



National Association of State Head Injury Administrators



## Capitol News!

April 28, 2015

Vol. 12, Issue 3

Dear NASHIA Member,

Greetings! You are receiving this edition of *Capitol News* as a NASHIA member in order to keep you abreast of congressional deliberations impacting State brain injury programs and services and in keeping with NASHIA's public policy priorities. NASHIA's public policy priorities are listed under [Key Issues](#) of the NASHIA [webpage](#). These issues are also explained in NASHIA's [Public Policy Platform](#) for the 114th Congress adopted by the membership last October. Please visit the public policy pages for additional information on key issues, including testimony, support letters and handouts. For further information regarding NASHIA's public policy work, contact [publicpolicy@nashia.org](mailto:publicpolicy@nashia.org).

### This Week in Congress

The House reconvened today. The House and Senate is to hold a joint session tomorrow morning to receive Shinzo Abe, Prime Minister of Japan. The House was then expected to consider H.R. 2029 providing FY 2016 funding for military construction and Veterans Affairs and related agencies. The Senate reconvened yesterday. This week the House and Senate are working on differences in their budget plans. Read further regarding the budget proposals.



### Budget Resolution

#### House and Senate Pass Own Budget Resolutions

Negotiators are trying to resolve differences between the House and Senate proposals, which set spending amounts for appropriators. Both the House and Senate resolutions seek to balance the budget within the next decade by massive cuts to mandatory programs, such as Medicaid, SNAP, and the Affordable Care Act and by cutting appropriations even more deeply than current law would require. Both budget plans would make 69 percent of their non-defense cuts in programs serving low-and moderate-income people.

The House budget cuts appropriations nearly \$1 trillion below current law's sequester levels over 10 years, while the Senate would cut \$400 billion below sequestration. (The 2013 budget sequestration required cuts to defense and non-defense spending of about \$110 billion a year.) These proposed cuts would impact education, housing, job training, and services for children and

seniors, as well as environmental, medical research, and public health programs. The House budget instructs many different committees to come back with savings proposals subject to fast-track rules in the Senate; while the Senate version of the budget would only direct those instructions to the committees with jurisdiction over the health care law.

A number of provisions in the Senate budget resolution would shut down some of the ways of loosening the caps for domestic programs. One provision would phase out the use of savings from mandatory programs from being applied to discretionary spending. This practice added \$19 billion to domestic appropriations this year. The Senate budget would keep it at \$19 billion in FY 2016, but gradually eliminate it by FY 2021. It is not yet known if these constraints will be in the final budget resolution.

The House and Senate budgets are vague about revenues. Both House and Senate would repeal the health care law, and along with it the \$1 trillion in revenues it would generate over the next decade. However, neither budget resolution show revenues being reduced over this period, without explaining what will replace the repealed taxes. Both the House and Senate would allow the improvements to low-income tax credits to expire, resulting in 16 million people, half of them children, into poverty or deeper poverty, according to the [Center for budget and Policy Priorities](#).

The Senate budget included an amendment to make it possible for Congress to agree later on a deal to exceed the sequestration caps by making up the increased spending by an unspecified combination of new revenues and cuts in mandatory programs.

NASHIA and other health care, disability and social service advocates have opposed the budget resolutions proposed due to the impact it will have for services and benefits for those who are low income and those with disabilities.

---

## Other Legislation

### **Senate Committee Approves Education Reauthorization**

On April 16<sup>th</sup>, the Senate Health, Education, Labor, and Pensions (HELP) Committee unanimously passed a reauthorization bill for the Elementary and Secondary Education Act (ESEA), known as the Every Child Achieves Act (ECAA). The proposed bill will significantly reduce the federal role in elementary and secondary school accountability. States would still be responsible for reporting disaggregated data for subgroups of students, including students with disabilities. The bill also includes a cap of one percent of all on the use of alternate assessments on alternate achievement standards for students with the most significant disabilities. It would also maintain current annual testing requirements and would eliminate federal requirements on teacher evaluations. Senators voted to renew a program that helps poor students qualify and pay for taking college-level classes while in high school and also a grant program that trains teachers to identify and reach out to gifted children, particularly in poor schools where the students can get overlooked. Chairman Lamar Alexander (R-TN) is hoping that the full Senate will consider the bill before the Memorial Day recess. The Senate HELP Committee [website](#) has more information. The House has not yet passed its version, H.R. 5.

### **Senate Passes Medicare SGD and DME Bills**

Last week, the Senate passed S. 984 to improve Medicare beneficiary access to eye tracking accessories for speech generating devices and to remove the rental cap for durable medical equipment. The legislation, introduced by Senator David Vitter (R-LA), is to ensure that individuals who own their own devices at the time of Medicare coverage are not at risk of losing access to them should they be admitted to a hospital, rehabilitation facility or other health care setting. The legislation is named in honor of former New Orleans Saints football player Steve Gleason, who was diagnosed with ALS in 2011 and uses an augmentative communication device. Similar legislation, H.R. 628, has been introduced by Rep. Cathy McMorris Rodgers (R-WA).

The Senate also passed the S. 971, the Medicare Independence at Home Medical Practice Demonstration Improvement Act of 2015, introduced by Senator Ron Wyden (D-OR), to increase the limit of the length of an agreement under the 'Medicare independence at home medical practice demonstration program.

### **Lawmakers Introduce Bills to Elevate Medical Rehab Research**

On March 19, 2015, Senators Mark Kirk (R-IL) and Michael Bennet (D-CO) and Congressmen Jim Langevin (D-RI) and Gregg Harper (R-MS) introduced "The Enhancing the Stature and Visibility of Medical Rehabilitation Research at the NIH Act" (companion bills: S. 800 and H.R. 1631) to improve, coordinate, and enhance medical rehabilitation research at the National Institutes of Health (NIH). NASHIA sent a [letter](#) to bill sponsors supporting the measure to enhance the stature and visibility of medical rehabilitation research at NIH.

### **Senate Defeats Amendment to Repeal Prevention Fund**

A week ago, Senator John Cornyn (R-TX) introduced an amendment to the human trafficking legislation that would have repealed the Centers for Disease Control and Prevention's (CDC) Prevention Fund as a means for paying for the reauthorization of the Runaway and Homeless Youth Act. The amendment, which would have repealed the entire \$10 billion Prevention Fund, to pay for a program which costs just a fraction of that amount, was defeated. The Fund supports 46% of the funding for the CDC's Chronic Disease Center and investments in State and local public health for emergencies, such as infectious disease outbreaks. Senator Pat Murray (D-WA) led the charge to defeat the amendment.

### **Congressman Introduces Veterans Access to Care Bill**

Last Thursday, Representative John Abney Culberson (R-TX) introduced H.R. 1909 requiring the Secretary of Veterans Affairs (VA) to use existing authorities to furnish health care at non-VA facilities for veterans who live more than 40 miles driving distance from the closest VA medical facility that furnishes the care sought by the veteran. The bill was referred to the House Committee on Veteran's Affairs.

---

## **Congressional Hearings**

### **House Committee to Hold Hearing on Commercial Motor Vehicle Safety**

The House Committee on Transportation and Infrastructure, Subcommittee on Highways and Transit Highways and Transit Subcommittee, Chaired by Sam Graves (R-MO), is holding a hearing tomorrow on "The Future of Commercial Motor Vehicle Safety: Technology, Safety Initiatives and the Role of Federal Regulation".

### **House Committee to Meet on 21<sup>st</sup> Century Cures Bill**

On Thursday, April 30, the House Energy and Commerce, Subcommittee on Health, Chaired by Rep. Joe Pitts, R-PA) will conduct a hearing on 21st Century Cures legislation. Testifiers will be Kathy Hudson, Deputy Director, Science, Outreach, and Policy, National Institutes of Health; Janet Woodcock, Director, Center for Drug Evaluation and Research, Food and Drug Administration; and Jeff Shuren, director, Center for Devices and Radiological Health, FDA.

## **Committees and Caucuses**

### **Congressmen Form Public Health Caucus**

Congressmen Rob Wittman (R-VA) and Gene Green (D-TX) have announced the formation of a bipartisan Congressional Public Health Caucus in the U.S. House of Representatives. This caucus' creation is especially timely with the ongoing Ebola and measles outbreak response, a number of emerging infectious diseases, public health preparedness for violent spring and summer storms, and the constant surveillance of our food supply to stop deadly outbreaks before they occur.

### **Lawmakers Establish Bipartisan Family Support Caucus**

Senators Kelly Ayotte (R-NH), Michael Bennet (D-CO) and Representatives Diane Black (R-TN), and Lujan Grisham (D-NM) have created the bipartisan and bicameral Assisting Caregivers Today (ACT) Caucus. These four Members will co-chair the caucus and seek to inform, educate, and motivate other Members regarding family caregivers. The launch event featured the release of findings from a new AARP poll on family caregiving, which found that 77 percent of registered voters over 40 think that Congress should take action to improve resources for family caregivers.

This update was prepared by:  
**Susan L. Vaughn**, Director of Public Policy, [publicpolicy@nashia.org](mailto:publicpolicy@nashia.org)  
**William A.B. Ditto, MSW**, is Chair of the NASHIA Public Policy Committee  
**Rebecca Wolfkiel** is Governmental Relations Consultant, [rwolfkiel@ridgepolicygroup.com](mailto:rwolfkiel@ridgepolicygroup.com)

Like us on Facebook 

*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.*

[www.nashia.org](http://www.nashia.org)