Legislative Update



June 2019

- 1. House Appropriations Committee passes FY 2020 Labor-HHS-Education spending bill
- 2. House passes health care bills that strengthen the Affordable Care Act
- 3. House passes Equality Act to ban LGBTQ discrimination
- 4. Health organizations urge HHS to withdraw proposed rule to undermine LGBTQ nondiscrimination protections under the Affordable Care Act
- 5. APHA supports public health infrastructure in the LIFT America Act

House Appropriations Committee passes FY 2020 Labor-HHS-Education spending bill with significant boost in funding for public health programs

On May 8, the House Appropriations Committee passed its version of the <u>fiscal year 2020 Labor-HHS-Education appropriations bill</u>. The bill, drafted by House Labor, Health and Human Services, Education, and Related Agencies Appropriations Subcommittee Chair Rosa DeLauro, D-Conn., and House Appropriations Committee Chair Nita Lowey, D-N.Y., would provide an \$8.5 billion increase for the U.S. Department of Health and Human Services, \$20.9 billion above the president's budget request. The Centers for Disease Control and Prevention would receive a \$937 million increase from FY 2019, and the Health Resources and Services Administration would receive a \$475 million increase. Increasing funding for CDC and HRSA is a priority for APHA in the 116th Congress.

The bill would provide funding for a number of APHA priorities, including an increase of \$5 million (for a total of \$15 million) for CDC's Climate and Health Program, which provides funding and technical resources to 16 states, two cities, three tribes and three territories to develop plans to better protect their communities from the health threats they face due to climate change. Additionally, for the first time in more than 20 years, the bill would provide funding to CDC to conduct firearm injury and mortality prevention research. The bill would provide both CDC and the National Institutes of Health with \$25 million each for firearm

injury and mortality prevention research. The bill also would restore critical funding for the ACA navigator program, a key component in driving down the number of people without health insurance. It also includes protective language to ensure no Title X funds can be used to enforce the Trump administration's recently finalized gag rule.

APHA <u>issued a statement</u> praising the bill and thanking DeLauro and Lowey for prioritizing public health. The bill was reported out of the subcommittee by voice vote. None of the Republicans on the committee voted in support of the proposal, and both the ranking member of the subcommittee, Rep. Tom Cole, R-Okla., and the ranking member of the full committee, Rep. Kay Granger, R-Texas, criticized some of the provisions in the bill and said the funding levels were unrealistic. The full House is expected to take up the bill beginning on June 12 when it will be packaged with the FY 2020 Defense Appropriations bill and three other FY 2020 spending bills when it is considered on the House floor.

House passes health care bills that strengthen the Affordable Care Act

In May, the House passed two bills that put provisions in place to strengthen the Affordable Care Act and roll back several of the Trump administration's efforts to weaken the ACA. On May 9, the House passed H.R. 986, the Protecting Americans with Pre-existing Conditions Act of 2019, by a vote of 230-183. This bill would revoke the Trump administration's recent guidance allowing states to seek waivers that threaten protections for people with pre-existing conditions. While the ACA made clear that access to health insurance should not be contingent on an individual's health status, in recent months the administration has made great efforts to weaken crucial protections for people with pre-existing conditions. In October 2018, the administration issued guidance that would allow states to use Section 1332 waiver authority to make sweeping changes to insurance coverage for their residents, including to promote the sale of non-ACA compliant policies and to establish competing marketplaces that are less-regulated. Ultimately, this new guidance would undermine ACA protections for people with pre-existing conditions by making it more costly and more difficult for this vulnerable population to obtain coverage. APHA urged all members of the U.S. House of Representatives to support H.R.986, and was pleased with this positive outcome.

On May 16, the House passed H.R. 987, the Strengthening Health Care and Lowering Prescription Drug Costs Act, by a vote of <u>234-183</u>. The bill includes several provisions that would strengthen access to comprehensive and affordable health care, including:

- Reinstate funding for consumer outreach, educational assistance, and the navigator program to help consumers understand their health care options and select the coverage that best fits their financial and medical needs.
- Rescind the administration's final rule that allowed for greater use and promotion of short-term health plans. These plans are not subject to the ACA's consumer protections, including protections for people with preexisting conditions and the requirement that plans cover essential health

- benefits, such as maternity care, prescription drugs and substance use disorder services.
- Provide states with funding to establish their own marketplaces, which would grant states the flexibility to transition from the federal exchange to their own state-based health exchanges. This would allow states to offer options tailored to their population's needs and to control their own enrollment period.
- End the tactics used by drug manufacturers to keep less expensive generic drugs off the market. This is a critical step toward lowering the cost of prescription drugs and reducing the number of individuals who cannot afford their prescription medications.

In a May 15 letter to the U.S. House of Representatives, <u>APHA urged support for this legislation</u>, citing the improvements it would put in place to enhance consumer awareness and increase access to health coverage that best meets consumer needs.

Unfortunately, it is unlikely the Senate will take up these bills, as Senate Majority Leader Mitch McConnell, R-Ky., has stated he has no plans to bring the bills to the Senate floor for a vote.

House passes Equality Act to ban LGBTQ discrimination

On May 16, the U.S. House of Representatives passed H.R. 5, the Equality Act by a bipartisan vote of 236-173. The Equality Act would prohibit discrimination based on sex, sexual orientation and gender identity in areas including education, housing, employment, public accommodations and facilities, federally funded programs, credit and jury service. In a letter to the House of Representatives supporting the bill, APHA Executive Director Georges C. Benjamin, MD, said the bill is essential to provide equal access to housing, employment, education, public places and other critical services that impact individual and community health for all Americans. The Equality Act would update U.S. laws to ensure that all LGBTQ individuals living in the United States are protected under our nation's non-discrimination laws. Unfortunately, it is unlikely the Senate will take up the bill, as Senate Majority Leader Mitch McConnell, R-Ky., has stated he has no plans to bring the bill to the Senate floor for a vote.

Health organizations urge HHS to withdraw proposed rule to undermine LGBTQ nondiscrimination protections under the Affordable Care Act

On May 24, the U.S. Department of Health and Human Services released a proposed rule to weaken nondiscrimination protections for lesbian, gay, bisexual, transgender and questioning individuals under Section 1557 of the Affordable Care Act. Section 1557's nondiscrimination protections assist some of the populations that have been most vulnerable to discrimination, including LGBTQ people, and help provide those populations equal access to health care and health coverage. Federal courts, including in the context of Section 1557, have recognized repeatedly over many years that sex discrimination includes discrimination based on gender

identity. The subsequent regulations promulgated under Section 1557 further clarify that discrimination based on gender identity and sex stereotyping is prohibited in health care coverage and access. The final rule was issued under the Obama administration in 2016.

APHA joined 29 other public health and medical associations in sending <u>a letter to HHS Secretary Alex Azar</u> urging him to reconsider plans to revise the Section 1557 regulations and to instead ensure that HHS adopts strategies to focus on better access to health services and improved health outcomes for the millions of LGBTQ people in the United States.

APHA supports public health infrastructure in the LIFT America Act

On May 15, House Energy and Commerce Committee Chairman Frank Pallone, D-N.J., introduced H.R. 2741, the Leading Infrastructure for Tomorrow's America Act. The bill would authorize funding for a broad number of efforts to strengthen the nation's infrastructure. Importantly, the legislation would authorize critical funding to strengthen our nation's public health infrastructure and data systems to support agencies and programs at the national, state, local, tribal and territorial levels to protect and improve the public's health.

The LIFT America Act would authorize \$3.75 billion over five years to improve core public health infrastructure at the Centers for Disease Control and Prevention and the nation's state, local, tribal and territorial health departments. These resources could be used for strengthening workforce capacity and competency, laboratory systems, health information systems, communications, financing and other key functions. The bill would also authorize \$500 million over five years for CDC and state, local, tribal and territorial health departments to bolster current and often antiquated capabilities related to information technology, data and data systems. APHA submitted a letter in support of the public health provisions contained in the bill and also emphasized that the public health infrastructure funding proposed in the legislation can only become a reality if Congress works in a bipartisan manner to raise the current caps for nondefense discretionary funding to provide appropriators with the resources they need to fund these important proposals.

Additional APHA advocacy news

Given the rapid pace of action in Washington, D.C., we wanted to highlight additional issues we have weighed in on recently. Those include:

- <u>Health organization letter</u> to the U.S. Senate in support of the International Climate Accountability Act
- Organization letter in support of the Comprehensive TB Elimination Act of 2019
- Health organization letter to the House Armed Services Committee urging the inclusion of the Burn Pits Accountability Act in the FY 20 National Defense Authorization bill

- Organization letter to House and Senate Appropriations Committee leaders requesting strong federal investments in FY 2020 to support efforts to reduce excessive levels of sodium in the school meal program and to support consumer-awareness campaigns for the updated Nutrition Facts label and menu labeling
- <u>Health organization letter</u> supporting H.R. 2339, the Reversing the Youth Tobacco Epidemic Act of 2019
- Health organization letter to the House Labor-HHS-Education appropriations subcommittee leaders in support of the House FY 2020 funding level for CDC's Racial and Ethnic Approaches to Community Health program
- Health organization letter to the Senate Labor-HHS-Education appropriations subcommittee leaders requesting \$76.95 million for the CDC's Racial and Ethnic Approaches to Community Health program in FY 2020
- <u>APHA comments to EPA</u> regarding the advance notice of proposed rulemaking on a training, certification and limited access program for commercial users of methylene chloride
- <u>APHA testimony</u> before the Subcommittee on Environment and Climate Change, House Energy and Commerce Committee, in support of H.R. 1603, the Alan Reinstein Ban Asbestos Now Act of 2019
- <u>APHA testimony</u> supporting increased FY 2020 funding for CDC and HRSA submitted for the record to the Senate Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies