



Pediatric Policy Council Update

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. DeWayne Pursley and Jonathan M. Davis; Drs. Joyce Javier 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

PPC CAPITOL CONNECTION

April 9, 2019

What Matters Now in Washington:

- Dr. Scott Rivkees, PPC representative, was nominated by Florida Governor as next state Surgeon General. [More...](#)
- PCORI's executive director will leave his post later this year. [More...](#)
- Courts around the country are considering a number of cases with broad implications for access to care through Medicaid and private health coverage. [More...](#)
- Members of Congress introduce bills to protect Dreamers. [More...](#)
- PPC authored policy commentaries in *Pediatric Research* exploring the intersections of child health policy, advocacy, and pediatric research. [More...](#)

PEDIATRIC POLICY COUNCIL MEMBER SCOTT RIVKEES, MD, NAMED NEXT FLORIDA SURGEON GENERAL. Florida Governor Ron DeSantis nominated Dr. Scott Rivkees to serve as [Florida's Surgeon General and Secretary of the Florida Department of Health](#). In this role, Dr. Rivkees will oversee a wide variety of public health programs impacting Florida's 21 million residents, including efforts to address the opioid epidemic, implement the state's medical marijuana program, and address rising drug costs. In his announcement, Governor DeSantis praised Dr. Rivkees for his wealth of expertise and career accomplishments. A renowned pediatric endocrinologist, Dr. Rivkees is a professor and chair of the Department of Pediatrics at

the University of Florida College of Medicine and physician-in-chief of UF Health Shands Children's Hospital. He has served as a representative to the Pediatric Policy Council from the Association of Medical School Pediatric Department Chairs since 2014. [Dr. Rivkees accepted the nomination at an April 1 press conference.](#)

PCORI EXECUTIVE DIRECTOR TO STEP DOWN AT END OF YEAR. Joe Selby, MD, MPH, executive director of the Patient-Centered Outcomes Research Institute (PCORI), announced he would leave that post at the end of 2019. He has led the agency's work, which focuses on research comparing which treatments or kinds of care work best, for the last 8 years. The organization has supported over \$2.4 billion in research since it was created through the Affordable Care Act in 2010. Dr. Selby's departure comes as Congress begins work to reauthorize PCORI, which expires at the end of the fiscal year.

ACCESS TO CARE FACES UNCERTAINTY AS LITIGATION PROCEEDS. Since failed congressional attempts to repeal and replace the Affordable Care Act (ACA) fizzled out in 2017, the high-stakes debate about the future of the nation's health care system has moved to federal agencies, states, and, ultimately, the courts. With no path forward for comprehensive health care legislation in Congress, the Trump administration refocused its efforts on advancing its agenda through the regulatory process, issuing rules that allow for the sale of less comprehensive health coverage that skirt the Affordable Care Act's consumer protections and encouraging states to apply for Medicaid waivers that impose work requirements and other barriers to care.

—Courts Consider Efforts to Role Back Consumer Protections, Erect Barriers to Care in Medicaid. All of those efforts have faced extensive opposition in the judiciary, as states, patients, and health care stakeholder groups have filed suit against them. In two successive rulings in late March, federal judges dealt major setbacks to the Trump administration's regulatory efforts. In one, a district court in Washington, DC, [struck down Medicaid 1115 waivers](#) approved by the federal government allowing Arkansas and Kentucky to impose work requirements on certain Medicaid beneficiaries. In Arkansas, where work requirements began taking effect in June 2018, more than [18,000 residents have lost coverage](#) to date. The judge found that the Department of Health and Human Services (HHS) did not appropriately consider whether approval of these waivers would promote the objectives of the Medicaid program, which includes providing medical assistance to low-income individuals. One day later, another [federal judge struck down a Trump administration final rule on Association Health Plans \(AHPs\)](#) by expanding the definition of "employer" to allow small businesses to band together to offer insurance plans outside the ACA that offer fewer consumer protections. In his opinion, the judge called the Trump administration effort to expand AHPs a clear "end-run around the ACA," and wrote that the effort "does violence" to ERISA, the 1974 law governing much of the employer-sponsored health coverage system. A ruling on a parallel administration effort expanding the availability of [short-term limited-duration health plans](#), which are also exempt from many of the ACA's consumer protections, is still pending.

—In Spite of Multiple Rulings Upholding ACA's Constitutionality, Texas Judge's Unexpected Ruling Threatens Turmoil in U.S. Health Care. Despite recent court successes, a [December ruling](#) by a federal judge in Texas finding the entirety of the ACA unconstitutional looms in the backdrop. While the ruling has no immediate impact as it continues to work its way through the appeals process, the judge's opinion [threatens to throw the entire health care system into chaos](#) if it is not overturned on appeal. In late March, the Trump administration told an appeals court considering the ruling that it believed the [appeals court should affirm](#) the ruling that the entire law is unconstitutional, a shock decision that was

[reportedly opposed by top Trump administration officials](#). However, legal experts have found major [deficiencies](#) in the opinion, which found that Congress's 2017 decision to eliminate the tax penalty associated with the so-called individual mandate meant the entire law must fall. The decision and recent Trump administration decision have moved health care back into the spotlight, as congressional [Democrats seize](#) the opportunity to highlight their health care platform. Republicans, who suffered major losses in the 2018 midterms driven primarily by health care issues, are [loathe to relitigate](#) broadly popular issues like protections for individuals for preexisting conditions, which would be eliminated should the ACA be held unconstitutional.

BILLS TO PROTECT DREAMERS INTRODUCED IN CONGRESS. Following President Trump's decision to terminate the Deferred Action for Childhood Arrivals (DACA) program, Congress has been at an impasse on broader efforts to reform the immigration system. Though courts have required the federal government to allow current DACA recipients—individuals who were brought to the U.S. as children and meet several other criteria—to renew their temporary work permits, a permanent solution that addresses all undocumented individuals brought to the U.S. as children requires congressional action. To that end, two bills were recently introduced in the House and Senate. [The House bill](#), known as the American Dream and Promise Act of 2019 (H.R. 6), was introduced by Rep. Lucille Roybal-Allard (D-Calif.) with 207 cosponsors. This bill provides these individuals with conditional permanent resident status for 10 years. It also provides individuals living temporarily in the United States who were displaced by natural disasters or armed conflict an opportunity to gain permanent resident status. [The Senate bill](#), introduced by Sens. Lindsey Graham (R-S.C.) and Dick Durbin (D-Ill.), would similarly create a path to permanent residency for dreamers who fulfill certain conditions. It is unclear when this legislation might move.

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:

- March 12, 2019: Joanna E. Chambers, MD, Scott Denne, MD, [Screening for postpartum depression: obligation and opportunity for pediatricians to improve the lives of children](#)
- March 6, 2019: Deborah Bloch, MD, Ann Chahroudi, MD, [Poverty and chronic illness: why safety net programs matter](#)
- January 15, 2019: David Stevenson, MD, Ronald Wong, MD, Gary Shaw, MD, Jingjing Li, MD, Paul Wise, MD, Jonathan Davis, MD, [The contributions of genetics to premature birth](#)
- January 12, 2019: Jean Raphael, MD, MPH, Shale Wong, MD, MSPH, [Addressing rural health disparities in neonatal abstinence syndrome: population-based surveillance and public policy](#)
- November 19, 2018: Scott Rivkees, MD, Valerie Oipari, MD, [Ensuring the care for our youngest graduates with medically complex conditions](#)