Background

The Budget Control Act of 2011 (P.L. 112-25) established caps on discretionary spending over 10 years, resulting in $1 trillion in cuts spread across defense and nondefense discretionary (NDD) programs such as public health, science, education, infrastructure, housing, natural resources, social services, and public safety. The law also directed a congressional Joint Select Committee on Deficit Reduction to identify an additional $1.2 trillion in budgetary savings over ten years.

The failure of this bipartisan “Super Committee” to come to an agreement on a balanced, deficit reduction plan triggered “sequestration” in 2013, resulting in another $1 trillion in cuts, evenly divided between defense and nondefense programs, over nine years.

Since, there have been three laws that provided temporary relief from what would otherwise be more significant reductions in the government services on which all Americans rely. The Bipartisan Budget Acts (BBA) of 2013, 2015, and 2018 all “raised the caps” on both defense and nondefense discretionary spending in two year increments. Still, budget caps remain austere, resulting in impacts on communities across the country that have been detailed by the Coalition for Health Funding and NDD United in our “Faces of Austerity” report series.

Looming Funding Cliff

In fiscal year (FY) 2020, the relief provided by the BBA of 2018 expires, resulting in a $55 billion reduction in the total funding available for NDD programs. Thus, Congress must act to once again raise the caps, or else cut 10 percent off of the already austere funding for most nondefense programs.


*This reflects changes to the original cap set in law including those caused by the failure of the Super Committee and the American Tax Payer Relief Act.