing Practices Regulations (Testimony, 3/25/92, GAO/T-PEMD-92-6). Report on same topic (2/13/92, GAO/PEMD-92-10).

Medical Technology: Quality Assurance Needs Stronger Management Emphasis and Higher Priority (Report, 2/13/92, GAO/PEMD-92-10).

Food Safety and Quality: FDA Needs Stronger Controls Over the Approval Process for New Animal Drugs (Report, 1/17/92, GAO/RCED-92-63).

Freedom of Information: FDA's Program and Regulations Need Improvement (Report, 10/11/91, GAO/HRD-92-2).

Food Safety and Quality: Existing Detection and Control Programs Minimize Aflatoxin (Report, 5/22/91, GAO/RCED-91-109).

FDA Could Do More to Ensure the Safety of Bottled Water (Testimony, 4/10/91, GAO/T-RCED-91-29).

Food Safety and Quality: FDA Surveys Not Adequate to Demonstrate Safety of Milk Supply (Report, 11/1/90, GAO/RCED-91-26).

Food Tampering: Legal Authority Adequate to Deal with Threats (Report, 10/31/90, GAO/HRD-91-20).

Food Tampering: FDA's Actions on Chilean Fruit Based on Sound Evidence (Report, 9/6/90, GAO/HRD-90-164).

Agent Orange Studies: Poor Contracting Practices at Centers for Disease Control Increased Costs (Report, 9/28/90, GAO/GGD-90-122BR).

Food and Drug Administration: GAO's Perspective (Testimony, 7/11/90, GAO/T-HRD-90-47).

Medical Device Problem Reporting: A Case Study of a Home Apnea Monitor (Testimony, 7/17/90, GAO/T-PEMD-90-10). Report on same topic (5/31/90, GAO/PEMD-90-17).

National Institutes of Health: Problems in Implementing Policy on Women in Study Populations (Testimony, 7/24/90, GAO/T-HRD-90-50). Testimony on same topic (6/18/90, GAO/T-HRD-90-38).

Food Irradiation: Federal Requirements and Monitoring (Report, 5/3/90, GAO/HRD-90-118).

FDA Drug Review: Postapproval Risks 1976-1985 (Report, 4/26/90, GAO/PEMD-90-15).

Cosmetics Regulation: Information on Voluntary Actions Agreed to by FDA and the Industry (Report, 3/13/90, GAO/HRD-90-58).

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**Veterans Affairs and Military Health
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