Transitions and Beyond: The Public Health Community’s Plan for 2017

Matthew Rose, NMAC
The Administration
Secretary of HHS - Dr. Tom Price

- Representative from Georgia and current Chair of the House Budget Committee
- Empowering Patients First Act
  - Limits protections for people with pre-existing conditions if they don’t maintain continuous coverage
  - Age based tax credits
  - Little funding for high-risk pools
  - Repeals Medicaid expansion
- Medicare Privatization
CMS Administrator - Seema Verma

- President of Consulting Company
  - Designed the Indiana Medicaid Program
  - Assisted with Medicaid waivers in IA, OH, MI, TN, and KY
- Previously worked at ASTHO
OMB Director - Mick Mulvaney

- Representative from South Carolina
- Founding member of the Freedom Caucus
- Supports cutting government spending and a balanced budget amendment
Domestic Policy Council Chair - Andrew Bremberg

- Led HHS Transition
- Served as Policy Advisor and Counsel on Nominations for Mitch McConnell
- Chief of Staff, Office of Public Health and Science at HHS from 2007-2009
Domestic Policy Council Health- Katy Talento

- Began her career at Whitman Walker Health and is a trained epidemiologist
- Worked for Senators Brownback and Coburn, as well as the HELP Committee
- Very familiar with HIV issues
115th Congress
The New Congress

- Congressional make-up remains the same
  - Democrats gained seats in the House and Senate
  - Smallest freshman class in recent history

- Changes in Committees of Jurisdiction
  - Budget
  - Appropriations
FY2017 Appropriations

- Currently, there is a continuing resolution through April 28th

- Unclear what next steps are for Congress
  - Have indicated they would like to complete appropriations
  - Possible “Cromnibus” spending package
FY2018 Appropriations

- Issues to consider:
  - Debt Ceiling
  - Budget Reform
  - Sequestration
  - Spending Caps
    - Parity between defense and non-defense caps

- Congress has begin the appropriations process without a full Presidential budget
Budget Issues

- The President’s Budget would also eliminate parity between defense and non-defense spending cap increases and proposes significant increases to defense.

- There proposed targeted cuts of 50 million to CDC prevention in the FY17 budget and language around the block grants that remains clear FY18 skinny budget.

- It is unlikely that the President’s FY 2017 budget proposals will gain much traction among Republican leadership, and Democrats in Congress have already condemned the draconian cuts proposed for FY 2017 and forecasted for FY 2018.
Termed the “skinny budget,” the proposal would cut $54 billion in nondefense spending with $15.1 billion in proposed cuts to Health and Human Services (HHS) programs in FY 2018 alone and included $18 billion in proposed cuts to current FY 2017 funding that has yet to be finalized.
ACA State of Play

- Wholesale repeal of the ACA, in its entirety, is not possible because it would take a filibuster proof majority in the Senate (which Republicans don’t have).

- All eyes on the Republican use of the reconciliation process which started in January 2017
  - House and Senate passed reconciliation bill in early 2016 that would have eliminated funding provisions to support ACA subsidies and Medicaid expansion (vetoed by President Obama),

- Defense is working
  - The narrative of the repeal has change several times and helped to facture the republicans majority
ACA State of Play

- The Executive branch can take some immediate actions to weaken the ACA:
  - The Administration could refuse to appeal to a legal challenge to the cost-sharing reductions (House v. Burwell)
  - The Administration could refuse to monitor and enforce ACA protections in the same way the current Administration has done so
  - The Administration can re-write key ACA regulations governing things like benefits and non-discrimination requirements (this would have to go through notice and comment periods)
ACA State of Play

- President elect Trump and congressional Republicans have advocated a “repeal and replace” approach to ACA, but the details on what that means are vague:

  - What is President elect Trump’s position on ACA and health policy?
  - Do congressional Republicans repeal first and then replace or do things in tandem?
  - Will congressional Republicans amend ACA provisions instead of wholesale replace?
ACA scenarios  #1

- On the horizon: freestanding proposal, the AHCA, could come back. They are going to run into the same sort of roadblocks. It is not totally dead, but May-late April is when any action will come.
- There could be freestanding proposals, like Alexander-Corker’s bill to address places where there are no insurers that would allow subsidies for substandard plans.
Scenario #2 Medicaid changes

- PCC/Block, that would’ve fundamentally changed the matching structure to capped funding.
- It is not clear if Republicans will see need for offsets or pay-fors, but there will be pressure for them and Medicaid is clearly on the table.
- Initial thinking is this was when the Medicaid changes were going to come up, in the second round of budget reconciliation to serve as an offset.
- Could be other low-income programs like SNAP or low-income tax credits as well. Would only require 51 votes in reconciliation. They also need money to un-do the cuts from sequestration.
- R’s want to raise defense spending, D’s want to stop cuts to non-defense spending, they may look as Medicaid as an offset for these.
Scenario #3

- The third area where we could see is other must-pass legislation requiring 60 votes.
- One is extension of funding for CHIP and some Medicare provisions and funding for Community Health Centers expiring end of FY 2017.
- Offsets for these are smaller, not likely to see changes in structure there but could see some other things from the bill including community first choice cuts, changes in home equity limits for people with disabilities and seniors.
- Not clear if they will pursue entitlement cuts to raise the debt ceiling.
Intelligence share

- Ryan White
- Administration recognizes the importance of the Ryan White providers
- Congressionally there remains strong bipartisan support for the program
- Authorization language
Intelligence share

- CDC, HUD, NIH are all in the cross hairs
  - There are direct cuts in FY 2017 that are supposed to lead to deeper cuts in FY18
- ONAP ????
- National Strategy becoming national goals
Join the resistance
Get in involved

- Call toll free (866) 246-9371 to be connected with your representative's office.
- Join Protect our care coalition
- Resistbot, resistanceinyourpocket,
- HIV Action Day
- Toolkit from HIV groups community
- In District visits