



FAMILY VOICES[®]

Washington DC Update
May 29, 2019

Greetings from Washington! Congress is currently taking its Memorial Day recess to visit with constituents at home. Before they left town, however, there was lots of activity in the Capitol. Bipartisan bills were introduced in both the House and Senate to extend funding for Family-to-Family Health Information Centers for an additional five years (through federal FY 2024). The House passed a health care bill intended to lower drug prices and roll-back some of the administration's changes in ACA regulations. Key Senators issued a discussion draft of a wide-ranging bipartisan bill to address surprise medical bills and health care costs. The Senate passed a disaster-relief package, but it is stalled in the House.

VISIT YOUR MEMBERS OF CONGRESS: Congress (House and Senate) has a recess from May 28-31, meaning they will be at home in their districts/states to meet with constituents. To find out about events near you where you can see your elected officials and candidates, see the [Town Hall Project](#).

APPLY TO BE AN ACA COUNSELOR or NAVIGATOR – See the Affordable Care Act section, below for more information.

UPCOMING WEBINARS AND CALLS

Starting and Sustaining a Youth Advisory Board (continuation of series)

NEW Part 3: [Creating a Foundation for Success](#)

Thursday, May 30, 12:00-1:00 pm ET

Family Voices

[Descriptions, slides and recordings from previous sessions:](#)

Part 1: Youth Voices

Part 2: Turning Self-Advocates into Leaders

NEW [TRICARE Coverage for College Students and Young Adults](#)

Thursday, May 30, 1:00-2:00 pm ET

TRICARE (Military OneSource)

[Helpful Approaches to Navigating Sensory Sensitivities in the Community](#)

Wednesday, June 5, 12:00-1:00 pm ET

Vermont Family Network

NEW Serving Medicaid Beneficiaries Who Need Long-Term Services and Supports: Better Outcomes at Lower Costs

Wednesday, June 5, 12:00-1:30 pm ET

Mathematica

CONGRESS

Bipartisan House and Senate Bills Introduced to Extend F2F Funding

On May 17, Representatives [Mikie \(Michelle\) Sherrill](#) (D-NJ) and [Fred Upton](#) (R-MI) introduced the *Family-to-Family Reauthorization Act of 2019* ([H.R. 2822](#)). The bipartisan bill would extend funding for the grant program that funds Family-to-Family Health Information Centers (F2Fs) for an additional five years, through federal FY 2024, at the current level of \$6 million per year. (Read the [press release](#) issued by Rep. Sherrill’s office.) The bill has been referred to the House Committee on Energy & Commerce, which has jurisdiction over the F2F program and many other health programs.

On May 23, Senators Chuck Grassley (R-IA) and Robert Menendez (D-NJ) introduced the [Supporting Family-to-Family Health Information Centers Act](#) (bill number not assigned as of this writing). Like the House bill, their bill would extend F2F funding through federal FY 2024 at the current funding level. (Read the [press release](#) issued by Senator Menendez’s office.) The Finance Committee has jurisdiction over the F2F program in the Senate. Senator Grassley chairs that committee, and Senator Menendez is a long-time committee member. Family Voices will be encouraging other Members of the House and Senate to cosponsor these bills. The legislation is needed for continuation of the F2F program beyond the end of the current federal fiscal year (FY 2019).

Senate Bipartisan Bill on Health Care Costs

On May 23, the Chairman and Ranking Member of the Senate Committee on Health, Education, Labor & Pensions (HELP) – Senators Lamar Alexander (R-TN) and Patty Murray (D-WA), respectively – released a discussion draft of legislation titled the *Lower Health Care Costs Act of 2019*. The bill has five titles: Ending Surprise Medical Bills; Reducing the Prices of Prescription Drugs; Improving Transparency in Health Care; Improving Public Health; and Improving the Exchange of Health Information. Links to the bill summary and summaries of each title can be found in the committee [press release](#). See also [Bipartisan Senators Reveal Sweeping Health Care Package](#) (The Hill, 5/23/19); [A New Senate Health Package Includes Surprisingly Aggressive Drug Pricing Reforms](#) (STAT, 5/23/19). As reported in the [May 17 Update](#). It has been [reported](#) that Chairman Alexander is aiming to have the legislation considered by the committee in June and brought before the full Senate in July.

The committee is requesting comments on the Alexander-Murray [discussion draft](#). Comments must be submitted to LowerHealthCareCosts@help.senate.gov by 5:00 PM ET on Wednesday, June 5, to be considered.

Surprise Medical Bills

The Alexander-Murray discussion draft, discussed above, includes a title on surprise medical bills. As reported in the [May 17 Update](#), other bills or discussion drafts on this topic have been introduced in both the House and Senate. The various proposals differ in the ways that insurers and providers would get paid if the consumer is no longer “balance billed” for the difference between what the provider charges and the insurers pay. See [Dueling Surprise Bill Measures Were Introduced on Capitol Hill](#).

[Here's Where They Differ](#) (Fierce Healthcare, 5/16/19); [Providers, Insurers Parse What They Could Support—And What They Won't—In Surprise Billing Solution](#) (Fierce Healthcare, 5/22/19). Although there is great interest in this issue on the part of Congress and the president, figuring out payment issues may be difficult.

House Passes Health Care Bill

On May 16, the House passed the Strengthening Health Care and Lowering Prescription Drug Costs Act ([H.R. 987](#)). As reported in the [May 17 Update](#), the measure combined separate bills that had been approved by the Energy & Commerce Committee. The legislation would: rescind the administration's rule allowing the sale of "short-term, limited-duration" health plans; provide funding for the Affordable Care Act's Navigator program; restore funding for outreach to consumers about enrolling in health plans; provide funding to states for establishing their own marketplaces; and facilitate the production and marketing of generic drugs. See [The House's Big Bill to Lower Drug Prices and Shore up Obamacare, Explained](#) (Vox, 5/13/19). The measure to promote generic drugs had been supported on a bipartisan basis in committee, but only five Republicans voted for the final, larger bill because it would reverse some of the administration's Affordable Care Act (ACA) regulations. See [House Passes Legislation to Strengthen the ACA, Boost Generic Drugs](#) (Washington Post, 5/16/19); [House Vote Combining Drug, Health Law Bills Irks Republicans](#) (Roll Call, 5/16/19).

More on FY 2020 HHS Appropriations – Increase for Title V MCH Block Grant

As reported in the [May 17 Update](#), the House Appropriations Committee [approved](#), on a party-line vote, its federal fiscal year (FY) 2020 bill to fund the Departments of Labor, Health and Human Services, Education, and Related Agencies (known as the "Labor-HHS" bill). Included in the bill is an **increase in funding for the Title V Maternal and Child Health Block Grant – to \$705 million – \$27,300,000 above the fiscal year 2019 enacted level**, \$44,300,000 above the president's budget request, and seven million more than the \$698 million requested by the Maternal and Child Health Coalition. See a [summary](#) of the House Labor-HHS appropriations bill; the [bill text](#); and the [bill report](#).

Disaster Relief Bill – Includes Funds for Territories

The Senate passed a broad disaster relief package after Senate Majority Leader Mitch McConnell (R-KY), [told his colleagues](#) that they were not leaving town for the Memorial Day recess without passing it. See [Senate Passes Long-Delayed Disaster Relief Bill that Addresses Hurricanes, Flooding, and Fires](#) (The Weather Channel, 5/23/19). The Senate passed the measure on May 23 by a bipartisan vote of 85 to 8. The [House was expected](#) to pass the bill Friday, by voice vote, but a single House Member opposed it, so it could not pass in this manner. See [Texan Chip Roy Single-Handedly Stalls Disaster Legislation In Congress](#) (Texas Standard, 5/27/19). The bill may pass the House once the full body returns from recess, and the [president would likely sign it](#). The legislation had been delayed earlier because the president did not want to provide relief funds to Puerto Rico, while many in Congress did. The president also wanted the bill to include funding for the U.S.-Mexican border activities. The final bill *does* include funding for Puerto Rico and *does not* include the border funding.) [Deal Struck to Pass \\$19 Billion Disaster Relief Package Without Border Funds](#) (CNN, 5/23/19). The bill would provide nutrition assistance funding for both Puerto Rico and American Samoa. A [press release](#) from the office of Senator Menendez lists some of the relief measures for Puerto Rico. Read more about the bill on the [website of the Senate Appropriations Committee](#).

Child Abuse Prevention and Treatment Act

On May 20, the House passed the *Stronger Child Abuse Prevention and Treatment Act* ([H.R.2480](#)) by voice vote. The bill would reauthorize the Child Abuse Prevention and Treatment Act (CAPTA), which provides federal funding to states to prevent and address maltreatment. (See [fact sheet](#).)

[Grassley, Wyden Seek Insulin Cost Data from CMS](#)

(Finance Committee press release, 5/21/19)

Senate Finance Committee Chairman Chuck Grassley (R-IA) and Ranking Member Ron Wyden (D-OR) sent a [letter](#) on May 16 to Seema Verma, the Administrator of the Centers for Medicare and Medicaid Services. The letter asks for a broad set of data regarding insulin costs, an issue the two Senators have been [investigating since February](#).

MEDICAID NEWS, INFORMATION, AND RESOURCES

CMS Finalizes Rule to Prohibit Medicaid Third-Party Payments

On May 2, the Centers for Medicare and Medicaid Services (CMS) issued a [final rule](#) intended to protect Medicaid provider payments by prohibiting certain payments to third parties. As explained in the [CMS press release](#), the rule was based on a new interpretation of the statute:

“In 2014, CMS revised the Medicaid Provider Reassignment Regulation to provide for a new exception to the direct payment requirement for certain providers, which primarily include **independent in-home personal care workers**. [Emphasis added.] This new regulatory exception authorized a state to make Medicaid payments to third parties on behalf of certain providers. After further review, CMS has determined that the new exception created by the 2014 rule is not authorized by the statute and may have resulted in provider payments being diverted in ways that do not comport with the law. Therefore, CMS is finalizing the rule to remove this impermissible exception.” The rule goes into effect on July 5, 2019.

[Leading Children’s Health and Medical Groups React to Staggering Decline in Children’s Enrollment in Public Health Insurance Coverage](#)

(American Academy of Pediatrics Press Release, 5/7/19)

MEDICAID WAIVERS

REMINDER:

- Approved and pending Medicaid waiver applications can be found on [Medicaid.gov](#).
- The Kaiser Family Foundation regularly updates its state-by-state §1115 [Medicaid Waiver Tracker](#), and also provides related waiver [resources](#) and [definitions](#).

AFFORDABLE CARE ACT – NEWS, INFORMATION, AND RESOURCES

Open Season Announcement for Certified Designated Organizations - Live Application Link will be available June 12.

The Centers for Medicare & Medicaid Services (CMS) is inviting organizations that would like to become Certified Application Counselor Designated Organizations (CDOs) to apply during CMS’s Open Season beginning **June 12, 2019, and ending September 16, 2019**. In the Federally-facilitated Marketplace, CDOs oversee certified application counselors (CACs) who are trained and able to help consumers seeking health coverage options through the Marketplace. **Any organization seeking to**

provide CAC enrollment assistance to consumers for Plan Year 2020 must be a certified CDO. In order to be designated as a CDO, you must submit an online application and enter into an agreement with CMS. **If your organization completed the CDO refresh process last year and received a new CDO identification number and a welcome packet, then you do not need to reapply.** CDO Application technical assistance webinar recordings, user guides, and more can be found [here](#). For additional questions, contact CACQuestions@cms.hhs.gov.

Centers for Medicare & Medicaid Services Issues a Funding Opportunity Announcement for the Federally-facilitated Exchange Navigator Program

The Centers for Medicare and Medicaid Services (CMS) issued a Notice of Funding Opportunity (NOFO) for the Federally-Facilitated Exchange (FFE) Navigator Program, which funds Navigator Organizations to provide in-person, enrollment assistance for individuals seeking health coverage. The NOFO announces the same \$10 million annual level of funding as last year. The announcement also expands the period of performance from one year to two years in order to promote stability in the program and improve the consumer experience. The total available funding for the first 12-month budget period will be allocated among the 34 FFE states based on the size of the remaining, eligible uninsured population in each FFE state. A minimum of \$100,000 will be available to each eligible state. Changes in the 2020 Payment Notice also created new flexibility for the Navigator Program. Certain types of assistance, including post-enrollment duties, for FFE Navigators are now permissible, but not required. This change will provide grantees with more flexibility and allow them to allocate their grant funding based on the unique needs of their community. To view the Notice of Funding Opportunity (NOFO), visit: <http://www.grants.gov>, and search for **CFDA # 93.332**.

DOL Issues Additional Guidance On AHPs (Health Affairs blog, 5/15/19)

In response to a recent court decision invalidating its recent rule on association health plans, the Department of Labor issued new guidance on these “Association Health Plans.”

TRICARE

Struggling with a Substance Use Disorder? TRICARE Has You Covered (5/16/19)

As opioid overdose deaths continue to rise, the Department of Defense (DoD) continues to expand access to treatments for substance use disorder (SUD). This includes medication assisted treatment (MAT), and other mental health services.

Get to Know Your TRICARE Select Plan (5/22/19)

With TRICARE Select, you can choose your own TRICARE-authorized provider and manage your own health care. This means the plan is like a preferred-provider organization, or PPO plan. A primary care manager isn't assigned to you. For specialty care, you don't need a referral to see TRICARE-authorized specialty care providers. TRICARE Select differs from TRICARE Prime.

Download Your Region's TRICARE Health Matters Newsletter Today (5/21/19): When life changes for you and your family, your TRICARE health plan options may also change. In this newsletter, learn about TRICARE Qualifying Life Events, like moving, a child going away to college, or adding a new family member. Also, learn about referrals and authorizations, sun protection, and much more.

Download the latest East Region or West Region newsletter (2019 - Issue 2) at www.tricare.mil/publications.

- Sign up for TRICARE email updates at www.tricare.mil/subscriptions.
- Connect with TRICARE on Facebook and Twitter at www.facebook.com/tricare and www.twitter.com/tricare.

OTHER NEWS, INFORMATION, AND RESOURCES

From Federal Agencies

From the CDC:

[Help Your Child Cope](#)

Mental health plays an important role in physical health, school performance, behavior, and long-term quality of life. Therefore, it is important to keep children physically and mentally safe during and after a disaster

[Maternal Depression](#)

Moms and moms-to-be deserve the best – including the very best mental health. Depression during and after pregnancy is common and treatable. If you think you have depression, seek treatment from your health care provider as soon as possible.

From Benefits.gov:

Check Your Eligibility at <https://www.benefits.gov/categories>

Benefits.gov has launched a new feature to provide a quick and easy way to pre-screen eligibility for federal government benefits. Consumers can browse benefit categories, select the benefit of interest, and answer a few questions to check eligibility for the program. A results tab will return with information on the benefit's application process, contact information, and other benefits for which the consumer may be eligible. [Check out one of the top viewed benefits, the Supplemental Nutrition Assistance Program \(SNAP\)](#) to test the new feature.

From the Social Security Administration:

[Identifying a Mental Health-Friendly Employer](#) (including tips for transitioning to the workplace) (SSA blog, 5/23/19)

From Our Partners:

[State-Level KIDS COUNT Data Books in 2019](#)

The Annie E. Casey Foundation's [KIDS COUNT Network](#) — which spans all 50 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands — tracks the well-being of children and families in each state. As part of this work, many of the network's grantee organizations produce state-level publications. View the catalog of state-level data books and fact sheets released so far in 2019 to learn more about how children in your home state are faring.

[Leveraging CHIP to Improve Children's Health: An Overview of State Health Services Initiatives](#)

National Academy for State Health Policy

[Summary of State Law Requirements Addressing Language Needs in Health Care](#)

National Health Law Program (4/29/19)

[Making Sense of Medicare-For-All and Other Proposals to Expand Public Coverage](#)

Kaiser Family Foundation (KFF) (5/21/19)

This web briefing examines recent proposals to expand coverage and make health care more affordable, including a national Medicare-for-all plan, a public plan option, and Medicare and Medicaid buy-ins. A [recording of the web briefing](#) and a PDF version of the [slides](#) are now available. KFF also offers an [interactive side-by-side comparison](#) of ten health-coverage bills introduced in Congress this year.

[Medicaid Expansion Fills Gaps in Maternal Health Coverage Leading to Healthier Mothers and Babies - Report](#)

Georgetown Center for Children and Families (5/9/19)

There are also [social media posts and graphics](#) that can be used to promote the report.

[Addressing Trauma and Children's Mental Health through Child Psychiatry Access Programs: An Introductory Guide for State Health Advocates](#)

Community Catalyst

[Public Charge and Deportation FAQ](#)

Protecting Immigrant Families

WORTH REPEATING: [2019 State Snapshots on Children's Health Coverage](#)

Georgetown Center for Children and Families and the American Academy of Pediatrics (5/1/19)

These "[snapshots](#)" (fact sheets) show the numbers/percentages of children covered by Medicaid and CHIP in each state and DC. Nationwide, 39% of children are covered by Medicaid and CHIP; 49% are covered by employer-sponsored insurance; 5% are covered by Marketplace coverage; 2% have other coverage (e.g., TRICARE); and 5% are uninsured.

YOUR INPUT SOUGHT

NEW – Due June 5, 5:00 pm ET. Senate bill on health care costs.

The Senate Committee on Health, Education, Labor & Pensions (HELP) is seeking input on a [discussion draft](#) of the *Lower Health Care Costs Act of 2019*, authored by Committee Chairman Lamar Alexander (R-TN) and Ranking Member Patty Murray (D-WA). Comments must be submitted to LowerHealthCareCosts@help.senate.gov by 5:00 PM ET on Wednesday, June 5, to be considered.

NEW – Due June 21. HHS/Office of Intergovernmental and External Affairs (IEA): Call for nominations to serve on the [Secretary's Tribal Advisory Committee \(STAC\)](#). The committee seeks primary delegates and alternates for Albuquerque, NM and Billings, MT, as well as three (3) National At-Large Primary Delegates and one (1) National At-Large Alternate Delegate. All nominees must either be elected or appointed Tribal officials acting in their official capacity as elected officials of their Tribes.

For further information, please contact [Stacey Ecoffey](#).

Due June 21, 11:59 pm ET. Federal Inflation Measures for Poverty Thresholds

On May 7, the Office of Management and Budget (OMB) – part of the White House – issued a “[Notice of Solicitation of Comments](#)” about what consumer price index should be used to establish the “Official Poverty Measure,” which serves as the basis for poverty guidelines used to determine income-based eligibility for programs such as Medicaid and CHIP. Should OMB ultimately adopt a different inflation index, it could reduce the number of people eligible for these programs, and these reductions would become greater over time. See [White House Wants to Update Poverty Thresholds. It Could Affect Food Stamps and Medicaid Benefits](#) (Roll Call, 5/13/19). Comments are due on June 21 (11:59 PM ET), and can be submitted via [this form on Regulations.gov](#).

OF POSSIBLE INTEREST

[Medicaid Financing Cliff: Implications for the Health Care Systems in Puerto Rico and USV](#)

(KFF, 5/21/19)

[Has Your Insurer Denied a Medical Claim? Stand Up for Your Rights](#)

(STAT, 5/17/19)

[Lilly to Insulin Pricing Critics: Check Out Our 50%-Off Humalog Copy Instead](#)

(Fierce Healthcare, 5/22/19)

We at Family Voices 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! 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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