



*James Firman, Chair*

**MINUTES**

**February 7, 2018**

**AFSCME – 1625 L Street NW**

1. Approval of the Minutes
  - Approved by voice vote.
2. Committee Reports
  - Community Services
    - FY18: Ongoing deliberations, expectation of additional CR(s).
    - Budget deal: Potential need for LCAO to respond in order to reiterate messages in December letter.
    - Messaging on effects of appropriations delays: Stories circulating on effects on Defense programs; to make sure NDD stories are heard, may do letter on harm with local examples, such as those now being shared by AAAs. Could be helpful in debate through March and FY19 debate. Will circle back to Committee depending on what transpires this week.
    - FY19: Planning FY19 budget request response, appropriations outreach.
    - OAA reauthorization: Discussed letter to educate Hill staff in April/May to connect with Older Americans Month and encourage local site visits.
    - OAA issue brief and fact sheet: Updated documents will be circulated for review and vote via email.
    - Hill briefing proposal: Discussed spring briefing on older adults' rights such as quality of life, liberty and independence, security; committee members volunteered to continue conversation.
    - Updates: Recap of Senate Aging hearing on "Turning 65: Navigating Critical Decisions to Age Well," Nourishing Our Golden Years Act strategy meeting, SCSEP Hill briefing, NDD United Town Hall.
    - Announcement: Senate Aging Committee LGBT Aging Cultural Competency Briefing Feb. 9 (flyer circulated).
  - Income Security
    - SSI overview and update: Kate Lang from Justice in Aging provided comprehensive overview of SSI and detailed potential threats this year.
    - SSI one-page: Draft circulated to Committee for review and edits.
  - Announcement: Alayna Waldrum shared news of Judy Chavis' sudden passing. Judy was with the American Association of Service Coordinators (AASC) for over 11 years, and additional details were provided on AASC's work.
  - Health
    - Extenders in House package: Includes MIPPA, therapy cap. home health add-on, but not BENES or MFP. Offsets controversial, like PPHF cut and lotto winnings policy. Also concern about home health payments, but includes Steve Gleason Act.
    - Budget deal: Concerns about pay-fors, even though may only be offsetting half.
    - RAISE Act: Signed into law; ACL will lead implementation.
    - Medicaid waivers: Need to weigh in related to pre-Medicare population. Talk of CMS workgroup to collectively weigh in with concerns.

- Discussion of enlisting Democrats to introduce bills to strengthen Medicare and Medicaid, like on expired spousal protections, dental care.
  - MedPAC: Nominations are up, Jack Hoadley term expires, working on letter/strategy to extend his term
  - Share Finance Committee letter soliciting input on opioids.
3. Guest Speaker: Frederick Isasi, Executive Director, Families USA
- Coverage defense: Have spent half their resources at national and state levels.
  - Health equity: Launched task force to look at transformation to move needle on equity but also cautionary tale. There is transformation that is making a difference but others that are really hurting people.
  - Transformation and value: Is a social justice issue. Looking where most of spending is occurring, but how badly the system works for those people (chronic conditions, people with disabilities, seniors). How use data to drive efficiency and improve services. Efforts going forward: how hold system accountable to work for all.
  - Elevated consumer voice: Stories move policymakers and cut through rhetoric. Report coming out with new analysis connecting dots between disparate groups and creating common narrative of people struggling to afford health care (minorities, rural-urban etc.)
  - Question: How might LCAO and Families USA work together going forward.
    - Answer: Not expecting a reconciliation fight, but fights in the states on work requirements, lifetime caps. Also looking to create strong public record on regulatory proposals, with litigation if proposals move forward. A (cont'd.): In 2018 cycle, very focused on c(4) efforts. Health care currently #1 concern of voters. Need to turn out the vote and hold people accountable. A (cont'd.): Setting agenda for 2019, 20, 21 now that that Hill fight dying down. What hold people accountable to? What core issues need focus in progressive agenda? Also redistricting and 2020 election.
  - Q: Building on interconnectedness theme: Waivers aren't seen as affecting seniors, but plaintiffs in Kentucky are in their early 60s and a lot of people affected are pre-Medicare. Want to raise up effect on pre-Medicare and not all can work longer. There's also the effect of the Indiana smoking ban on coverage.
    - A: People who can work, do work. Research twisted – see Verma op ed. More important: get services so can re-enter the workforce. Really about redefining the social contract. AARP has done good job of telling story of son or daughter on Medicaid – would be liability for senior parent if that coverage didn't exist.
  - Q: Any polling, focus groups on what work language works best?
    - A: For 2018 cycle, don't make it about work, but make it about President and Congress taking aware health care. We lose people when we go into side issues. People should have access to care.
4. Guest Speaker: Jennifer N. Higgins, Partner, Chamber Hill Strategies
- Debates have moved from ACA to extenders, government funding. Need Democratic votes, but GOP caucus also split. Conservatives hate omnibus, short term CRs, immigrant amnesty.
  - Democrats have tried to keep issues together to get maximum leverage: caps. CHIP and extenders, immigration, disaster relief. GOP messaging at last shutdown worked: Dems care more about immigrants than veterans.
  - Senate expected to send back global deal with caps (\$150 billion for each side), disaster relief, support for underfunded pension plans, tax modifications, debt limit. Health care provisions in House package is likely what acceptable for Senate, though might add a few

- things. Of the Democrats' list, CHIP got peeled off, and same now occurring with others, so not much left for leverage except immigration.
- Bigger picture for rest of 2018: Relatively quiet, but still worried more about risks in health care not opportunities.
  - FY19 budget request: Expect similar to FY18, invest in infrastructure, making cuts. Will still see acknowledgement of tough choices – Mulvaney likes red pen. Remains to be seen how Congress responds.
  - Few changes for infrastructure, entitlement reform, Graham-Cassidy. Will be continued talk about infrastructure but not sure how to pay for it. Some members, Administration still want to take on Medicaid.
  - Opioids: Every committee will be saying it's the top priority. Focus more on treatment than prevention. Not much emphasis on pharmaceutical industry or prescribers.
  - ACA reinsurance, stabilization: Seeing more possibilities. Not going to be in latest CR, but could be on omnibus (Alexander hope). Prop-up for states to create reinsurance plans.
  - Rest of year: Talking points all about tax cuts going into November. Expect more retirements in next 4-6 weeks. Democrats only need 24 seats, but GOP has closed the gap since Dec. so need to add caveats: tax reform passed, generic ballot no longer double digits, President's polling up.
  - Expect more retirements in next 4-6 weeks. More have resigned during their term (12) than in past 100 years. Eleven Committee chairs leaving, including Hatch. In 2019, there will be new chairs who have never led committees, seven new Ways & Means members, so will have to educate.
  - Going forward: Pay attention to HHS, especially Medicaid and Medicare payment proposals, and using RFIs to solicit feedback and then pushing back with policy implementation. Expect more waivers, a revised Medicaid mega-reg late summer. State Medicaid waiver applications all about how long people can have coverage.
  - Q: Is there a vehicle for items that didn't get included with extenders (BENES Act, MFP)?
    - A: Senate Dems still negotiating for package to send back to House, or additional items in omnibus. Likely to be lame duck session to wrap up items – don't expect a lot of activity between March 22 and November election, except possible opioids package.
  - Q: Could budget process changes be on the table?
    - A: Could be low-hanging fruit now. Not sure what items. Could be way for GOP to talk about fiscal restraint if no entitlement reform.
  - Q: Is prescription drug pricing just talking point of President?
    - A: Not clear what it looks like. Government not going to negotiate prices. FDA might try to look like doing something, with generics, biosimiliars approvals. When get past opioids, will hear about reducing health care costs as get closer to election.
  - Q: Please talk more about Medicaid mega-reg.
    - A: There are only 3-4 states that don't do managed care with Medicaid. HHS, GOP wants to inject managed care principles into Medicaid across the board. Look at MHPA for talking points; haven't seen GOP talking points about what they didn't like about reg.
  - Q: FY19 appropriations done before or after election if budget deal?
    - A: Good question, but still think after election.
  - Q: Who will be the next Finance Chair?
    - A: Many saying Crapo. Grassley could opt to take 2 years left in Finance term.

5. Budget request response

- Input requested on items of concern beyond discretionary cuts and what best timing for response might be.
- Community Services planning on response reiterating priorities. Suggested LCAO statement if possible.

6. Announcements

- Introductions: Vivian Nava-Schellinger, NCOA Manager of National and Community Partnerships.
- National Association of Social Workers: See postcard handout on June 20-23 annual conference. There is an aging track. Attendance, ads, exhibits welcome.
- Center for Medicare Advocacy: 5th Annual National Voices of Medicare Summit is Mar. 22; flyer shared in Jan. 19 News & Notices.
- Reframing Aging: Preview of presentation following LCAO meeting