

What Matters Now in Washington:

- * A CHIP funding bill passed the House of Representatives, largely along party lines. More...
- * Voters in Maine and Virginia came out in force to support access to health care. More...
- * The House Republican tax reform bill increases the Child Tax Credit, but the poorest families won't benefit. More...
- * Members of Congress reintroduced a bill to raise the age of tobacco purchase to 21. More...
- * The ACA may have led to more adolescents receiving preventive health care, a recent study found. More...
- * The Next Generation Researchers Initiative will help ensure a stream of qualified biomedical researchers well into the future, NIH leadership says. More...
- * Members of the Pediatric Policy Council authored policy commentaries in Pediatric Research. More...

CHIP Funding Bill Passes House in Partisan Vote. On November 3, the House of Representatives passed a CHIP funding bill<<http://thehill.com/policy/healthcare/358622-house-passes-bill-to-fund-childrens-insurance-program>>, largely along party lines. Despite several weeks of interparty wrangling, Republicans and Democrats were unable to come to an agreement on how to pay for the extension of CHIP funds<<https://ccf.georgetown.edu/2017/11/03/house-votes-to-extend-chip-funding-without-bipartisan-agreement-on-payfors/>>. Ultimately, the House bill included funding provisions-including changes to Medicaid financing and new barriers for families accessing affordable health insurance on the individual market-that Democrats opposed<<http://www.modernhealthcare.com/article/20171103/NEWS/171109951>>. The Senate is not expected to take up the House CHIP bill as passed<<https://www.nytimes.com/2017/11/02/us/politics/chip-childrens-health-insurance-program-congress.html>>, due largely to the partisan nature of the funding provisions which would be unable to clear the Senate's 60-vote threshold. While many had hoped for funding to be renewed quickly, it is now expected that CHIP funding may not be extended until December<<https://khn.org/morning-breakout/timeline-for-chip-reauthorization-now-likely-to-stretch-into-december/>>, where it may be added to a year-end funding package or another disaster relief supplemental funding bill.

In a Year Defined by Health Care Politics, Access to Health Care Wins at the Polls. Health care unexpectedly emerged as a top issue in last Tuesday's off-year elections. Voters in Maine became the first in the nation to approve Medicaid expansion at the ballot box<<http://abcnews.go.com/Health/wireStory/mainers-set-vote-expand-medicaid-50977139>>, with nearly 60 percent voting in favor of the initiative. Though the state's Republican governor has made clear he will try to prevent the expansion from moving forward<https://www.washingtonpost.com/news/the-fix/wp/2017/11/07/maine-could-become-the-first-state-to-expand-medicaid-by-ballot-initiative/?utm_term=.3de6c71b1b5f>, the election gave voters a chance to make their health policy preferences known after Governor LePage vetoed at least five attempts by the legislature to expand Medicaid in as many years. The vote also comes after Maine was thrust into the spotlight earlier this year during the health reform debate in Washington, when Sen. Susan Collins (R-Maine) emerged as a key vote that ultimately thwarted Republican attempts to repeal the ACA and dramatically shrink the Medicaid program. Meanwhile, Virginia voters propelled Lieutenant Governor and pediatrician Ralph Northam into the Governor's Mansion, whose campaign touted Northam's plans to expand Medicaid<<http://www.post-gazette.com/business/healthcare-business/2017/11/08/in-election-glow-Democrats-see-health-care-as-a-winning-issue/stories/201711080262>>. Exit polls confirmed that health care was the most important

issue<<https://www.nbcnews.com/card/early-exit-polls-health-care-most-important-issue-virginia-voters-n818691>> for close to 40 percent of Virginia voters. After 7 years during which toxic ACA politics often hurt Democrats at the polls, unpopular attempts to repeal President Obama's signature domestic policy appear to have flipped the narrative<<https://www.politico.com/story/2017/11/08/obamacare-boost-at-the-polls-244696?jumpEdition=>>> and activated voters passionate about access to care.

House Republican Tax Reform Proposal Moves Forward. Earlier this month, the House unveiled its proposal to reform the U.S. tax code. The bill seeks to dramatically lower individual and corporate tax rates, while eliminating many itemized deductions and replacing them with a larger standard deduction. Under the bill, the Child Tax Credit (CTC) would be increased from \$1,000 to \$1,600. However, the \$600 increase would not be refundable to those who earn too little to pay federal taxes, making the expansion of the credit not useful for the poorest families<<https://www.cbpp.org/research/federal-tax/house-tax-bills-child-tax-credit-increase-excludes-thousands-of-children-in-low>>. Moreover, the bill would prevent some immigrants from claiming the CTC by requiring the child to have a Social Security number for the family to qualify, rather than allowing the child to have an Individual Tax Identification Number (ITIN), which Deferred Action for Childhood Arrivals (DACA) recipients use to file taxes. House Republicans also propose repealing the adoption tax credit that allows families to ease the costs of adoption, the orphan drug credit that incentivizes pharmaceutical [cid:image002.png@01D35E2E.6538BC80] companies to develop drugs for rare diseases impacting fewer than 200,000 Americans, and the medical [cid:image003.png@01D35E2E.6538BC80] expense deduction that helps families with large medical bills. House Republicans also seek to eliminate the tax deduction for student loan interest<<http://www.latimes.com/business/la-fi-student-loan-debt-taxes-20171102-story.html>>, a critical provision for those with large student loan debt. The Senate previewed its own tax reform proposal last week, with dramatic differences between the two bills.<<https://www.politico.com/story/2017/11/09/senate-tax-bill-2017-244743>> Despite the differences, both chambers are considering repealing the ACA's individual mandate to pay for additional tax cuts.<<https://www.cbpp.org/research/health/republicans-considering-increasing-number-of-uninsured-by-millions-raising-premiums>>

Bill to Raise Smoking Age to 21 Introduced in Congress. Last week, Senator Brian Schatz (D-HI) and Senator Dick Durbin (D-Ill.) in the Senate and Representative Diana DeGette (D-Colo.) in the House reintroduced the Tobacco to 21 Act<<https://www.durbin.senate.gov/newsroom/press-releases/durbin-schatz-degette-reintroduce-legislation-to-raise-smoking-age-to-21>>, which would increase the legal age of purchase for tobacco products to 21 years of age. The Food and Drug Administration was first given authority to regulate tobacco products by the Tobacco Control Act in 2009, which for the first time established a nationwide minimum legal tobacco purchase age of 18. The Tobacco Control Act requires congressional action to raise the smoking age. Currently, five states and over 250 municipalities<https://www.tobaccofreekids.org/assets/content/what_we_do/state_local_issues/sales_21/states_localities_MLSA_21.pdf> have raised the tobacco purchase age to 21. While it is unlikely that the bill will advance in the current political environment, the bill's reintroduction is an important part of raising awareness of the issue and building support for raising the tobacco purchase age. Upon introduction, the bill was praised by public health and medical groups<<https://www.cnn.com/2017/11/08/public-health-groups-champion-raising-the-smoking-age-to-21-nationwide.html>> for its potential to prevent youth initiation of tobacco products. The Pediatric Policy Council has endorsed the legislation.

Rates of Adolescent Preventive Care Visits Increased After ACA Implementation, Study Finds. A recent study found<<https://www.washingtontimes.com/news/2017/nov/6/pediatric-patient-visits-increased->

[after-obamacare/](#)> that the number of adolescent patients visiting their doctors increased following implementation of the Affordable Care Act. In particular, rates of preventive care visits increased most for minority and low-income adolescents. Researchers analyzed data from the Medical Expenditure Panel Survey on well visits and preventive services for two time periods, from 2007 to 2009 prior to the ACA's implementation and from 2012 to 2014 after major provisions of the law had taken effect. The results indicate that the ACA was successful in ensuring more patients be able to access routine preventive medicine.

NIH Leadership Lays Out Rationale for Next Generation Researchers Initiative. In an opinion piece in Proceedings of the National Academy of Sciences of the United States of America, NIH Director Francis Collins, as well as Lawrence Tabak, DDS, PhD, and Michael Lauer, MD, laid out the rationale behind the Next Generation Researchers Initiative. Citing growing concerns about the stability of the biomedical research workforce and the particular difficulties that early-career investigators face in securing NIH funding, Drs. Collins, Tabak, and Lauer presented the new effort as a way to ensure a consistent number of well experienced researchers in the years ahead as society expects new cures. To achieve this, the NIH will fund greater numbers of early-stage investigators (ESIs) and early-established investigators (EEIs) in the coming years. Read the opinion piece [here.<http://www.pnas.org/content/114/45/11801.full>](http://www.pnas.org/content/114/45/11801.full)

PPC POLICY COMMENTARY. 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:

- * Environmental health reform in a synthetic world<<http://www.nature.com/pr/journal/v82/n3/full/pr2017168a.html>> by Shetal Shah, MD, Shale Wong, MD, MSPH, Cynthia Bearer, MD, PhD, Heather Brumberg, MD, MPH

- * Executive function and extremely preterm children<<http://www.nature.com/pr/journal/v82/n4/full/pr2017184a.html>> by Paul Chung, MD, MS, Valerie Opari, MD, Irene Koolwijk, MD

- * Influences of medications on the developing fetus: toward deciphering the unknowns<<http://www.nature.com/pr/journal/vaop/ncurrent/full/pr2017199a.html>> by Scott Rivkees, MD, Scott Denne, MD

- * The role of policy in red blood cell storage and transfusion in children<<http://www.nature.com/pr/journal/vaop/ncurrent/full/pr2017213a.html>> by Jean Raphael, MD, MPH