



giving states a voice

National Association of State Head Injury Administrators



Capitol News!

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Dear Susan,

Greetings! In order to keep you abreast of Congressional deliberations, you are receiving this edition of *Capitol News* as a NASHIA member. For further information regarding NASHIA's public policy priorities, click on [Key Issues](#) housed on the NASHIA [webpage](#). These issues are also explained in NASHIA's [Public Policy Platform](#) for the 114th Congress adopted by the membership last October. For further information regarding NASHIA's public policy work, contact publicpolicy@nashia.org.

This Week in Congress

Congress resumes work this week with both houses convening for business today. This week, the House is expected to debate bills relating to the Affordable Care Act, including repealing the medical device tax, eliminating the Independent Payment Advisory Board, and preventing the Centers for Medicare and Medicaid Services (CMS) from terminating Medicare Advantage contracts that do not have minimum quality ratings. The Senate is expected to take up the National Defense Authorization Act.



FY 2016 Appropriations

House Passes Transportation and HUD Appropriations Bill

The House is working its way through the twelve authorization bills to fund federal government having passed six of the bills. The House completed passage of H.R. 2577 to fund the U.S. Departments of Transportation and the Housing and Urban Development (HUD). H.R. 2577 provides approximately \$55.3 billion in discretionary budget authority, which is \$1.5 billion (2.8%) above FY 2015 levels, but \$9.7 billion below the President's request. The bill provides \$837 million in total budgetary resources for the National Highway Traffic Safety Administration (NHTSA) - an

increase of \$6.5 million over the FY 2015 enacted level - and \$572 million for the Federal Motor Carrier Safety Administration. However, funding for aviation, passenger rail, and some mass transit (along with various smaller activities), is reduced by \$0.7 billion below the 2015 level, with most of the reductions occurring in infrastructure investments to improve the safety and efficiency of transportation systems and promote economic growth. (Other parts of the Transportation Department, including almost all highway and most mass transit programs, are funded outside the appropriations process.)

The House passed an amendment to strike section 102 from the bill which allows the Secretary or his designee to engage in activities with States and State legislators to consider proposals related to the reduction of motorcycle fatalities.

Total funding for HUD's housing assistance and community development programs has declined by \$6.1 billion or nearly 12 percent between 2010 and 2015, adjusted for inflation. The bill provides a total of \$42 billion for HUD, an increase of \$1 billion above the FY 2015 enacted level and \$3 billion below the request. The bill takes non-appropriated money to fund the National Housing Trust Fund and uses it to offset shortfalls in appropriated programs. The funding bill provides a program level of \$461 million for Housing for the Elderly, \$41 million above the FY 2015 enacted level, and \$152 million for Housing for Persons with Disabilities, an increase of \$17 million above the FY 2015 enacted level. However, due to cuts in prior years, assisted housing for low-income elderly and disabled people would be less than half of the 2010 level, adjusted for inflation.

The bill makes deep cuts to HOME and the Public Housing Capital Fund, and fails to renew all Housing Choice Vouchers which were cut by sequestration. The HOME Investment Partnerships Program (HOME) provides formula grants to States and localities that communities use - often in partnership with local nonprofit groups - to fund a wide range of activities including building, buying, and/or rehabilitating affordable housing for rent or homeownership or providing direct rental assistance to low-income people. According to the Center on Budget and Policy Priorities, 85,000 fewer families were using housing vouchers in December 2014 than two years earlier, due largely to sequestration.

CBITF Co-chairs Add TBI funding to the DoD Authorization Bill

Last week, the House passed H.R. 1735, National Defense Authorization Act for FY 2016, authorizing approximately \$605.6 billion in discretionary budget authority in total. Congressional Brain Injury Task Force (CBITF) Co-chairs, Reps. Bill Pascrell, Jr. (D-NJ) and Tom Rooney (R-FL), offered an amendment, which was adopted, to restore \$25 million from the Psychological Health and Traumatic Brain Injury (TBI) Research Program. The defense appropriations bill cuts \$25 million from the TBI program, representing a decrease of 20% from last year's funding level.

House Subcommittee to Mark Up Labor-HHS-Education Spending Bill

On Wednesday, the House Subcommittee on Labor, Health and Human Services (HHS), Education and Related Agencies is to mark up the spending bill for those agencies. The draft bill text will be posted at 9:00 am (ET) on Tuesday, June 16 on the House Appropriations Committee's [website](#), along with a summary. Both NASHIA and BIAA have been advocating for language to be included supporting the move of the Federal TBI Program from Health Resources and Services Administration (HRSA) to the Administration for Community Living (ACL).

Other Legislation

Senator Plans to Introduce Medicaid Demonstration Program Tomorrow

Tomorrow, Senator Chuck Grassley (R-IA), plans to introduce legislation establishing the Transition to Independence Medicaid Buy-In Option demonstration program, which will give ten Medicaid Buy-In States an opportunity to receive bonus payments for meeting benchmarks tied to expanding

individual integrated employment and reducing subminimum wage work, congregate setting work, or facility-based day habilitation placement for people with disabilities who receive Medicaid-funded home or community-based services (HCBS), and for taking other actions that help expand employment opportunities for people with disabilities within the State. The goal is to reduce participation in segregation program and increase participation in individual integrated employment.

Senator Introduces Bill to Limit ACA Subsidies

Senator Ron Johnson (R-WI) has introduced S. 1016 repealing several provisions of the Affordable Care Act (ACA), primarily to eliminate marketplace subsidies for new enrollees in all States, including States with State-based marketplaces that otherwise would be unaffected by a Supreme Court decision with regard to subsidies for those enrolled in federal marketplaces. Eliminating the requirement that most people have health insurance or pay a penalty would result in substantial coverage losses, as fewer uninsured people would enroll in marketplace plans, job-based coverage, Medicaid, the Children's Health Insurance Program (CHIP), and other sources of health coverage.

The bill creates a loophole that appears to allow insurers to deem many more plans as "grandfathered" and thereby enable insurers to offer plans that deny coverage to people with pre-existing conditions, base premiums on health status, or charge women higher premiums than men. It appears that insurers also could allow *new enrollees* into such plans, which the ACA prohibits. Since these plans would primarily attract healthier, low-cost individuals, this would drive up premiums for plans that continued to comply with ACA market reforms and consumer protections. S.1016 would also repeal the ACA requirements that insurers in the individual and small-group markets cover various categories of "essential health benefits" such as hospital and physician services, maternity care, and prescription drugs. The bill would give States free rein to decide what benefits insurers must cover.

House Committee Passes 21st Century Cures Act

In late May, the House Energy and Commerce Committee approved the 21st Century Cures Act to help modernize and personalize health care, encourage greater innovation and enable better, faster cures to more patients. H.R. 6, the 21st Century Cures Act, was authored by full committee Chairman Fred Upton (R-MI), Oversight and Investigations Subcommittee Ranking Member Diana DeGette (D-NJ), full committee Ranking Member Frank Pallone, Jr. (D-NJ), Health Subcommittee Chairman Joe Pitts (R-PA), and Health Subcommittee Ranking Member Gene Green (D-TX). Click [here](#) to see the [press release](#). The bill includes \$10 billion for the National Institutes of Health (NIH).

Rep. Introduces Concussion Awareness and Education Act of 2015

In March, Joyce Rep. Beatty (D-OH) introduced H.R. 1271 to require the Centers for Disease Control and Prevention (CDC) to (1) establish and oversee a national system to accurately determine the incidence of sports-related concussions among youth, and (2) to develop and disseminate public information regarding concussions. The bill also requires the NIH to conduct or support research designed to inform the creation of guidelines for the management of short-and long-term sequelae of concussion in youth; the effects of repetitive concussions; and predictors of outcomes of concussions. The bill also establishes a Concussion Research Commission, which shall study the programs and activities conducted pursuant to this Act and formulate systemic recommendations to increase knowledge about, and change the culture surrounding, concussions.

Congressional Committees and Caucuses

Senators Form NIH Caucus

Last month, Senators Lindsey Graham (R-SC) and Dick Durbin (D-IL) introduced the new National Institutes of Health (NIH) caucus. The Senators will co-chair the caucus and will focus on bolstering support for federal research and to find a way to fund it. The NIH Caucus offers the opportunity to

educate the Senate about the importance of NIH. The NIH Director, Dr. Francis Collins and other researchers participated in the dedication ceremony introducing the caucus. Since 2003, NIH has lost 25 percent of its purchasing power which the senators attribute to sequestration and flat budgets.

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*The National Association of State Head Injury Administrators assists State government
in promoting partnerships and building systems to meet the needs
of individuals with brain injuries and their families.*

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