

Legislative Update



January 2020

- 1. Final FY 2020 spending bill approved with important increases for health agencies, programs**
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Final FY 2020 spending bill approved with important increases for health agencies, programs

On Dec. 20, President Trump signed the Further Consolidated Appropriations Act of 2020, a package of fiscal year 2020 appropriations bills that includes the Labor-HHS-Education FY 2020 appropriations bill. The funding package, supported by APHA, includes a \$4.4 billion increase for the U.S. Department of Health and Human Services a nearly \$637 million increase over FY 2019 for a total of \$7.92 billion for the Centers for Disease Control and Prevention, and a \$193 million increase for a total of \$7.04 billion in discretionary funding for the Health Resources and Services Administration. The bill passed the House on Dec. 17 by a vote of [297-120](#), and the Senate passed the bill by a vote of [71-23](#) on Dec. 19.

APHA is especially pleased that the final bill provides both CDC and the National Institutes of Health each with \$12.5 million to study gun violence prevention, a top priority for APHA. This funding is a central piece in a much needed public health approach to reduce gun violence in the United States. Over the past year, APHA has worked closely with other public health and medical partners as well as with the gun violence prevention organization Giffords in an effort to secure critically needed support for this funding. The bill includes \$50 million in new CDC funding to improve public health data systems at CDC and state, local, tribal and territorial public health departments and an increase of \$75 million for CDC's global disease

detection programs. The legislation also boosts funding for tobacco control efforts and provides \$10 million for the creation of a suicide prevention program at the agency. The bill increases funding for HRSA's Ryan White HIV/AIDS program, health workforce programs and maternal and child health programs, among others.

House passes legislation to lower prescription drug costs and strengthen public health programs

On Dec. 12, the U.S. House of Representatives passed H.R. 3, the Lower Drug Costs Now Act, by a vote of [230-192](#). The bill, supported by APHA, would lower out-of-pocket drug costs for millions of Americans and would provide for significant investments in critical health programs.

According to a recent Kaiser Family Foundation/*New York Times* study, more than half of people who report struggling to pay medical bills cite the cost of prescription drugs as the primary cause. The Lower Drug Costs Now Act would lower excessive drug costs by providing the secretary of Health and Human Services with the ability to directly negotiate drug prices for Medicare recipients. The Congressional Budget Office estimates that this would save the federal government \$450 billion over the next decade. These savings would be reinvested in the Medicare program by expanding dental, hearing and vision coverage for more Medicare recipients.

This legislation also would enhance funding for community health centers, which provide culturally competent, affordable care for millions of people across the nation, and authorize new resources to combat the opioid crisis. Additionally, in an effort to reduce maternal mortality and morbidity in the U.S., the bill would double federal investment in the Maternal, Infant, and Early Childhood Home Visiting program and quadruple federal investment for home visiting programs in tribal communities. APHA applauded the inclusion of these important provisions and [urged all members of the House to support the bill](#) when it came to the floor for a vote.

At this time, Senate Majority Leader Mitch McConnell, R-K.Y., has stated that he does not plan to bring this bill to the Senate floor for a vote. The Senate, though, has a similar bill, introduced by Senate Finance Committee Chair Chuck Grassley, R-Iowa, and ranking member Ron Wyden, D-Oregon, which is supported by President Trump. Nevertheless, McConnell has expressed concern over several provisions in the Grassley-Wyden bill, casting doubt on any future for a final drug pricing package in this Congress.

FDA e-cigarette policy falls short, exempts menthol and refillable tank-based devices

On Jan. 2, the U.S. Food and Drug Administration [announced a policy](#) to end the sale of most cartridge-based e-cigarette flavors. The policy would exempt menthol-flavored cartridge-based e-cigarettes as well as flavored liquids for refillable tank-based systems often sold at convenience stores or vape shops. The policy would also require all companies to submit premarket applications for their products —

including those already being sold — to the agency by May 12 to determine whether the product provides a net health benefit to the public. [APHA issued a statement outlining its concerns](#) with FDA's announcement and urging Congress and the administration to continue to work to remove all flavored e-cigarettes from the market.

APHA joins court brief in support of banning all uses of the pesticide chlorpyrifos

On Dec. 13, APHA joined the American Academy of Pediatrics and other health organizations in submitting [an amicus brief](#) to the U.S. Court of Appeals for the Ninth District in support of the petitioners in the case of the League of United Latin American Citizens, et al. and the State of New York, et al. vs. Andrew Wheeler and the U.S. Environmental Protection Agency regarding the failure of EPA to ban all uses of the pesticide chlorpyrifos. The case was brought against EPA after the agency reversed course on a proposed ban of the use of chlorpyrifos on food crops, despite a significant body of evidence from both epidemiological and animal studies demonstrating that children are vulnerable to long-lasting, adverse cognitive and behavioral outcomes when exposed during pregnancy to chlorpyrifos at levels far below the current tolerances permitted by EPA.

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:

- [Organization letter](#) urging members of the U.S. Senate to co-sponsor S. 851, the Workplace Violence Prevention for Health Care and Social Service Workers Act
- [APHA comments](#) on the U.S. Environmental Protection Agency's draft risk evaluation for methylene chloride
- [Health organization letter](#) urging the Secretary of Health and Human Services to extend the term of the Advisory Committee on Heritable Disorders in Newborns and Children until reauthorization occurs
- [Health organization letter](#) to congressional leaders urging the inclusion of H.R. 4995, the Maternal Health Quality Improvement Act of 2019, and H.R. 4996, the Helping Medicaid Offer Maternity Services Act of 2019, in any end-of-year package
- [Organization letter](#) urging the House Committee on Foreign Affairs to take up legislation to end the harmful global gag rule