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WASHINGTON UPDATE

ENA Government Relations

June 15, 2017

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Trump Budget Eliminates Funding for Emergency Care for Kids

A day after President Trump released the details of the Administration's fiscal year 2018 budget, the Emergency Nurses Association released a [statement](#) with 10 other health organizations opposing the proposed elimination of funding for the federal Emergency Medical Services for Children (EMSC) program. Funding for the EMSC program has remained relatively flat since 2010, and was funded in fiscal year 2017 at just over \$20 million. The statement was released on May 24, coinciding with Emergency Medical Services for Children Day. All told, the budget would reduce spending on safety-net programs like EMSC and Medicaid by more than \$1 trillion over 10 years.

“For more than 30 years, the EMSC program has worked to improve the quality of care children receive, no matter where they live or require treatment,” said the statement opposing the elimination of the program. “Children are not just little adults — emergency services and equipment like ventilation and airway equipment, defibrillators, and life-saving drugs need to be sized and dosed especially for children.” While the president's budget acts as a roadmap for the Administration's priorities, it does not carry the weight of law. All federal spending decisions, including specific cuts to programs must be approved by Congress.

The EMSC program is the only federal program devoted to improving pediatric emergency care, including in pre-hospital EMS systems and hospital emergency departments. It funds critical research that aims to improve screening of children in the emergency department for substance use such as opioid dependency as well as the screening of teens at risk for suicide that may be linked to substance use or mental health disorders. ENA has issued an [Action Alert](#) encouraging EN411 Legislative Action Network members to write their members of Congress opposing the elimination of funding for EMSC.

As Summer Begins, CDC Report Recalls Zika Risks

Earlier this month, the Centers for Disease Control and Prevention (CDC) released a report on a large study of the rate of birth defects for each trimester in which the mother became pregnant. The study confirmed earlier studies that a first trimester infection puts the fetus or child at greatest risk for developing related birth defects. In women with a confirmed Zika infection during the first trimester,

8% had a baby or fetus with Zika-related birth defects. That fell to 5% in the second trimester and 4% in the third.

As of June 7, there have been 627 Zika cases reported in the United States and its territories during 2017. All but one of the 125 cases in the United States were attributable to travel, while all 502 cases in U.S. territories were thought to have been acquired from local mosquitoes. The CDC continues to advise women who are pregnant or who may become pregnant to take precautions if living in or visiting south Florida, Texas, the U.S. territories, or anywhere with hot and humid conditions that are prone to mosquito infestations. As of June 15, Brownsville in Cameron County, Texas, is the only designated Zika cautionary area in the United States. Miami-Dade County in Florida was removed from this list June 2.

Senate Republicans Hope for Healthcare Vote by July 4 Recess

Senate leaders are pushing to complete and vote on its version of a Republican healthcare bill before the July 4 recess so they can move onto other business, such as tax reform. Getting 50 votes needed to pass it — with Vice President Mike Pence breaking the tie — may prove difficult, however. Republicans currently control 52 seats and important differences on any replacement legislation remain between moderates and conservative members.

As passed in the House, the bill includes provisions that would roll back the expansion of Medicaid that was included in the Affordable Care Act (ACA), as well as fundamentally change how Medicaid operates and how states receive funding from the federal government. Overhauling Medicaid, however, may prove to be a difficult proposition. The House bill proposes to freeze federal funding for the Medicaid expansion in 2020, then gradually phase-out the expanded program. Some Republican senators are considering a more gradual phase-out, and some say they won't support a phase-out at all. There also is little agreement on how to lower the cost of insurance premiums and deductibles while ensuring access to coverage, a key goal of Obamacare repeal and replace efforts. According to Republican leadership in the Senate, the bill — which passed the House of Representatives on May 5 — will need considerable changes before it can be brought to the floor for a vote.

With Administration Officials Suggesting its Obsolescence, Many Wonder — ‘What is the CBO?’

A renewed effort on Capitol Hill to attack health care policy reform has once again raised the profile of the sometimes-mysterious Congressional Budget Office (CBO). Since 1975, the CBO has produced independent analyses of budgetary and economic issues to support the congressional budget process and also provided cost estimates for proposed legislation. Over the past 40 years, its analyses and projections have been both lauded and criticized — by Republicans and Democrats alike, usually depending on which party is in power and proposing the legislation in question.

Supporters argue that while CBO estimates are rarely perfect, the projected trends are usually correct and that the CBO provides useful analysis to lawmakers. Detractors question the need for CBO's existence at all. The latest being White House Office of Management (OMB) Director Mick Mulvaney, who recently told a media outlet that the days of CBO's authority "has probably come and gone." Mulvaney was reacting to the most recent CBO projection that the current version of the Republican healthcare bill, the [American Health Care Act of 2017](#) (H.R. 1628), will result in 23 million Americans losing health insurance (the original version of the bill would have resulted in slightly more—24 million—losing healthcare, the CBO reported).

Federal Advocacy Update: ENA Priority Legislation

Following another successful Day on the Hill in May, we wanted to begin providing monthly updates on the status of bills that are of priority concern or focus for ENA. We will utilize this section to provide basic information such as new cosponsors that have signed on in the last month or updates on the status of the bill's movement through Congress.

This month, we have provided a listing of all current cosponsors (except for H.R. 304, which passed the House in January and will no longer be adding cosponsors). Beginning in July, we will only list new cosponsors added since the last Washington Update.

Protecting Patient Access to Emergency Medications Act

[House \(H.R. 304\)](#)

Status: Passed House on January 9, 2017

[Senate \(S. 916\)](#)

Cosponsors	Party/State	Date Added
Sen. Bennet, Michael F.	[D-CO]	4/24/2017
Sen. Blunt, Roy	[R-MO]	4/24/2017
Sen. Franken, Al	[D-MN]	4/24/2017
Sen. Alexander, Lamar	[R-TN]	4/27/2017
Sen. Murkowski, Lisa	[R-AK]	4/27/2017
Sen. Murray, Patty	[D-WA]	5/1/2017
Sen. Boozman, John	[R-AR]	5/9/2017
Sen. King, Angus S., Jr.	[I-ME]	5/22/2017
Sen. Hoeven, John	[R-ND]	6/13/2017

Status: Passed HELP Committee on May 1

MISSION ZERO Act

[House \(H.R. 880\)](#)

Cosponsors	Party/State/Dist.	Date Added
Rep. Green, Gene	[D-TX-29]	2/6/2017
Rep. Hudson, Richard	[R-NC-8]	2/6/2017
Rep. Castor, Kathy	[D-FL-14]	2/6/2017
Rep. Ruppertsberger, C. A. Dutch	[D-MD-2]	4/3/2017
Rep. Guthrie, Brett	[R-KY-2]	4/3/2017
Rep. Kilmer, Derek	[D-WA-6]	4/3/2017
Rep. Norcross, Donald	[D-NJ-1]	5/4/2017
Rep. Pocan, Mark	[D-WI-2]	5/16/2017
Rep. Shea-Porter, Carol	[D-NH-1]	5/16/2017

Rep. Cohen, Steve	[D-TN-9]	5/16/2017
Rep. Heck, Denny	[D-WA-10]	5/16/2017
Rep. DeFazio, Peter A.	[D-OR-4]	5/16/2017
Rep. Vela, Filemon	[D-TX-34]	5/16/2017
Rep. Walz, Timothy J.	[D-MN-1]	5/22/2017
Rep. Barr, Andy	[R-KY-6]	5/22/2017
Rep. Pascrell, Bill, Jr.	[D-NJ-9]	6/7/2017
Rep. Harper, Gregg	[R-MS-3]	6/7/2017

[Senate \(S. 1022\)](#)

Cosponsors	Party/ State	Date Added
Sen. Duckworth, Tammy	[D-IL]	5/3/2017
Sen. Cornyn, John	[R-TX]	5/3/2017

Mental Health and Substance Abuse Treatment Accessibility Act

[House \(H.R. 1253\)](#)

Cosponsors	Party/State/Dist.	Date Added
Rep. Ruppertsberger, C. A. Dutch	[D-MD-2]	5/11/2017
Rep. Vela, Filemon	[D-TX-34]	5/16/2017
Rep. Blunt Rochester, Lisa	[D-DE-At Large]	5/16/2017
Rep. Peterson, Collin C.	[D-MN-7]	5/17/2017
Rep. Walz, Timothy J.	[D-MN-1]	5/22/2017
Rep. Blumenauer, Earl	[D-OR-3]	5/22/2017

Senate: Please note there is no current Senate companion for H.R. 1253