



## Pediatric Policy Council Update June 2018

The APS and SPR are members of the Pediatric Policy Council (PPC) which actively advocates for children and academic pediatrics at the federal level. APS representatives to the PPC are Drs. Scott C. Denne (incoming PPC Chair) and Jonathan M. Davis; Drs. Vivek Balasubramaniam and Shetal Shah represent the SPR.

The PPC also includes representatives from the Academic Pediatric Association (APA) and the Association of Medical School Pediatric Department Chairs (AMSPDC). The PPC is based in the Washington DC office of the American Academy of Pediatrics (AAP), who supplies staff and other support.

The latest advocacy developments are summarized by the PPC below.

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### PPC CAPITOL CONNECTION

June 25, 2018

#### What Matters Now in Washington:

- *Scott Denne, MD, was elected to serve as the next chair of the Pediatric Policy Council. More below...*
- *The Trump administration walked back its hardline stance on family separation, indicating it would stop the practice. More below...*
- *NIH has convened its first meeting of the N-PeRC as it begins work to better coordinate pediatric research at NIH. More below...*
- *The Senate rejected a House-passed, White House-backed package that would have clawed back \$7B in CHIP funding. More below...*
- *Bipartisan support for NIH is already on display as the House health appropriations bill passed out of subcommittee. More below...*
- *PPC authored policy commentaries in Pediatric Research exploring the intersections of child health policy, advocacy, and pediatric research. More below...*

**Dr. Scott Denne Elected Chair of Pediatric Policy Council.** Scott Denne, MD, was elected by representatives of the Pediatric Policy Council to serve as the next chair of the PPC. Dr. Denne has represented the American Pediatric Society on the PPC

since 2012, working in tandem with his colleagues from the four PPC societies to advance important pediatric research and child health priorities. Dr. Denne's term as PPC chair officially begins on January 1, 2019, and he will work in the interim with outgoing PPC Chair Paul Chung, MD, MS, to ensure a seamless transition of duties. Please join us in congratulating Dr. Denne!

**Amid Intense Backlash, Trump Administration Reverses Course on Family Separation.** President Trump issued an executive order Wednesday seeking to halt family separation at the border, reversing the administration's initial position that only Congress could stop the practice of separating children from their parents. Despite this, it remains unclear how the president's directive will keep families together in practice, and concerns remain that the expected alternative to family separation—family detention—is also detrimental to children's health and development. The administration also has no clear plans for reuniting the nearly 2,500 children from Central America who have been separated from their parents over the last month and a half. The abrupt about-face comes after administration officials publicly defended the widely decried practice as recently as last Monday, insisting that Congress must address so-called loopholes that they claimed made the separation of children and families at the border mandatory under law. Congress, for its part, maintained that the administration had the authority to end this policy, and, as of Friday, House votes on broader immigration bills to address this practice did not have a path forward.

**DHS Policy Changes Created Family Separation Crisis.** While the practice of family separation has become increasingly common under the Trump administration, a "zero tolerance" policy announced by the Department of Homeland Security (DHS) in early May effectively made the policy mandatory, as DHS referred all migrants crossing the border illegally for criminal prosecution by the Department of Justice (DOJ). Migrant parents charged with unlawful entry under this policy are placed in federal prison, and their children must as a result be separated from them and placed in the custody of Department of Health and Human Services (HHS) Office of Refugee Resettlement (ORR) facilities as unaccompanied minors.

**Pediatricians Lead the Way in Opposing Family Separation and Elevating the Child Health Perspective.** The national outcry over family separation reached a fever pitch in recent days, as national and international media outlets descended on the border to cover the situation and audio recordings of traumatized children emerged. Pediatricians have been vocal in opposing this policy and continue to advocate for the health and well-being of all children. The PPC has been actively engaged in this issue, joining with more than 500 organizations representing child welfare, juvenile justice, and child health experts to call on the Department of Homeland Security (DHS) to reverse the policy.

**NIH Initiative to Coordinate Pediatric Research Moves Ahead.** Following last month's announcement that NIH would initiate efforts to coordinate pediatric research, the agency's work in this area has already begun. NICHD Director Diana Bianchi, MD, discussed the initiative during her update to the NICHD Advisory Council on June 7 (view here at 21:45), and NIH issued a press release on the effort several days later. Additionally, the NICHD-led initiative, known as the Trans-NIH Pediatric Research Consortium or N-PeRC, held its first convening of top leadership from the 27 Institutes and Centers on June 12. There is continued interest among advocates and members of Congress in ensuring pediatric research is appropriately coordinated across NIH, and the PPC will continue to engage with NIH, congressional champions, and the pediatric research community as N-PeRC's work moves forward.

**House Passes White House Rescissions Package, Including \$7B in CHIP Reductions, But Measure Falls Short in Senate.** Earlier this month, the House of Representatives narrowly passed a package rescinding \$15 billion in federal spending

approved by Congress in years past, with funds from the Children's Health Insurance Program (CHIP) making up nearly half the total. Just weeks later, the Senate narrowly rejected the measure on a procedural motion, as Senators Richard Burr (R-N.C.) and Susan Collins (R-Maine) joined Democrats in voting against it. Any future action on this rescissions package is unlikely, as special procedural protections allowing a simple majority vote in the Senate to advance the package have now expired. The budget rescissions as passed would have revoked \$7 billion in CHIP funding, including \$2 billion from the Child Enrollment Contingency Fund, which provides payments to states if they experience an unexpected surge in enrollment due to a natural disaster, economic recession, or public health crisis, and \$5 billion from the Children's Health Insurance Fund. This action came at the behest of President Trump, who must submit a package of recommended funding reductions to initiate rescissions. Immediately following the president's announcement that he would seek rescissions, advocates, including the PPC, called on Congress to reject cuts to CHIP.

**As FY19 Appropriations Process Moves Forward, NIH Looks Poised for Fourth Consecutive Funding Increase.** On June 15, the House Appropriations Labor, Health and Human Services, Education, and Related Agencies Subcommittee passed its Fiscal Year (FY) 2019 health appropriations bill, which funds biomedical research and other health care priorities. For the fourth year in a row, the committee plans to increase funding for NIH, this year by \$1.25 billion over the FY 2018 enacted level. In total, the NIH would see funding of \$38.3 billion in this funding package, including \$1.469 billion for the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD) or a \$19 million increase for NICHD. In addition to increased investments in pediatric research, the bill would provide a \$10 million funding increase, or \$325 million in total, for the Children's Hospital Graduate Medical Education (CHGME) program, the graduate medical education funding stream which funds half of all pediatric trainees in the country. The bill contains no funding for public health research into firearm morbidity and mortality at the Centers for Disease Control and Prevention (CDC). Before FY 2019 appropriations can be enacted, the Senate will need to advance its own set of funding bills, and any differences between the two chambers' versions will need to be reconciled. The Senate's health funding bill is expected in the coming weeks.

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

- Social and environmental exposures—the bidirectional learning between health policy and practice by Shale Wong, MD, MSPH and Jean Raphael, MD, MPH
- Policy priorities for child health: results from a membership survey of the Society for Pediatric Research by Shetal Shah, MD, Vivek Balasubramaniam, MD, Health Brumberg, MD, and Lee Sanders, MD