

ACADEMIC AMERICAN PEDIATRIC PEDIATRIC ASSOCIATION SOCIETY ASSOCIATION OF MEDICAL SCHOOL PEDIATRIC DEPARTMENT CHAIRS SOCIETY FOR PEDIATRIC RESEARCH

PPC CAPITOL CONNECTION

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What Matters Now in Washington:

- The Build Back Better Act and the many child health priorities it contains are in doubt after Sen. Joe Manchin called off negotiations in late December. <u>More...</u>
- Congressional leadership is working to negotiate a final Fiscal Year 2022 appropriations bill to unlock spending increases for the remainder of the fiscal year. <u>More...</u>
- Lawrence Tabak, DDS, PhD, began his tenure as acting director of the National Institutes of Health after Francis Collins stepped down from the agency in December. <u>More...</u>
- A key Senate committee advanced Dr. Robert Califf's nomination to serve as Food and Drug Administration commissioner. <u>More...</u>
- Find new funding opportunities, research findings, and more below. More...
- PPC members authored policy commentaries in *Pediatric Research* exploring the intersections of child health policy, advocacy, and pediatric research. <u>More...</u>
- See articles we're reading. More...

DEMOCRATIC EFFORTS TO PASS SOCIAL SPENDING PACKAGE BREAK DOWN AFTER MANCHIN BACKS

OUT. Intraparty negotiations between Democratic leadership and Sen. Joe Manchin (D-W.Va.) on the Build Back Better Act stalled after Manchin declared his <u>opposition</u> to the House-passed version of the bill in late December, foiling plans to pass the legislation before Christmas. The development leaves key child health policies, including substantial investments in health coverage, paid family and medical leave, and early childhood education, in doubt.

Sen. Manchin, the decisive 50th vote in an evenly divided Senate, has long posed challenges to Democratic efforts to dramatically expand the social safety net. While Democratic leadership has attempted to seize on their unified control of Washington to push through progressive priorities supported by most elected Democrats, Sen. Manchin has continually expressed reservations about the size and scope of the bill. His reticence has forced Democrats to pare down their proposal, originally envisioned as \$3.5 trillion or more in spending, through successive rounds of negotiations. Both sides seemed willing to accept \$1.8 trillion in spending when Sen. Manchin pulled out of negotiations roughly half the original sum envisioned.

Where this leaves the centerpiece of the Biden administration agenda is anything but certain. Democrats will need to bring Manchin back to the negotiating table, and it is likely that they will have to make additional concessions to the Democratic senator to get a bill across the finish line. Such concessions might include creating fewer new programs and funding them for a longer period of time. Some have <u>suggested</u> that this could include spending to combat climate change, fund subsidies for childcare and universal pre-K, and extend enhanced subsidies for health coverage through the Affordable Care Act individual market, all policies that Manchin supports. They will also need to assuage his concerns about inflation, which has ticked up significantly over the last year, by ensuring the legislation does not spend more money than it raises in tax revenue. The reality for now is that nobody knows what a negotiated bill might contain.

For the time being, Congress has turned its attention to other priorities like voting rights legislation, which also appears stalled after Democratic efforts to reform the filibuster failed to win enough votes to advance the legislation. Sen. Manchin has indicated in recent days that there have been <u>no efforts to</u> <u>restart negotiations</u> on Build Back Better and that Democrats would need to <u>start from scratch</u> with negotiations. All this means that only time will tell what the fate of the ambitious social spending bill ultimately is.

FUNDING INCREASES FOR KEY PEDIATRIC RESEARCH PROGRAMS ON HOLD WHILE CONGRESS NEGOTIATES ANNUAL APPROPRIATIONS BILL. Congressional appropriators, responsible for determining the amount of money federal agencies and programs get each year, have proposed historic funding increases for pediatric research and child health programs, but pediatric academicians and America's children will have to wait for Congress to act before they see the benefits.

Unable to reach an agreement on final spending levels for Fiscal Year (FY) 2022, Congress has passed a series of continuing resolutions (CRs) that have kept the government open since the new fiscal year began on October 1. The downside of these arrangements is that the federal government's spending levels are frozen at rates negotiated last year, meaning hard won advocacy victories to secure funding increases for the National Institutes of Health (NIH), the Children's Hospitals Graduate Medical Education Program (CHGME), and others have not yet gone into effect.

With the current <u>CR expiring on February 18</u>, congressional leaders will once again attempt to <u>negotiate</u> a bipartisan deal for the current fiscal year. Such a deal will allow appropriators to determine final funding levels for NIH, for which both the House and Senate have proposed increases of more than \$2.5 billion, and other critical pediatric research programs. Significantly, this includes a decision about funding for the Pediatric Subspecialty Loan Repayment Program (PSLRP), a program that promises to alleviate shortages of pediatric subspecialists but which has never been funded. The House has proposed \$25 million in initial funding for PSLRP and the Senate has proposed \$30 million, and implementation of the program by the federal government—a long-sought goal of academic pediatricians—is contingent on Congress enacting a final spending bill for FY 2022. Gun violence prevention research at the NIH and the Centers for Disease Control and Prevention (CDC) is set for a doubling to \$50 million in total under both the House and Senate proposals.

Advocates continue to urge Congress to finalize a deal and avoid yet another continuing resolution, which threatens to drag on until FY 2023 without congressional action.

DR. TABAK BEGINS TENURE AS ACTING NIH DIRECTOR WHILE PERMANENT REPLACEMENT FOR DR. COLLINS BEGINS. Lawrence Tabak, DDS, PhD, took the helm of the NIH on December 20 after Dr. Francis Collins stepped down. Dr. Tabak served as principal deputy director of the NIH under Dr. Collins and as the director of the National Institute of Dental and Craniofacial Research prior to that. A permanent replacement for Dr. Collins is expected to be named by President Biden in the coming months, and his nominee will have to be confirmed by the Senate.

BIDEN NOMINEE FOR FDA COMMISSIONER ROBERT CALIFF APPROVED BY SENATE HEALTH

COMMITTEE. The Senate Health, Education, Labor & Pensions (HELP) Committee <u>approved</u> Dr. Robert Califf's nomination to serve as commissioner of the U.S. Food and Drug Administration (FDA) recently. The vote, which passed with bipartisan support, moves his nomination to the Senate floor, one step closer to final approval by the chamber. Dr. Califf served as FDA commissioner at the end of the Obama administration and would join the agency at a time of enormous public attention over its role shepherding new vaccines and therapeutics through the regulatory process during the COVID-19 pandemic.

KEY RESEARCH UPDATES

- The *Eunice Kennedy Shriver* National Institute of Child Health and Human Development (NICHD) <u>shares initial results</u> from the PreVAIL Kids initiative, an effort to better understand long COVID in children.
- NICHD shares <u>more</u> about how it became the first NIH institute to focus on the entire life course, rather individual disease states, to commemorate its 60th anniversary.
- Top NIH scientists <u>called</u> for the development of a universal coronavirus vaccine in a <u>New</u> <u>England Journal of Medicine article</u>.

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:

- <u>Pediatrician's role in vaccinating children and families for COVID-19: no one left behind</u> by Annabelle de St. Maurice, MD, MPH, Tina Cheng, MD, MPH, and Sherin U. Devaskar, MD
- <u>The importance of trustworthiness: lessons from the COVID-19 pandemic</u> by Mary Leonard, MD, MSCE, DeWayne Pursley, MD, MPH, Lisa Robinson, MD, Steven Abman, MD, and Jonathan Davis, MD

WHAT WE'RE READING

- <u>Build Back Better is a child health bill in disguise</u> by Shetal Shah, MD, chair of the Pediatric Policy Council
- <u>Why More American Children Are Dying by Gunfire</u> (New York Times)