

DC Update May 1, 2009

Kathleen Sebelius, Secretary of the Department of Health and Human Services

On April 28, the U.S. Senate confirmed Kathleen Sebelius, former Governor of Kansas, as the next Secretary of the Department of Health and Human Services (HHS). We anticipate appointments for the Centers for Medicare and Medicaid Services (CMS) and for the Substance Abuse and Mental Health Services Administration (SAMHSA) may soon follow. During confirmation hearings, Senator Debbie Stabenow (D-MI) asked Sebelius about the inclusion of mental health and substance use issues in the health care debate. Sebelius said that these issues need to be part of the discussion and referred to the Substance Abuse and Mental Health Services Administration (SAMHSA) as "another important asset to make sure that not only those voices are at the table, but that agency assets are used to maximize the coverage and care for people across America."

FY2010 Budget

On April 29, 2009, the U.S. Senate and House of Representatives passed the FY2010 budget. This non-binding budget resolution includes language protecting health care legislation from a Senate filibuster and requires that committees report health care legislation by October 15, 2009. Congress' next step includes completing the appropriations process.

Health Care Reform

The key committees in health care reform in both the House and the Senate project to introduce and mark-up health care reform legislation over the next two months. The three House committees with health care reform jurisdiction, Education and Labor, Ways and Means, and Energy and Commerce, are working together to introduce a single bill that will then be marked up separately in the individual committees. In the Senate, there will be two separate bills. One will be from Senator Edward Kennedy (D-MA), chairman of the Senate Health, Education, Labor, and Pensions Committee (HELP), and the other will come from Senator Max Baucus (D-MT) chairman of the Senate Finance Committee.

As noted above, the budget includes provisions for health reform.

Autism Treatment Acceleration Act of 2009 (S. 819)

At the request of President Obama, Senator Richard Durbin (D-IL), along with Senator Robert Casey (D-PA) and Senator Robert Menendez (D-NJ) introduced comprehensive autism legislation in April. There are provisions in the bill for federal reform of autism insurance coverage. If passed, the bill will require all insurance companies nationwide to provide coverage for evidence-based, medically-necessary autism treatments and therapies.

Included in the bill are planning and demonstration grants for Autism services for adults. Local government entities are eligible for these grants.

Compensation Owed for Mental Health Based on Activities in Theater Post-traumatic Stress Disorder (COMBAT PTSD) Act (H.R. 952)

Representative John Hall (D-NY) introduced the COMBAT PTSD Act in February. This bill changes the definition of “in combat with the enemy” to mean “in a theater of combat operations during a period of war; or in combat against a hostile force during a period of hostilities.” This definition widens the definition of combat for Veterans applying for Veterans Affairs benefits who need to prove that their disability is combat-related. Currently, combat is interpreted to only include cases where the Veteran was engaged in combat on the offensive. With this interpretation, someone who encountered explosives as part of a caravan, but did not engage in active combat, may have difficulties proving the necessary axis of combat-related disability. Hearings on this bill began in late April.

Community Living Assistance Services and Supports (CLASS) Act (H.R.1721)(S.697)

The Community Living Assistance Services and Supports (CLASS) Act, introduced in March by Representative Frank Pallone, Jr. (D-NJ) in the House and by Senator Edward Kennedy (D-MA) in the Senate, would create a new national insurance program to help adults who have or develop functional impairments to remain independent, employed, and stay a part of their community. It would give individuals added choice and access to supports without requiring them to become impoverished by spending down into Medicaid to qualify.

Financed through voluntary payroll deductions (with opt-out enrollment like Medicare Part B), this legislation will help remove barriers to independence and choice (e.g., housing modification, assistive technologies, personal assistance services, transportation) by providing a cash benefit to those individuals who are unable to perform 2 or more functional activities of daily living. Payees are required to have paid into the system for a minimum of 60 months to receive benefits through this act.

Community CHOICE Act (S.683) (H.R. 1670)

The Community Choice Act, introduced in March by Senator Tom Harkin (D-IA) in the Senate and by Representative Danny Davis (D-IL), provides a choice in long term care options by reforming Title XIX of the Social Security Act (Medicaid) combating the institutional bias. The Community Choice Act allows individuals eligible for Nursing Facility Services or Intermediate Care Facility Services for the Mentally Retarded (ICF-MR) the opportunity to choose a new alternative, "Community-based Attendant Services and Supports". The money follows the individual. The Community Choice Act offers an enhanced match and grants for the transition to Real Choice before October 2011 when the benefit becomes permanent, offering financial assistance to states to reform long term service and support systems to provide services in the most integrated setting. If passed, this bill could facilitate the inclusion of community based services as part of the overall health reform discussion.