

LCAO Health Committee Meeting Minutes

January 30, 2018

- **CR/Omnibus and Health Extenders**
 - Another CR after 2/8 is likely given still no deal on sequester relief. If Congress punts until March, they'll run into the debt ceiling. Senate Democrats seem willing to separate budget from immigration/DACA issues, but not House Dems. Not clear if agreement can be reached yet on caps/parity. Debt ceiling likely to be addressed in March. Medicare SHIP funding remains a budget concern.
 - Health extenders appearing likely to be included in 2/8 package, with bipartisan, bicameral support for making the exceptions to the therapy caps permanent, and funding for the low-income outreach. Issue continues to be offsets—the only we've seen are from the House Republican side and includes expanding income-related premiums and provider cuts. There is potential for the extenders to be decoupled. Need to keep pressure on Democratic senators in cycle this year.
 - 42 groups signed LCAO extenders letters sent January 24th: <http://www.lcao.org/letter-health-extenders-priorities-january-2018/>
- **Medicaid Money Follows the Person**
 - [EMPOWER Care Act \(S. 2227\)](#) introduced in December by Sen. Portman and Cantwell to extend MFP for 5 years. Sen. Brown (maybe Casey and Ernst) is cosponsoring. We are looking for a House companion, with Rep. Dingell (D-MI) interested in being a sponsor and Energy and Commerce Subcommittee staff looking into a Republican.
 - Hill visits continue to get more Senators on the bill and raise general awareness; Call in day was 2/1
 - ACA Medicaid HCBS spousal impoverishment protections expire December 31st this year, so we need to advocate on this issue as well.
- **BENES Act & Senate Aging Hearing**
 - Still looking for a vehicle to get the BENES Act through—possibly extenders. Feedback on the Hill has been positive.
 - 1/24 Senate Aging Committee hearing on “Turning 65” highlighted BENES Act and support for SHIP funding.
- **RAISE Family Caregivers Act signed into law**
 - Next steps are for the Administration to decide where it will house implementation. Will be opportunity for public input on Advisory Council. Quarterly meetings will be held, with an Annual Report due in 12 months, and strategy recommendations due in 18 months.
- **Medicaid Waivers & Work Requirements**
 - In January, CMS issued guidance on states implementing work requirements (10 states have applied) and approved Kentucky's 1115 waiver application, which includes work requirements, premiums, and lock-outs for the expansion population, and elimination of 3-months retroactive coverage, and dental and vision for most populations.
 - Concerns about work requirements for older adults < age 65 who have health conditions that keep them from working (taken early retirement, waiting for/don't qualify for SSDI)—especially intermittent disabilities; age discrimination results in older adults having a harder time finding work; also family caregivers—having to keep records; Burden of the paperwork on individuals and the system will mean some people who are eligible/exempt from work requirements will fall through the cracks
 - NHELP filed a lawsuit against CMS.
 - [Forbes article by Howard Gleckman: What Medicaid's Work Requirement Means For Seniors, People With Disabilities, And Their Caregivers](#)
 - Waivers also contain other concerning provisions (lock-out periods; eliminating retroactive eligibility)

- **Proposed Rules**
 - DOL NPRM on [Association Health Plans](#) (Comments Due 3/6); some LCAO orgs planning to comment; National Partnership for Women & Families organizing Template comments & Sign-on letter
 - HHS Office for Civil Rights NPRM on [Protecting Statutory Conscience Rights in Health Care](#) (Comments due 3/27); LCAO orgs planning to comment; will circulate any sign-ons or templates
 - CMS [2019 Call Letter](#) (comments due March 5th)

- **Follow up on CMS Strategies & Work Group**
 - Biggest threats to Medicaid & Medicare may be at the Administrative level this year.
 - Those interested in forming a CMS Work Groups will meet to discuss next steps and how to organize. Let Howard know if you're interested.

- **Legislative threats to Medicare, Medicaid, other programs**
 - It does not appear likely that Congress will pursue significant Medicare or Medicaid cuts under a reconciliation bill this year, though we need to remain vigilant. Medicaid, SSI, SNAP are all potential targets. Graham-Cassidy could still happen but may also see cuts to these programs through regular order. While Speaker Ryan continues to discuss "welfare reform" and work requirement legislation, the Senate does not seem to share his enthusiasm.
 - According to one source, Republican priorities this year will be infrastructure, immigration and defense.
 - Disaster aid and Medicaid funding for Puerto Rico & USVI are continuing concerns.
 - What might be used as offsets for an infrastructure bill?
 - Appetite for bipartisan marketplace stabilization? Alexander-Murray has a higher cost so unclear what the vehicle might be.
 - We might want to pursue opportunities with Democratic member to introduce bill to truly improve Medicare and Medicaid.

- Began discussion of **Health Committee Priorities** for this year, including messaging and education on programs, having more Administrative focus, possible speakers for LCAO meetings, meeting with Hill committee staff.

We meet the last Tuesday of the month at 3:30 pm. Our next meeting will be **February 27th** at 3:30.