

# **Capitol News!**

produced by the National Association of State Head Injury Administrators

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#### Dear Susan,

Welcome to **Capitol News!**, which you receive as a NASHIA member. As you may have heard, the Senate has set aside the healthcare reform bill this week, due to lack of votes, and is planning to proceed with a bill to repeal the Affordable Care Act (ACA) without a replacement bill. Advocates continue to push back against the repeal of the ACA without assurance that provisions for essential health care benefits; coverage for pre-existing conditions; and Medicaid expansion are continued; and that Medicaid cuts and per capita caps are not part of the plan.

Last week, the House Appropriations Committee marked up the fiscal year 2018 spending bill for Labor-HHS-ED. Details of the bill were released today. The good news is that the House committee **recommended that the Federal TBI Program is continued and level funded** - while other programs are being cut or eliminated. All 12 annual appropriations bills have cleared the House subcommittee with jurisdiction over the federal agencies and programs. Today, the House Budget Committee released its recommendations for a 2018 budget resolution cutting approximately \$200 billion in cuts over ten years in entitlement programs. The budget reconciliation process allows for expedited consideration of certain tax, spending, and debt limit legislation.

Read below for further information on these critical issues. Meanwhile, NASHIA maintains a <a href="webpage">webpage</a> that lists its key priorities along with support letters, testimony and other information. To learn how you may affect policy issues, click on the <a href="Get Involved">Get Involved</a> page that has suggestions for advocating as a State employee and other tidbits. As always, please feel free to use posted materials and to contact Susan L. Vaughn, Director of Public Policy at <a href="publicpolicy@nashia.org">publicpolicy@nashia.org</a> if you have any questions, comments or suggestions.

# This Week in Congress

Congress is in session this week, having returned last week from the Independence Day recess. The Senate is holding confirmation hearings to fill key vacancies in the Executive Branch. The Senate Armed Services Committee will consider five nominees today and the Senate Veterans' Affairs Committee will consider six more on Wednesday. The Senate Intelligence Committee members will look at three more. On Wed., the Senate HELP Committee will hold an Executive Session to consider two nominations to the National Labor Relations Board.



# **Budget and FY 2018 Appropriations**

# **House Committee to Markup Budget Resolution Tomorrow**

The House Budget Committee is to markup its budget resolution tomorrow at 10:00 am. The House Budget Committee is considering a 2018 budget resolution that will reportedly use the "reconciliation" fast-track legislative process to force roughly \$200 billion in cuts over ten years in entitlement (mandatory) programs. A large share of those cuts likely will come from programs that provide basic assistance to families with low or modest incomes. Click <a href="here">here</a> to read the narrative text for the budget resolution. Charts and tables are available <a href="here">here</a>. Summary tables are available <a href="here">here</a>. Reconciliation savings by Committee are as follows (\$203 billion over 10 years):

- Agriculture = \$10 billion
- Armed Services = \$ 1 billion
- Education and Workforce = \$20 billion
- Energy and Commerce = \$20 billion
- Financial Services = \$14 billion
- Homeland Security = \$3 billion
- Natural Resources = \$5 billion
- Judiciary = \$45 billion
- Oversight and Government Reform = \$32 billion
- Veterans = \$1 billion
- Ways and Means = \$52 billion

There are more cuts in mandatory programs, but they are not subject to reconciliation instructions. In order to be enacted, they would need 60 votes to pass in the Senate (all over 10 years):

- Medicare net savings = \$487 billion
- Medicaid and other health = \$1.5 trillion (would include health care repeal legislation)
- Other mandatory = \$2.446 trillion

#### Discretionary:

- Defense would be \$929 billion above the budget control caps set in 2011
- Non-defense would be \$1.299 trillion below the budget control caps set in 2011

The budget reconciliation process begins with the passage of a budget resolution in both chambers of Congress, which include reconciliation instructions. These reconciliation instructions choose the relevant congressional committee or committees that will have jurisdiction over the legislation. These instructions direct certain committees to craft legislative language increasing or decreasing federal revenues, spending levels, or the debt ceiling.

The hearing announcement is available <u>here</u>. You can also watch it live from this website on Wednesday.

#### House Appropriations Committee Marks Up Labor-HHS-ED Appropriations Bill

Last Wed., the House Appropriations Committee released the draft fiscal year 2018 Labor, Health and Human Services, and Education (LHHS) funding bill. Today, the specifics of the bill were released. In total, the draft bill includes \$156 billion in discretionary funding, which is a reduction of \$5 billion below the fiscal year 2017 enacted level. The bill cuts funding to lower-priority programs, while targeting investments in medical research, public health, biodefense, and important activities that help boost job growth. The legislation also includes several provisions to rein in unnecessary regulations, and to protect the sanctity of life.

The Committee recommends \$9,321,000 for the Administration for Community Living (ACL) Traumatic Brain Injury program (State Grant and P&A Grant programs), which is the same as the fiscal year 2017 enacted level and \$6,159,000 above the fiscal year 2017 President's budget request. The President's proposed fiscal year 2018 budget calls for the elimination of the Federal TBI State Implementation Grant Program (\$6,159,000), the State Developmental Disabilities Councils and the Independent Living (IL), Part B funding, also administered by ACL, and folds them, into an "innovation" grant program with less than half of the funding these programs receive when combined. The House committee recommends that these three programs be continued and

level funded. NASHIA, the Brain Injury Association of America (BIAA), National Association of Councils on Developmental Disabilities (NACDD), and the National Council on Independent Living (NCIL) sent a joint <u>letter</u> to appropriators calling for these programs to be funded and to remain as separate programs.

For a third consecutive year, the spending bill allocates a significant funding increase of \$1.1 billion for the National Institutes of Health (NIH), which will benefit a wide range of research programs, including the BRAIN Initiative. The bill calls for \$336 million for the BRAIN Initiative, a \$76 million increase; and \$400 million, a \$80 million increase, for the All of Us research initiative, formerly called the Precision Medicine Initiative.

The Committee included language encouraging the National Institute of Neurological Disorders and Stroke (NINDS) to work with the National Institute of Aging to support a robust and coordinated portfolio of TBI research with a focus on how to leverage regenerative medicine research and the use of adult stem cells in the treatment of TBI. The Committee requests an update in the fiscal year 2019 Congressional Justification on efforts in these specific areas of TBI research.

The committee is proposing \$7 billion for the Centers for Disease Control and Prevention (CDC), which is a \$198 million cut below fiscal year 2017 enacted level. This includes \$840.6 million in transfers from the Prevention and Public Health Fund. The committee recommends flat funding for the CDC Injury Center. The bill also continues the longstanding prohibition against using federal funds to advocate or promote gun control.

The legislation contains several provisions to stop the implementation of the Affordable Care Act, including prohibiting the use of any new discretionary funding to implement the ACA. The legislation cuts or terminates several programs deemed as lower-priority, unproven, or unnecessary. NASHIA has signed on to support letters calling for increased funding for HHS funding for respite care, assistive technology, falls prevention and CDC Injury Center funding.

The House Appropriations Committee also increases funding for special education funding and early childhood education programs; and new provisions to protect human life. For the text of the draft FY 2018 Labor, Health and Human Services, and Education bill, click <u>here</u>.

# **House Passes Defense Spending Bill with TBI Provisions**

Last Friday, the House passed a \$696.5 billion National Defense Authorization Act (NDAA) that exceeds the President's budget request. The co-chairs of the Congressional Brain Injury Task Force, U.S. Reps. Bill Pascrell, Jr. (D-NJ) and Tom Rooney (R-FL) offered an amendment to H.R. 2810 that requires the Secretary of Defense to report to Congress within 180 days on the implementation of recommendations from a recent report from the Government Accountability Office (GAO) on the military services' consideration of traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD) in misconduct separations. The House adopted the amendment.

In May 2017, the Government Accountability Office (GAO) issued a report entitled "Actions Needed to Ensure Post-Traumatic Stress Disorder and Traumatic Brain Injury Are Considered in Misconduct Separations." GAO found that some of the service branch policies related to the consideration of TBI and PTSD in "other than honorable" discharges were inconsistent with Department of Defense (DOD) policy. To remedy these inconsistencies, DOD issued five recommendations to increase its assurance that PTSD and TBI are appropriately considered prior to separating certain servicemembers from the military for misconduct. NASHIA supported the amendment along with the Brain Injury Association of America and the U.S. Brain Injury Alliance.

#### Other Legislation

#### Senate Leadership Pulls the Healthcare Reform Bill

Senate Majority Leader McConnell (D-KY) has conceded that he does not have enough votes to pass the Senate bill to partially repeal the Affordable Care Act (ACA). At least ten senators have expressed opposition to the Better Care Reconciliation Act (BCRA) in its current form. The

Congressional Budget Office has yet to score the current bill, which included an amendment from Sen. Cruz (R-TX) to allow insurance companies to sell plans on the marketplace which would not comply with the Essential Health Benefit (EHBs) regulations found in the ACA. The Center on Budget and Policy Priorities has released a report on the effects of the Cruz amendment.

With Senator John McCain (R-AZ) hospitalize for a procedure, Sen. McConnell was delaying the vote until he returned. However, several Senators then came forward to say they could not support the bill. Sen. McConnell then stated last night that the plan was to repeal the ACA only, with a replacement bill to be worked on later. Sens. Shelley Moore Capito (W.V.), Lisa Murkowski (R-AK) and Susan Collins (R-ME) have since said that they will not support moving forward with the plan to repeal healthcare law with a delayed replacement.

Several advocacy events have been scheduled this week. Even though the bill is stalled, disability advocates are concerned with the plan to cut Medicaid and transfer responsibility for the program to the States. The Consortium for Citizens with Disabilities (CCD) is organizing a National Disability Call-in Day tomorrow, Wed., July 12, in order to continue educating Members of Congress on the importance of Medicaid and affordable and accessible health care. The first State-by-State breakdown of the BCRA Medicaid cuts through 2036 has been released. Click <a href="here">here</a> for the information.

# Summary of the Senate provisions:

- Still contains provisions to deconstruct, cap, and cut Medicaid;
- Still allows for waivers to eliminate the essential health care benefits;
- Still allows for waivers to disregard the prohibition to discriminate against pre-existing conditions:
- Still eliminates the incentive to provide home and community-based services (HCBS) by eliminating the FMAP increase;
- Contains a new section that will create two risk pools-one that will segregate high health care need individuals from those with lower needs-and increase premium costs;
- Still allows States to include Medicaid expansion provisions in block grants, as determined by the State;
- Still no change in the Medicaid per capita caps. The bill still has the same initial growth rate and the more restrictive growth rate beginning in 2025;
- Still cuts the enhanced match for 1915(k) Community First Choice program;
- Creates a new 1915(I) HCBS program, which is a four year demonstration from 2020-2023, with a limited amount of attached funding (\$8 billion), meaning only a few States could take advantage of it. The 15 States with low density populations are given priority.

Meanwhile, Sen. Lindsey Graham (R-SC) is proposing legislation that would direct much of the ACA's federal funding directly to the States as a replacement plan. His proposal would keep all of the ACA's taxes except for the Medical device tax, but would block grants about \$110 billion in federal health care funding to the States. Sen. Bill Cassidy (R-LA) and Sen. Susan Collins (R-ME) introduced legislation earlier this year that would allow States to keep the ACA, if it's working for them or reform the law if they oppose it. The legislation would provide coverage for everyone with people opting out of insurance coverage, rather than opting in.

#### **CCD Organizations Support the Disability Integration Act**

NASHIA joined other member organizations of the Consortium for Citizens (CCD) in support of the Disability Integration Act (S. 910, H.R. 2472). This legislation, if passed, would ensure the rights of people with disabilities to live full and independent lives in their communities. The bill builds on the Americans with Disabilities Act (ADA) and the Supreme Court's **Olmstead Decision**, and asserts that people with disabilities have a right to live in their own homes and communities and to receive the services and supports they need to do so. Organizations urge Congress to pass the Disability Integration Act and affirm the right of people with disabilities.

#### **Committee Hearings**

# **House Committee to Hold Hearing on the Medicare Program**

On Thurs., the House Energy & Commerce Committee's Subcommittee on Health will hold a hearing on "Examining Bipartisan Legislation to Improve the Medicare Program" at 10:00am in the Rayburn House Office Bldg., Room 2123. Chaired by Rep. Michael C. Burgess, M.D. (R-TX), the Subcommittee will review several bipartisan bills which individually are designed to improve the Medicare program. These bills include: H.R. 849, Protecting Seniors' Access to Medicare Act of 2017; H.R. 1148, Furthering Access to Stroke Telemedicine (FAST) Act of 2017; H.R. 2465, Steve Gleason Enduring Voices Act of 2017; and legislation to extend the therapy cap exceptions process and manual review under the Medicare program. NASHIA has joined other members of the Coalition to Preserve Rehabilitation (CPR) in supporting the Medicare Access to Rehabilitation Services Act of 2017, the outpatient therapy services cap repeal legislation introduced in both the House (H.R. 807) and Senate (S. 253). NASHIA is also on record supporting the Steve Gleason Enduring Voices Act of 2017.

# This **Capitol News** was prepared by:

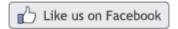
Susan L. Vaughn, Director of Public Policy, publicpolicy@nashia.org

William A.B. Ditto, MSW, Chair of the NASHIA Public Policy Committee, William ABDitto@aol.com

Rebeccah Wolfkiel, NASHIA Governmental Relations Consultant, <a href="mailto:rwolfkiel@ridge">rwolfkiel@ridge</a>policygroup.com



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.



National Association of State Head Injury Administrators
PO Box 878, Waitsfield, VT 05673