



FAMILY VOICES[®]

Washington DC Update
June 13, 2018

GREETINGS FROM WASHINGTON!

It has been a sad couple of weeks with respect to news about suicide. Not only have prominent citizens taken their lives, but the Centers for Disease Control and Prevention (CDC) issued a report showing that the suicide rate has increased in almost every state. (More below.) Please share the following information:

National Suicide Prevention Hotlines:

Talk: **1-800-273-8255 (1-800-273-TALK)**

Chat: www.suicidepreventionlifeline.org

Text: Text **HOME** to **741741** to communicate with someone via text

Happening in DC: Congress has a fair amount on its plate. It is developing the 12 appropriations bills needed to fund the government in fiscal year 2019, which begins on October 1. The House has passed a “rescissions” bill to take back funds from already-funded programs, including CHIP, but its future in the Senate is unclear. * The Senate Finance Committee and the full House are working on opioid legislation. * The Center for Medicaid and CHIP Services (CMCS) released a Medicaid/CHIP “scorecard” and also released information for states about how they can use Medicaid to address Neonatal Abstinence Syndrome. * The administration had decided not to defend a challenge to the ACA in a federal district court, arguing that protections for people with pre-existing conditions should be discontinued. And...

June is Men’s Health Month

For Dads: Happy Father’s Day!

For all men:

[5 Tips to Improve Men’s Health](#) (from TRICARE)

[Men’s Health Month Resources](#) (from the Military Health System)

[Men’s Health Resource Center](#) (from the [Men’s Health Network](#))

CORRECTION – More time to comment about service animals on airplanes: The May 31 Washington Update had incorrect information about an “[Advance Notice of Proposed Rulemaking](#)” concerning service animals on airplanes. The **comments are due on July 9** (rather than June 7), and can be submitted [here](#). For details, see “Your Input Sought,” below.

UPCOMING WEBINARS AND CALLS

NEW [Grants Education and Technical Assistance Webinar Series for Tribes, Tribal Organizations, Indian Health, Tribal and Urban Indian Health Programs](#)

Wednesday, June 13, 1:00-2:30 ET

Health Resources and Services Administration

NOTE: These webinars are held on the second Wednesday of every month, 1:00-2:30 ET

NEW [Public Charge and the Foreign Affairs Manual: What Advocates Need to Know](#)

Tuesday, June 19, 2:00-3:00 ET

Catholic Legal Immigration Network, Inc. (CLINIC) and Immigrant Legal Resource Center

[[Information about changes to the State Department Foreign Affairs Manual](#); see below for an explanation of the “public charge” issue.]

[An Overview of the NIH All of Us Research Program](#)

Thursday, June 21, 1:00-2:00 ET

Mid-Atlantic Regional Health Equity Council

NEW [Disability Inclusion: NIH All of Us Research Program](#)

Thursday, June 21, 2:00-3:00 ET

Friends of the National Center on Birth Defects and Developmental Disabilities (NDBDDD)

[For disability accommodations email [Anna Costalas](#) or call 301-588-8252.]

NEW [Approach to Neurologic Symptom Management in Children at the End of Life](#)

Thursday, June 21, 3:00-4:00 ET

Coalition for Compassionate Care

NEW [First 1,000 Days in New York Medicaid](#) (about New York’s [First 1000 Days on Medicaid Initiative](#))

Tuesday, June 26, 12:00 ET

Georgetown Center on Children and Families (CCF)

NEW [Nationwide Analysis of Guidelines-Based Asthma Care Coverage and Barriers to Care in Medicaid](#)

(Will include updated data on asthma care coverage in all 50 states, the District of Columbia and Puerto Rico.)

Tuesday, June 26, 3:00-4:00 ET

American Lung Association

[Estate Planning for Special Needs](#)

Wednesday, June 27, 12:00-1:15 ET

The Parents’ Place of Maryland (Maryland Family-to-Family Health Information Center)

[NEW A Conversation on Models of Care Delivery for Children with Medical Complexity](#)

Thursday, June 28, 1:00-2:00 ET

Lucile Packard Foundation for Children

[This webinar will include a discussion of the article, [Models of Care Delivery for Children with Medical Complexity](#), and audience Q&A, so it is recommended that participants read the article ahead of time. For more information, click [here](#).

[NEW Youth, Young Adult, & Parent Engagement](#)

Thursday, June 28, 3:00-4:00 ET

Got Transition

[See archives of [earlier webinars in this series](#).]

THE COURTS

Lawsuit Challenging the ACA

In February, Texas and 19 other states asked a federal district court in Texas to invalidate the Affordable Care Act (ACA), based on the argument that the ACA is “legally impossible” after enactment of the law that set the penalty for not having insurance at zero, effectively repealing the “individual mandate.” On June 7, the administration filed a brief on the side of Texas, contending that the protections for people with pre-existing conditions (guaranteed issue and community rating) are unenforceable without the individual mandate, although other aspects of the law can remain. California and 16 other states have been allowed to join the suit in defense of maintaining the ACA as is. Six major physician groups, including the American Academy of Pediatrics, issued a [joint statement](#) urging the Department of Justice to reconsider its position on the case. See [Trump Administration Court Filing Threatens Coverage for Preexisting Conditions](#) (post in Commonwealth Fund blog “To the Point,” 6/8/18).

THE ADMINISTRATION

Separation of Immigrant Families

You may have read in the news that administration is separating immigrant children from their parents when they have entered the country illegally. In the past, most illegal-entry cases were handled in immigration courts, but now the administration is prosecuting the adult immigrants criminally. Accordingly, they are held in federal jails, where they cannot have their children with them. In these cases, the children are transferred from the custody of Immigration and Customs Enforcement (ICE) to the Department of Health and Human Services (HHS). HHS is then responsible for placing the children with relatives or in foster care or group homes. According to Attorney General Jeff Sessions, the administration will have a zero-tolerance policy for illegal entries into the US in hopes of deterring attempts to enter. See [Sessions Defends Separating Immigrant Parents and Children: ‘We’ve Got to Get This Message Out’](#) (Washington Post, 6/5/18). For more detailed information, see [The Trump Administration’s Separation of Families at the Border, Explained](#) (Vox.com, 6/11/18).

School Safety Commission

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After the school shooting in Florida, the president appointed a [Federal Commission on School Safety](#), headed by U.S. Secretary of Education Betsy DeVos and composed of the Attorney General and the Secretaries of Education, Health and Human Services, and Homeland Security.

The Commission held the first in a series of public listening sessions on June 6. (See the archived listening session [here](#).) The Commission is taking public comments at safety@ed.gov. It should be helpful to inform them about the importance of taking CYSHCN into account when developing safety and evacuation plans (for example, anxiety reactions, or limitations on mobility, hearing, or comprehension) and post-event counseling.

Drug Prices

[Trump officials meet with drug companies to push for voluntary price cuts](#) (Politico, 6/11/18)

CONGRESS

House Approves Cut in CHIP Contingency Fund

On June 7, the House voted to pass the “rescissions” measure proposed by the president in May. (See the [May 9 Update](#) and the [May 31 Update](#).) The 210-206 vote was largely along party lines, with all Democrats in opposition. The bill would cut \$7 billion from the budget of the Children’s Health Insurance Program (CHIP), but about \$5 billion of that was not available to spend anyway. The other \$1.9 billion would be taken from the Child Enrollment Contingency Fund, which provides extra CHIP funding to states that experience an unexpected surge in CHIP enrollment. About \$500 billion would remain in the fund. As reflected in [this blog post](#) from the Georgetown Center for Children and Families (CCF), child health advocates are concerned about reducing a fund intended, by definition, for use in unexpected circumstances. It is unclear what will happen with this legislation in the Senate. See [Spending Cuts Package Faces Uncertain Senate Fate](#) (Roll Call, 6/8/18).

Opioid-Related Legislation

This week the House is beginning a two-week process to take up 57 opioid-related bills that were approved by the House Energy and Commerce Committee. Ultimately, the House bills are expected to be consolidated before being sent to the Senate. On Tuesday, the Senate Finance Committee [took up](#) opioid-related legislation, [The Helping to End Addiction and Lessen \(HEAL\) Substance Use Disorders Act of 2018](#). The Senate Committee on Health, Education, Labor and Pensions approved opioid-related legislation earlier in the year.

Medicaid and CHIP legislation in House opioid bill

The opioid legislation being considered in the House includes some bills amending Medicaid and CHIP that are not directly related to the opioid problem, including the following of pertinence to children:

- **H.R. 4998, the Health Insurance for Former Foster Youth Act**, to ensure that former foster youth receive Medicaid coverage if they move to a different state and to direct the Centers for Medicare and Medicaid Services (CMS) to publish guidance on how states can remove barriers, track coverage status, and conduct outreach to this population.

See [Congress Proposes Fix to Provide Medicaid for Former Foster Youth Up to Age 26](#)

(Georgetown Center on Children and Families, 6/4/18).

- **H.R. 1925, the At-Risk Youth Medicaid Protection Act of 2017**, to require state Medicaid programs to restore Medicaid coverage upon release of a juvenile who was in detention without requiring a new application unless the individual no longer meets the eligibility requirements.
- **H.R. 3192, the CHIP Mental Health Parity Act**, to require state Children’s Health Insurance Programs (CHIP) to cover mental health benefits on par with other benefits.
- **H.R. 5789**, to provide for Medicaid coverage protections for pregnant and postpartum women while receiving inpatient treatment for substance use disorder or suffering from postpartum depression.

MEDICAID AND CHIP NEWS, INFORMATION AND RESOURCES

CMS “Scorecard” for Medicaid and CHIP

As explained in this [CMS press release](#), on June 4 the Centers for Medicare and Medicaid Services (CMS) released its first [Medicaid/CHIP Scorecard](#), which is intended to provide more information about the Medicaid and CHIP programs to the public. The scorecard includes measures voluntarily reported by states, and federally reported measures in three areas: state health system performance; state administrative accountability; and federal administrative accountability. See the [CMS Fact Sheet on Medicaid and CHIP Scorecard](#), and [commentary](#) in a Georgetown Center on Children and Families blog post.

Neonatal Abstinence Syndrome: A Critical Role for Medicaid in the Care of Infants

On Monday, the Center on Medicaid and CHIP Services (CMCS), of the Centers for Medicare and Medicaid Services (CMS), released an [Informational Bulletin](#) (PDF, 11 pp.) for state Medicaid programs regarding the role that Medicaid can play in treating neonatal abstinence syndrome (NAS). See also [CMS releases guidance to states on using Medicaid to address opioid crisis](#) (The Hill, 6/11/18).

Electronic Visit Verification – Resources

- [CMCS: Frequently Asked Questions on Electronic Visit Verification \(EVV\) Systems](#)
- [CMCS Informational Bulletin: Electronic Visit Verification](#)
- [Electronic Visit Verification: Implications for States, Providers, and Medicaid Participants](#) (National Association of States United for Aging and Disabilities)

TRICARE

[Keep Your DEERS Information Up To Date](#)

If your family is expected to experience a Qualifying Life Event (QLE), including a relocation, it is important to update information in the Defense Enrollment Eligibility Reporting System (DEERS). (From TRICARE Benefit Update, 5/30/18.)

WORTH REPEATING: [Seeking Referrals or Prior Authorizations for Specialty Care with TRICARE.](#)

Under some TRICARE programs, patients may need a referral or prior authorization from their Primary Care Manager (PCM) to seek care from a specialty provider. (From TRICARE Benefit Update, 5/24/18.)

OTHER NEWS & INFORMATION

CDC Report on Suicide Statistics

From the [CDC press release](#) of June 7: “Suicide rates have been rising in nearly every state, according to the latest [Vital Signs](#) report by the Centers for Disease Control and Prevention (CDC). In 2016, nearly 45,000 Americans age 10 or older died by suicide. Suicide is the 10th leading cause of death and is one of just three leading causes that are on the rise. Suicide is rarely caused by a single factor. Although suicide prevention efforts largely focus on identifying and providing treatment for people with mental health conditions, there are many additional opportunities for prevention.” The full [Vital Signs report](#) includes state-specific statistics. North Dakota experienced the most dramatic increase in its suicide rate – 57.6 percent from 1999 to 2016. Nevada was the only state that experienced a rate decrease (one percent) during this period.

OTHER RESOURCES

WORTH REPEATING:

[New Law Helps States Pay for Mental Health and Substance Abuse Services with Federal Foster Care Funds](#) (National Academy for State Health Policy, 5/29/18)

YOUR INPUT SOUGHT

[Listed in order of due date.]

Transparency of Hospital Charges to Prevent “Surprise Medical Bills”

Comments due June 25

In a [proposed rule](#) on Medicare hospital payments, CMS included a request for public comments “regarding barriers preventing providers from informing patients of their out of pocket costs; what changes are needed to support greater transparency around patient obligations for their out of pocket costs; what can be done to better inform patients of these obligations; and what role providers should play in this initiative.” See this CMS [fact sheet](#). The precise questions on which comments are sought can be found [here](#) and [here](#). For more details, see the [April 26 Washington Update](#). Comments can be submitted at <https://www.regulations.gov/document?D=CMS-2018-0046-0002>.

Traveling by Air with Service Animals [*corrected* from May 31 Update.]

Comments due July 9

On May 23, the Department of Transportation (DOT) published an [Advanced Notice of Proposed Rulemaking \(ANPRM\)](#) regarding regulations of service animals under the Air Carrier Access Act (ACAA). The Department simultaneously issued an [Interim Statement of Enforcement Office Priorities](#) about how it plans to target enforcement of the Act with respect to service animals in airplane cabins until the regulations are revised. According to the Statement: “Airlines are expected to continue to comply with the existing service animal requirement which allows U.S. airlines to deny transport only to certain unusual service animals such as snakes, other reptiles, ferrets, rodents, and spiders.” The Department is accepting public comments on the ANPRM, and has specifically asked for feedback on [ten questions](#) related to topics such as documentation required by passengers, leash/harness requirements, and how to safely transport large service animals. The comments are due **on July 9**, and can be submitted [here](#).

OF POSSIBLE INTEREST

[What Hurricane Maria’s Death Toll Reveals about Health Care in Puerto Rico](#) (Harvard Business Review)

[Children with Autism Left Behind by Low Medicaid Rates](#) (Pew Foundation’s Stateline, 6/12/18)

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We would love to hear any suggestions you might have about how to make the Update more useful to you. Does it provide the right amount of information? What parts are helpful and not so helpful? Please let us know!

And, as always, please feel free to contact us with any questions. Comments and questions can be directed to jguerney@familyvoices.org.

Yours truly,
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Director of Public Policy
Family Voices

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