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Passage of continuing resolution ends partial government shutdown

On Jan. 25, Congress passed, and the president signed, a continuing resolution to keep the federal government funded through Feb. 15. The CR ended the 35-day partial government shutdown, reopening nine cabinet departments and several agencies, including the U.S. Food and Drug Administration, Department of Agriculture, Environmental Protection Agency and the Indian Health Service. The nearly five-week shutdown – the longest in history – came to a close with no resolution over ongoing disagreements on border security and immigration policy. Immediately following the passage of the CR, President Trump announced that if Congress cannot reach an agreement on funding for a border wall by the February deadline, he anticipates another shutdown, or he may bypass Congress altogether by declaring a national emergency to fund the wall. Congress now has three weeks to finalize the seven remaining appropriations bills for fiscal year 2019.

On Monday, Jan. 28, the agencies affected by the shutdown reopened their doors and began assessing and recovering from the damage of 35 days of furlough. The shutdown: halted drug reviews and food safety inspection; disrupted inspections of chemical factories, power plants and water treatment operations; and curtailed health care and programs for American Indian communities. With another potential shutdown looming, significant uncertainty remains for millions of people who rely on food and nutrition programs administered by USDA, including those dependent on the Supplemental Nutrition Assistance Program and WIC. Additionally, nearly 800,000 federal employees were without pay for more than a month, putting their
health and economic stability at risk. APHA joined more than 280 organizations in letters to the president and congressional leaders detailing the threats posed to the public’s health by a prolonged shutdown. Now, as Congress works to finalize the seven remaining appropriations bills, APHA encourages all public health advocates to urge their members of Congress to avoid another shutdown for the sake of the public’s health.

APHA supports universal background checks for all gun purchases

On Jan. 9, APHA sent a letter to Speaker Nancy Pelosi and Rep. Mike Thompson in support of H.R. 8, the Bipartisan Background Checks Act of 2019. Current law, which only requires background checks for guns purchased from federally licensed dealers, is inadequate and contains significant gaps that provide easy access to weapons for felons, domestic abusers, the seriously mentally ill and others prohibited from owning firearms. The Bipartisan Background Checks Act would close these senseless loopholes by requiring the same background check for all commercial gun sales including those at gun shows, on the internet and through classified ads. Gun violence is one of the leading preventable causes of death in the nation. In 2017, more than 39,000 individuals died as a result of gun violence and nearly 90,000 suffered nonfatal gun injuries. APHA strongly supports this and other commonsense interventions to reduce the toll of gun violence in our communities.

APHA joins health partners in opposing rollback of methane emissions rule

On Dec. 17, APHA joined with Physicians for Social Responsibility and other leading health and medical organizations in comments to the U.S. Environmental Protection Agency opposing the changes proposed by EPA to the Emission Standards for New, Reconstructed, and Modified Sources within the Oil and Natural Gas Sector, also referred to as the New Source Performance Standards. The original rule, supported by APHA, was put into place in 2016 during the Obama administration to reduce harmful emissions of methane, volatile organic compounds and other pollutants from all new and modified production wells, processing plants, transmission pipelines, and storage units within the oil and natural gas industry. The changes to the original rule that the EPA is proposing would reduce the frequency of monitoring and lengthen the time operators have to repair leaks, thus exacerbating the amount of methane and VOCs allowed to escape into the atmosphere. This would have the effect of increasing the health threats facing millions of Americans, as well as people around the world. Fugitive emissions, or leaks, of methane, frequently accompanied by VOCs, occur throughout the process of natural gas and oil extraction, processing and transport. Methane leaks accelerate climate change and thus increase health threats worldwide. Leaks of VOCs endanger the health of people living near oil and gas infrastructure.

APHA opposes efforts to restrict access to safe and legal abortions

On Jan. 8, APHA submitted comments opposing the Department of Health and Human Services' proposed rule, Patient Protection and Affordable Care Act, Exchange Program Integrity, which threatens to eliminate coverage of abortion in
the Affordable Care Act marketplaces. The ACA allows insurance plans participating in the marketplaces to continue deciding for themselves whether or not to provide abortion as part of a comprehensive health insurance plan. The proposed rule would impose new burdensome regulations on both issuers and consumers that could eliminate coverage of abortion services in many parts of the country. If finalized, the rule would force insurers to itemize the cost of abortion coverage, which would require additional administration resources to maintain compliance with these new regulations. Given the costly and significant administration burdens that the proposed rule would impose, many insurance companies could be forced to drop abortion coverage altogether. APHA has long held that equal access to the full range of reproductive services, including abortion, is a fundamental right. For this reason, APHA urged the Department of Health and Human Services to withdraw this rule in its entirety and to instead focus on implementing policies that increase access to all health services.

On Jan. 10, APHA, the American College of Obstetricians and Gynecologists and the American Medical Association filed a friend of the court brief in the U.S. Court of Appeals for the Fifth Circuit requesting that that court uphold the district court’s preliminary injunction and block the Texas fetal tissue regulation from taking effect. Texas implemented new tissue disposal regulations, which create a special requirement for the disposal of embryonic and fetal tissue from a health care facility. Instead of permitting the disposal of the tissue in the same manner as all other human tissue removed during surgery, autopsy or biopsy, the regulation mandates that the tissue be disposed of through interment or by cremation followed by interment. APHA, ACOG and AMA argued that the regulation provides no medical, public health or safety benefits and instead may jeopardize women’s health and undermine their future reproductive success. The act departs from the standard of care for the disposal of tissue, intrudes on a woman’s bodily autonomy and interferes with the patient-physician relationship. The act would also impose significant unnecessary and burdensome compliance regulations on health care providers, particularly for providers of abortion services, which would force some providers to either refrain from offering abortion services or close their practice altogether. In turn, women’s access to important and constitutionally-protected reproductive health care, ranging from sexually transmitted infection testing and cancer screenings to safe abortion services, would be curtailed, endangering the health of Texas women.

**APHA announces 2019 advocacy priorities**

On Jan. 25, APHA’s executive director, Georges C. Benjamin, MD, sent a letter to Congress outlining the association’s priorities for the 116th Congress. In the letter, Benjamin urges all members of Congress to consider the potential health effects of any major legislation being considered in either chamber. In particular, he urges Congress to:

- Strengthen funding for public health agencies and programs including the Centers for Disease Control and Prevention and the Health Resources and Services Administration;
• Expand access to comprehensive affordable health coverage and services by upholding the Affordable Care Act, supporting innovative efforts to further expand access to coverage and services and protecting vital safety net programs;
• Support efforts to address the health impacts of climate change;
• Address the public health threats from gun violence by supporting universal background checks and funding for public health research into firearm morbidity and mortality prevention; and
• Maintain strong public health regulations and oppose efforts to weaken regulations, including those impacting child nutrition, reproductive health and environmental health and safety.

In addition to the priorities outlined above, APHA will continue to work with Congress and the administration on a broad range of issues that aim to realize the association’s mission to improve the health of the public and achieve equity in health for all.

Attend APHA’s Feb. 6 Policy Action Institute

APHA is offering you the opportunity to learn from national elected policy leaders as well as policy experts in the public and private sector about how to put policy in action to improve your community and create the healthiest nation in one generation. Public Health Under Siege: Improving Policy in Turbulent Times will focus on critical issues of our day such as environmental health, violence prevention, immigrant children’s health and women’s health. The event will take place on Feb. 6 from 7:30 a.m. until 5:30 p.m. at the Marriott Marquis in Washington, D.C. Learn more and register online.

Additional APHA advocacy news

Given the rapid pace of action in Washington, D.C., we wanted to highlight additional issues we have weighed in on recently. Those include:

• APHA comments urging EPA to revisit and revise the Draft Risk Evaluation for PV29 under the Toxic Substances Control Act (Jan. 14)
• Health organization letter to Senate leaders urging quick passage of the Pandemic and All-Hazards Preparedness & Advancing Innovation Act (Jan. 11)
• Organization letter to Members of the 116th Congress urging them to prioritize health equity (Jan. 4)