COALITION ON HUMAN NEEDS

The Human Needs Report

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What Congress Did – and Didn't Do – at the End of 2017, and What's on Tap for Early 2018

What Congress Did – and Didn't Do at the End of 2017, and What's on Tap for Early 2018

A lot happened on Capitol Hill right before the holiday break, while many other issues were kicked down the road and remain on the Congressional agenda for early 2018. Where do things stand? Read on for a brief rundown.

Tax Cut Bill Signed into Law

President Trump signed the GOP tax cut bill into law on Dec. 22 after the bill passed both the House (224-201) and Senate (51-48) earlier that week. The bill gives huge tax cuts to the wealthy and corporations, repeals the Affordable Care Act's individual mandate, raises taxes on those making under $75,000 by 2027, and adds more than $1 trillion to the national debt. CHN's Executive Director Deborah

Weinstein said in a statement, "We at the Coalition on Human Needs oppose this legislation because it squanders trillions of dollars in revenue needed for services and investments in our future by handing unwarranted tax cuts to wealthy individuals and corporations. Far from helping the middle class, this tax giveaway will harm low-and middle-income people by raising taxes on millions of people and by diminishing the services they need."

A number of CHN member organizations have released multiple resources covering the GOP tax cut bill, including the Center on Budget and Policy Priorities, Institute on Taxation and Economic Policy, Americans for Tax Fairness, and the Tax Policy Center. The *New York Times* also has a chart showing how various parts how of the tax code will change compared to current law. For more history on the tax cut bill, see the December 11 *Human Needs Report*.

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Another Shutdown Showdown in Sight

Members of Congress avoided a shutdown in December, but they are on the cusp of another possible shutdown yet again. The House and Senate passed another stopgap spending bill, known as a Continuing Resolution (CR), on December 21, one day before the previous CR expired. The current CR provides flat funding for most government operations through midnight on January 19. The bill also provides funding to allow states to continue to run the Children's Health Insurance Program (CHIP) ostensibly through the end of March (although CHIP experts have said the funding will not last this long). For more information on CHIP, see the related article in this *Human Needs Report*. With just over a week before the current CR expires, it is expected that Congress will pass another CR the week of January 15, possibly one to fund the government through early- or mid-February.

The purpose of these numerous CR's is to give lawmakers more time to reach a deal on topline spending levels for FY18, which began October 1. A bipartisan deal is required to lift the tight spending caps and automatic cuts (also known as sequestration) that are scheduled to go back into effect for FY18 and that would require a $5 billion cut below FY17 appropriations totals ($2 billion from defense and $3 billion from nondefense annually-appropriated programs). Republican leaders are reportedly considering a nearly $250 billion increase in these discretionary (annually-appropriated) spending caps over the next two years, with defense programs getting 62 percent of that total and nondefense programs getting 38 percent. Democrats have not agreed to this proposal, as they have been firm in their position that the principle of parity must be maintained; that is, any additional money given to defense programs should be matched by money for nondefense programs.

Unless a deal is reached, Democrats could filibuster a spending package in the Senate, which means that 60 votes would be required for passage. Advocates will also be ready to oppose cuts to mandatory programs such as Medicaid or SNAP as a way to pay for increases beyond the caps, as well as opposing possible poison pill riders, or controversial policy changes, that members of Congress may try to add to any spending package. Once a budget deal is reached, Congress could work on and pass an "omnibus" spending package that would combine the 12 required spending appropriations bills covering all government agencies for the rest of the fiscal year in one package.

The threat of a shutdown still looms, however. Republicans have resisted including certain other "must-pass" priorities in the January 19 CR, including a full reauthorization of the Children's Health Insurance Program (CHIP), parity in lifting sequester caps, opioid use treatment and other health-related programs, reinstating legal status for the "Dreamers" who have benefited from the Deferred Action for Childhood Arrivals (DACA) program, and disaster aid for Puerto Rico and other areas, although bipartisan negotiations are underway. More than 100 national organizations jointly signed a letter to Congress calling for must-pass legislation to be enacted before members left in December, including parity for increases in non-defense and defense items, renewal of CHIP, community health centers, and the Maternal and Early Childhood Home Visiting Program, help for the Dreamers, and disaster relief. For more on these topics, see the related articles in this *Human Needs Report.*

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House Passes Inadequate Disaster Aid Bill

The need for additional funding for Puerto Rico, the U.S. Virgin Islands, and other communities recovering from disasters remain great. On December 21, the House passed (251-169) an $81 billion disaster aid package, nearly doubling the $44 billion the Trump administration requested in November. Many House and Senate Democrats and advocates opposed the bill because they said it did not provide enough relief for the U.S. territories, did not include additional funds for Medicaid assistance, and did not extend the Earned Income Tax Credit for Puerto Rico, among other reasons. A week before the House passage, for example, Puerto Rico's governor asked Congress for $63.4 billion in aid for the territory alone, noting that $18.6 billion of those funds were "needed immediately." Some advocates are pushing for disaster aid to be included in the stopgap spending legislation that Congress needs to pass prior to January 19 to provide quicker aid.

Recent news stories have documented as many as 1,000 additional deaths in Puerto Rico since Hurricane Maria as compared with death reports over the same period a year before. Most of these deaths have not so far been attributed to the storm, but these unusual deaths from infections and other conditions seem related to the lack of power and other problems at health facilities that continue long after the hurricane. CHN joined Families USA and more than 100 other organizations in December to urge Congress to address the ongoing healthcare crisis in Puerto Rico and the U.S. Virgin Islands. For more information on disaster aid packages, see the December 11 *Human Needs Report*.

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Trump Administration Moves to Allow States to Add Work Requirements to Medicaid

On January 11, the Trump administration moved to allow states to impose work requirements for Medicaid recipients. A letter sent to state Medicaid directors laid out the shift if policy, which gives states the opportunity to apply for waivers to allow them to establish work requirements for adult Medicaid recipients to be eligible for health coverage.

Advocates have long opposed the addition of such work requirements citing, among other reasons, that access to medical care is critical to keeping people healthy, which allows them to work. The Protect our Care Coalition said in a statement, "[T]he majority of adults covered by Medicaid who can work, do work – often two or three jobs in fields like the service industry that are less likely to offer insurance. This new attack on Medicaid has nothing to do with program integrity, and everything to do with the recently revealed stop-by-stop Trump Administration plot to wage war on our health care." The National Health Law Program is reportedly weighing possible legal action if state waivers adding work requirements are approved. Decisions on such proposals from some states are expected soon, with Kentucky possibly being first. To learn more about waivers being tracked in the states, click here.

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Children's Health Insurance Program Gets Support through March, but Long-Term Funding is Needed

While Congress has yet to come to an agreement on renewing long-term funding for the Children's Health Insurance Program (CHIP), community health centers (CHCs), and several other health-related programs, states will have money to continue their CHIP programs thanks to a provision in the stopgap funding measure Congress passed on December 21. It is intended to last through the end of March, but for as many as 11 states, funds may run out sooner, according to the Georgetown University Center for Children and Families. Funding for CHIP expired on September 30, and officials in multiple states have either already notified families or have prepared to notify families that CHIP health insurance coverage may end due to lack of federal funding.

On January 9, the Congressional Budget Office, Congress's nonpartisan scorekeeper, said that reauthorizing CHIP for a decade or more would actually save as much as $6 billion over 10 years. This is because without CHIP in place, more children would be covered by the Affordable Care Act's insurance exchanges and their parents would receive subsidies to help lower the costs of the private insurance. The CBO estimated that reauthorizing CHIP for five years would cost the government only $800 million.

Advocates fear that Congress's failure to pass a long-term CHIP bill to date will cause confusion and undue stress for families, and ultimately, loss of coverage if Congress does not act soon. More than 9 million children currently receive health care coverage under CHIP. More than 26 million people visited CHCs at almost 10,000 locations nationwide. For more information on CHIP and other health programs that need to be addressed, including payments to insurance companies (known as cost-sharing reductions, or CSRs), see the December 11 *Human Needs Report*.

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Immigration Issues in Flux

Despite bipartisan support and high-level talks between Congressional leaders and President Trump this week on immigration issues, a legislative solution for Dreamers remains elusive. President Trump announced in September that he was rescinding the Deferred Action for Childhood Arrivals (DACA) program, though he said he would support legislation to protect the nearly 800,000 young immigrants brought to the U.S. as children who currently benefit from DACA.

On January 9, a federal judge temporarily blocked the Trump administration from ending the DACA program on March 6, as it previously announced it would, if legal challenges are still unresolved. The judge's ruling also means the administration must temporarily resume accepting renewal applications, though it can continue to refuse to accept new applications. Currently, 122 Dreamers are being discontinued from DACA each day – more than 14,000 so far.

Both advocates and Congressional Democrats are very firm in seeking permanent legal status such as the Dream Act for those who would qualify for DACA, and they are pushing to attach a DACA fix to the stopgap spending bill that will need to be passed later this month to fund the government into February. Senate Majority Leader Mitch McConnell (R-KY) had said a DACA fix should be dealt with apart from a spending bill.

President Trump and many Republicans have also repeatedly said they want any immigration deal to include increased funding for border security, including a wall along the U.S.-Mexico border, as well as ending the policy allowing immigrants with legal status to petition to bring relatives to the U.S. Other proposals from the GOP may include codifying DACA for current recipients but not for all eligible recipients, and not providing a path to citizenship. Democrats have opposed including money for a border wall in any deal.

In another threat to immigrants, the Department of Homeland Security announced on January 8 that it will end the Temporary Protected Status (TPS) designation for more than 200,000 immigrants from El Salvador who've been in the U.S. since at least 2001. According to the *Washington Post*, TPS was created by Congress in 1990 to avoid sending immigrants back to countries severely damaged by natural disasters, wars, or health outbreaks; it gives those with TPS status employment authorization and protection from deportation. The designation was granted to Salvadorians after an earthquake devastated the country in 2001 and has been renewed for 18-month intervals since then. The individuals affected will have until September 2019 to either attempt to change their residency status so they can stay in the country legally, leave the country, or stay in the U.S. illegally after losing their work permits, health insurance, and driver's licenses. These decisions will have enormous consequences on communities and as many as 192,000 U.S.-citizen children of these TPS recipients. A statement by CHN called the decision by the Trump administration "immoral and un-American." The Center for Law and Social Policy (CLASP) called the decision "part of a larger agenda by the Trump Administration to create fear and disrupt immigrant families and communities."

DHS has already ended TPS for several African nations this year and announced in November that TPS designation extended to 2,500 Nicaraguans will be terminated on Jan. 5, 2019. For more on TPS, see the November 13 *Human Needs Report* and UnidosUS.

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We appreciate your input. Give us your thoughts on our *Human Needs Report* at limbery@chn.org.
