

## **PPC CAPITOL CONNECTION**

December 10, 2019

## What Matters Now in Washington:

- Despite bipartisan progress in negotiating final appropriations bills, key questions remain unresolved with days to go before federal funding runs out. <u>More...</u>
- A key Senate committee is taking up a reauthorization of the Pediatric Subspecialty Loan Repayment Program. <u>More...</u>
- Health care groups urged the White House to remove flavored e-cigarettes from the market in a November meeting with President Trump. More...
- A new policy for asylum seekers requires individuals to remain in Mexico while their immigration claims are resolved. More...
- PPC authored policy commentaries in *Pediatric Research* exploring the intersections of child health policy, advocacy, and pediatric research. More...

APPROPRIATIONS PROCESS REMAINS UNFINISHED AS FUNDING CLIFF LOOMS. In late November, congressional leadership reached a <u>bipartisan agreement on top-level spending numbers</u> for Fiscal Year (FY) 2020, resolving a key dispute that had prevented Congress from finishing the full-year appropriations process. The agreement on spending allocations for each of the 12 appropriations bills that comprise Congress's annual discretionary funding will allow the House and Senate to attempt to reconcile their proposals for FY 2020. Additionally, there is agreement on both sides of the Capitol to provide another multi-billion-dollar spending boost for the National Institutes of Health (NIH), and programs like the Children's Hospital Graduate Medical Education (CHGME) program look set for modest increases this year. However, Democrats and Republicans will need to come to an agreement on other domestic priorities that have not garnered bipartisan interest.

Time, though, is running short. A <u>stopgap funding measure</u> designed to keep the federal government open at FY 2019 levels expires on December 20, giving congressional appropriators little time to hammer out an agreement or pass another stopgap funding measure. They will also face another major political hurdle—<u>whether to provide President Trump money for his long-promised border wall</u>. Democrats have long viewed funding the wall as a nonstarter in government funding negotiations, and Republicans, who have been more supportive of the President's request, seem eager to avoid a government shutdown over the issue. For the time being, the issue remains unresolved, and whether or not the federal government shuts down as a result remains unclear.

—Uncertainty for Census as FY 2020 Appropriations Process Drags on. The failure of Congress to advance a full-year spending bill is of particular concern to the Census Bureau, which is just months away from administering the decennial Census. While the agency has gotten the <a href="authority through stopgap funding measures to spend money at a faster rate to ramp up for the count">authority through stopgap funding measures to spend money at a faster rate to ramp up for the count</a>, it needs budgetary certainty so that it can commit necessary resources for final preparations, major operations, and expanded activities targeting hard-to-count communities in rural, suburban and urban areas, without

concern that its funding may fall short of need. Advocates are urging Congress to appropriate final funding for the Census Bureau as soon as possible.

SENATE HEALTH COMMITTEE TO CONSIDER PEDIATRIC SUBSPECIALTY LOAN REPAYMENT. The Senate Health, Education, Labor and Pensions (HELP) Committee will mark up its health care workforce legislation on Thursday. The package is slated to include a reauthorization of the Pediatric Subspecialty Loan Repayment Program (PSLRP). The program, which was authorized a decade ago but never funded, represents an important opportunity to bolster the pediatric workforce by providing loan repayment for pediatric subspecialists who practice in an underserved area. The committee's inclusion of PSLRP in its health care workforce legislation is a significant step forward in efforts to renew the program and comes after the House of Representatives passed its own PSLRP reauthorization earlier this year.

HEALTH GROUPS MEET WITH WHITE HOUSE AS YOUTH E-CIGARETTE EPIDEMIC SURGES. President Trump announced in September that his administration would take swift action to remove all flavored ecigarettes from the market after new data showed more than a quarter of high school students use ecigarettes. Three months later, a Food and Drug Administration (FDA) guidance to do just that is held up by White House officials concerned over the political ramifications of taking the necessary steps to protect child health.

The September announcement brought widespread praise from the medical and public health communities, which have long been pushing policymakers to eliminate all flavored tobacco products for their role in attracting youth to use e-cigarettes. The announcement from the President would have required all flavored products to come off the market, pending an FDA determination that their sale is in the interest of the public health. However, reports quickly emerged that the White House was considering <u>carve-outs</u> for certain flavors, like menthol, and for products sold in vape shops. The rumored changes have largely been viewed as an effort to walk back the announcement and placate the vaping industry.

Hoping to break the stalemate, President Trump invited medical and public health groups, as well as industry representatives, to a <u>meeting in the West Wing to discuss how to proceed</u>. Pediatrician and American Academy of Pediatrics (AAP) President-Elect Sara Goza, MD, FAAP, was present, and she reiterated the message that the administration must move forward with its proposal to clear the market as announced—all e-cigarette flavors, regardless of where they are sold. To date, the White House has not moved forward with the policy.

ADMINISTRATOIN RAMPS UP "REMAIN IN MEXICO" POLICY. A Department of Homeland Security (DHS) policy requiring asylum seekers to <u>wait in Mexico</u> until an immigration judge resolves their asylum claims is being implemented at additional ports of entry on the southern U.S. border. The policy, known as the "Migrant Protection Protocol" (MPP) or "Remain in Mexico Policy," is a departure from prior practice; in the past, asylum seekers arriving at the southern border were typically paroled into the U.S. or detained within the U.S. while their case proceeded before the immigration courts. As DHS expands this policy to different ports of entry in border states, thousands of migrants from Central America are being sent back to cities in Mexico to await a hearing. <u>Migrants sent back to Mexico face violence</u> and <u>abject living conditions</u>, and some parents are choosing to <u>send their children across the border alone</u>, as MPP does not apply to unaccompanied children. Since the program began, more than 50,000 asylum seekers have been returned to various Mexican cities to await a hearing. The policy is under review by the Ninth Circuit Court of Appeals in California but has been allowed to continue as the litigation winds its way through the federal courts.

**PPC POLICY COMMENTARIES.** Members of the PPC have authored commentaries detailing the policy implications of research published in *Pediatric Research*. You can read these PPC-authored commentaries online:

• <u>Preventing long-term respiratory morbidity in preterm neonates: is there a path forward?</u> by Jonathan Davis, MD, and DeWayne Pursley, MD