



## Capitol News!

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State Head Injury Administrators

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### Dear NASHIA Member

Welcome to *Capitol News!*, which you receive as a NASHIA member. Last week, the Senate revealed the Graham-Cassidy bill designed to repeal the Affordable Care Act (ACA), as well as to block grant and cap spending for the Medicaid program, transferring the program to the States to administer. NASHIA submitted [testimony](#) to the Senate Finance Committee on Monday in opposition to the measure. As the Senate doesn't appear to have the votes to pass the repeal legislation, the Senate will not pursue the bill at this time -- that we know of. The Senate has until Sept. 30 to pass a repeal bill under the reconciliation budget rules, which only require 51 votes for passage and prohibits filibustering.

Meanwhile, Congress continues to work on appropriations bills as the Continuing Appropriations Act, signed Sept. 8, extends funding for federal government only through Dec. 8, 2017. Read below for further information on appropriations, as well as other proposed legislation.

NASHIA's public policy staff, Rebeccah Wolfkiel, Governmental Relations, and Susan Vaughn, Director of Public Policy, along with our members, continue to advocate for TBI services on behalf of the States. If you are interested in serving on NASHIA's Public Policy Committee, please let Susan know at [publicpolicy@nashia.org](mailto:publicpolicy@nashia.org). To view NASHIA's Platform, click on the [Priorities page](#) on NASHIA's [website](#). The [Key Issues page](#) lists support letters, testimony and other information with regard to NASHIA's priorities. To learn how you may affect policy issues, click on the [Get Involved 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 at [publicpolicy@nashia.org](mailto:publicpolicy@nashia.org) if you have any questions, comments or suggestions.

### This Week in Congress

Both the U.S. House of Representatives and the Senate are in session this week. The House is expected to roll out a tax bill today. Last night, the Senate passed S. 870, Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act of 2017, to improve health outcomes for Medicare beneficiaries living with chronic conditions.



### FY 2018 Appropriations

#### President Signs Bill Extending Federal Funding through Dec. 8

With the Sept. 30 deadline looming with regard to funding federal government starting Oct. 1, Congress passed H.R. 601, the "Continuing Appropriations Act, 2018 and Supplemental Appropriations for Disaster Relief Requirements Act, 2017," earlier in the month. The President signed the bill Sept. 8, which also included funding for disaster response and assistance for Texas and Florida. The short-term continuing resolution (CR) also raised the debt ceiling.

### **House Passes Spending Bill**

On Sept. 14, the House of Representatives passed the "Make America Secure and Prosperous Appropriations Act," to appropriate all discretionary funding for fiscal year 2018. The House Appropriations Committee released its recommendations in July. The House recommendations include level funding for the Federal TBI Grant Programs and continuing the TBI Federal State Grant program, along with the State Developmental Disabilities Councils and Statewide Independent Living Councils, as separate funded programs. The bill funds the Department of Health and Human Services' (HHS) Administration for Community Living (ACL) at \$2.2 billion, which is \$243 million above the fiscal year 2017 enacted level and \$386 million above the fiscal year 2018 request. This amount includes a transfer of the Senior Community Service Employment Program from the Department of Labor to ACL.

### **Senate Appropriations Committee Marks Up Labor-HHS-Education**

On Sept. 7, the Senate Appropriations Committee reported out the fiscal year 2018 spending bill for Labor, Health and Human Services (HHS), Education and Related Agencies. With regard to funding, brain injury and disability programs are pretty much level funded, meaning the same as last fiscal year. This also applies to funding for the Federal TBI Grant Program, which funds State grants and Protection & Advocacy (P&A) grants. The Senate included language opposing ACL's proposed Partnership for Innovation, Inclusion, and Independence (PIII) grant program, which would combine the Federal TBI State Grant Program, State Developmental Disabilities Councils, and Independent Living, Part B, programs into one grant program and reduce the amount significantly. The following are highlights of the recommendations:

#### Health and Human Services (HHS)

##### *Administration for Community Living (ACL)*

- TBI Federal Grant Program. The Committee provides \$9,321,000 for the TBI program, which supports grants to States for coordination and improvement of services to individuals and families with TBI, and grants to state protection and advocacy services. The Committee does not consolidate the State Councils on Developmental Disabilities, State Independent Living Councils, and State Advisory Boards on TBI as proposed by the Administration. The Committee recognizes the unique role played by each program and believes consolidation into one program will not serve the needs of the people living with a disability.
- Elder Falls Prevention. The Committee recommends that \$5M be transferred from the CDC Prevention and Public Health (PPH) Fund for Elder Falls Prevention activities to the ACL. The Committee intends that these funds should be used in coordination with CDC for public education about the risk of these falls, as well as implementation and dissemination of community-based strategies that have been proven to reduce the incidence of falls among seniors.
- Aging and Disability Resource Centers. The Committee recommendations include \$6,119,000 for Aging and Disability Resource Centers [ADRCs] to provide information, one-on-one counseling, and access for individuals to learn about their long-term services and support options with the goal of allowing seniors and individuals with disabilities to maintain their independence. The Committee urges ACL to improve coordination among ADRCs, area agencies on aging, and centers for independent living to ensure that there is "no wrong door" to access services.

##### *Centers for Disease Control and Prevention (CDC) - Injury Prevention and Control*

- TBI Program. \$6.75M to continue research and programs work to prevent TBIs and help people recognize, respond, and recover if a TBI occurs.
- Concussion Surveillance. The 2013 National Academy of Science (NAS) study "Sports-Related Concussions in Youth: Improving the Science, Changing the Culture" recommended that CDC establish and oversee a national surveillance system to accurately determine the incidence of sports-related concussions, including youth ages 5

to 21. The Committee is aware of the promising progress CDC has made in creating a comprehensive survey instrument which the agency will be piloting in the coming months to prepare for a national survey in the future. The Committee supports CDC's work in this area and urges the agency to increase its efforts.

#### *Centers for Medicare and Medicaid Services (CMS)*

- Falls Prevention. The Committee recognizes the importance of injury prevention in seniors and the impact that falls can have on morbidity and mortality, as well as the rising aging population in the United States. The Committee also recognizes the significant positive outcomes in terms of averted morbidity and mortality, as well as cost savings, from models such as the Community Aging in Place-Advancing Better Living for Elders [CAPABLE] program. Funded through the Center for Medicare and Medicaid Innovation's Health Care Innovation Awards, the CAPABLE program utilized occupational therapists, nurses, and home repair handymen to focus on beneficiary-directed home functional improvements, with the aim of delaying entry to skilled nursing facilities. The Committee encourages CMS to look for opportunities to test models related to injury and fall prevention.

#### *National Institutes of Health (NIH)*

- National Institute on Neurological Disorders and Stroke -- TBI. The Committee understands regenerative medicine research and the use of adult stem cells may play an important role in the treatment of TBI. The Committee strongly encourages NINDS, with other Institutes and Centers, to ensure a robust and coordinated portfolio of TBI research is supported 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 CJ on efforts in these specific areas of TBI research.
- Rehabilitation Research. The Committee encourages NIH to fully implement Section 2040 of the 21st Century Cures Act to enhance the stature, visibility, and coordination of medical rehabilitation research conducted at NIH. The Committee is encouraged by the release of NIH's new Rehabilitation Research Plan, looks forward to reviewing its first annual progress report, and is encouraged by its ongoing efforts to ensure that reporting of rehabilitation research is consistent with the definition of "rehabilitation research" included in the legislation.

#### Department of Education - Rehabilitation Services Administration (RSA)

- Supported Employment State Grants. The Committee recommendations do not include funding for the Supported Employment State Grants Program.
- Independent Living Services for Older Individuals Who Are Blind. The Committee recommends \$33,317,000 for Independent Living State Grants. This program supports assistance to individuals over age 55 to help them adjust to their blindness and continue to live independently, including daily living skills training, counseling, community integration information and referral, the provision of low-vision and communication devices, and low-vision screening.

#### **Other Legislation**

##### **Republican Senators Consider Bill to Repeal the ACA**

In a last attempt to repeal the Affordable Care Act (ACA), Senate Republicans last week announced the Graham-Cassidy legislation, sponsored by Senators Lindsey Graham (R-SC) and Bill Cassidy (R-LA), as the vehicle to repeal and to replace the ACA with block grant funding from ACA's Medicaid expansion, tax credits and subsidies into grants managed by each State. The proposal would allow States to waive certain ACA requirements, such as Essential Health Care Benefits, and guarantees for individuals with pre-existing conditions. The proposal changed the Medicaid program from an entitlement program to a block grant with capped spending for States to

administer and cut Medicaid funding significantly.

The Senate does not yet have the votes to pass the Graham-Cassidy repeal bill. Disability and healthcare advocates are still monitoring the position of Senators as to whether this could change. However, Sat. is the deadline to pass the bill under the reconciliation process. After that, the Senate would need to pass repeal legislation with 60 votes and the filibuster provisions would apply.

#### **House Considers Barring SSI to People with Outstanding Warrants**

The House of Representatives is considering H.R. 2792, which would bar payment of Social Security and Supplemental Security Income (SSI) benefits to people with an outstanding arrest warrant for an alleged felony or an alleged violation of probation or parole. This cut to SSI would be used to pay for reauthorization of the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program. The Social Security Act already prohibits payments to people fleeing from law enforcement to avoid prosecution or imprisonment. This bill would not change these policies and procedures. Instead, the bill could lead to hundreds of people - whom law enforcement is not pursuing - to lose essential benefits. Most of the warrants in question are decades old and involve minor infractions, including warrants routinely issued when a person was unable to pay a fine or a probation supervision fee.

#### **Representatives Introduce the Family Caregivers Act**

Representatives Gregg Harper (R-MS) and Kathy Castor (D-FL), along with Reps. Michelle Lujan Grisham (D-NM) and Elise Stefanik (R-NY), have introduced the Recognize, Assist, Include, Support, and Engage (RAISE) Family Caregivers Act, H.R. 3759. The RAISE Family Caregivers Act would require the Secretary of Health and Human Services (HHS) to develop a strategy to support family caregivers. The Senate HELP Committee passed similar legislation in May.

#### **NASHIA Supports Family Based Care Services Act**

NASHIA has signed on to a [letter](#) in support of S.1357 and H.R. 2290, the Family Based Care Services Act of 2017 which is to ensure accredited and State licensed provider agencies to children and youth involved in child welfare and foster care systems deliver vital clinical services to children with disabilities, medically fragile conditions and/or mental illness. S.1357 and H.R.2290 provide a uniform definition describing the unique population of youth served in therapeutic family care (TFC) and baseline quality standards for providers. TFC is the evidence-informed, trauma-informed, and highly effective placement for children and youth with serious medical, psychological, emotional and social needs. TFC provider agencies serve approximately 42,000 foster children (including those in kinship foster care) with severe mental and behavioral health conditions within a family-and community-based environment.

### **Committee Hearings and Briefings**

#### **Congressional Briefing to Promote Disability Employment Awareness Month**

On Oct. 2, Senator Bob Casey (D-PA); House Bipartisan Disabilities Caucus Chairs Rep. Gregg Harper (R-MS) and Rep. Jim Langevin (D-RI); and other members of Congress will join the Collaboration to Promote Self Determination in sponsoring the briefing, "Workforce Innovation and Opportunity Act: Advisory Committee Recommendations and Opportunities for Legislative Action." The briefing will be held at 1:00pm in Room SR325, Russell Senate Office Building. The briefing is being held to promote October National Disability Employment Awareness Month. RSVP: [bit.ly/WIOABriefing](http://bit.ly/WIOABriefing)

#### **IVPN Hosts Congressional Briefing on Substance Abuse, Injuries and Violence**

The Injury and Violence Prevention Network (IVPN) will host a Congressional briefing on Tuesday, Oct. 24, on the "Intersection of Substance Abuse, Injuries & Violence." Representative Gwen Moore (D-WI) is sponsoring the briefing and has secured a room in the Capitol Visitor Center Meeting Room North (CVC 268) from 10-11:30 am. Speakers are currently being finalized. NASHIA is a member of the IVPN.

### **Proposed Rules and Regulations**

#### **Coalition Submits Comments on Proposed Rule and Home Health Care to CMS**

NASHIA signed on to the Coalition to Preserve Rehabilitation (CPR) [letter](#) to the Centers for

Medicare and Medicaid Services (CMS) with regard to the proposed rule entitled, *Medicare and Medicaid Programs; CY 2018 Home Health Prospective Payment System Rate Update and Proposed CY 2019 Case-Mix Adjustment Methodology Refinements; Home Health Value-Based Purchasing Model; and Home Health Quality Reporting Requirements (the Proposed Rule)*. The proposed rule updates the home health prospective payment system (HH PPS) payment rates, including the national, standardized 60-day episode payment rates and the national per-visit rates, effective for home health episodes of care ending on or after January 1, 2018.

Among other concerns expressed, CPR is concerned that, over time, patients will have to be admitted to an inpatient setting before gaining access to home health services. The coalition also believes that the proposed payment weights will create incentives for providers to select patients with relatively intensive, short-term therapy needs, not patients who require skilled services on an ongoing basis in order to remain at home, living in the community. These and other concerns led the coalition to urge CMS to withdraw the proposed rule.

CPR is a coalition of national consumer, clinician, and membership organizations that advocate for policies to ensure access to rehabilitative care so that individuals with injuries, illnesses, disabilities and chronic conditions may regain and/or maintain their maximum level of health and independent function.

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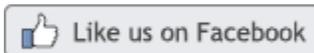
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*The National Association of State Head Injury Administrators assists State government in promoting partnerships and building systems to meet the needs of individuals with brain injuries and their families.*



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