



## INSIDE THIS ISSUE

Senate Test Vote on Ryan Budget Fails

TTAG, NIHB Meet with CMS to Discuss  
Issues Important to Indian Country

Third PPACA Case to Reaches Appeals  
Court

## HILL UPDATES

### Senate Test Vote on Ryan Budget Fails

On May 25<sup>th</sup>, by a vote of 40—57, the U.S. Senate rejected the House-approved budget resolution created by House Budget Chairman, Paul Ryan (R-WI). The highly controversial measure would have reduced federal funding to levels below those of Fiscal Year (FY) 2008, abolished Medicare's fee-for-service program in favor of partially-subsidized private insurance, and converted Medicaid from a federal matching program to state block grants, among other things, while reducing the deficit and eventually balancing the federal budget. Five Republicans joined all Democrats in voting down the proposal, including Senator Lisa Murkowski (R-AK).

Three other potential budget plans also failed in this series of votes. Meanwhile, the remaining five members of the bi-partisan Senate "Gang of Six" budget group continue to work at crafting a plan, and another bi-partisan group of legislators continue talks

with Vice President Biden. Senate Budget Committee Chairman Kent Conrad (D-ND) has delayed committee consideration of a budget resolution until one or both groups reaches consensus.

### House Rejects "Clean" Debt Ceiling Increase

In a symbolic vote designed to fail, the House of Representatives rejected an unconditional increase in the nation's borrowing power Tuesday night. With 82 Democrats joining all 236 Republicans against the measure, the final vote was 318 – 97. The House Majority scheduled the vote in an effort to send a message to the Senate Majority and the Obama administration that any increase must include deficit reduction, namely in the form of spending cuts and entitlement reform.

Budget negotiations with the Gang of Six and the Vice President have both centered on significant reforms in federal spending. And while the Nation reached its debt limit of \$14.3 trillion on May 16<sup>th</sup>, the Administration maintains that a default would not happen until August 2<sup>nd</sup>.

## ADMINISTRATION UPDATES

### Comments on Proposed ACO Rule Due June 6<sup>th</sup>

Public comments on a Centers for Medicare and Medicaid Services (CMS) proposed rule



on Accountable Care Organizations (ACOs) are due this Monday, June 6<sup>th</sup>. In the rule, CMS creates great incentives for providers to become ACOs—provider networks capable of providing the full continuum of care to Medicare patients, while receiving financial incentives and/or penalties based on the quality of care given. The rule requires that these providers meet standards in the following areas:

- Patient/caregiver care experiences
- Care coordination
- Patient safety
- Preventive health
- At-risk population/frail elderly health.

For more information and instructions on comments, please visit:

<http://www.hhs.gov/news/press/2011pres/03/20110331a.html>

### **Community Transformation Grant Letters of Intent Due June 6<sup>th</sup>**

Letters of intent to apply for Community Transformation Grants available under the Patient Protection and Affordable Care Act (PPACA) are due to the Centers for Disease Control and Prevention this Monday, June 6<sup>th</sup>. \$102 million in grants is available to states, counties, territories, and tribes to advance community-based approaches to prevention and wellness.

For more information or to determine eligibility, please visit:

<http://www.cdc.gov/communitytransformation/resources/index.htm#a1>

## **NIHB UPDATES**

### **TTAG, NIHB Meet with CMS to Discuss Issues Important to Indian Country**

Valerie Davidson, Chair of the Tribal Technical Advisory Group (TTAG) to the Centers for Medicare and Medicaid Services (CMS) met with Dr. Donald Berwick, the

CMS Administrator, and key CMS staff, June 3<sup>rd</sup>. With technical support from National Indian Health Board, Ms. Davidson discussed a number of top TTAG issues regarding the relationship between CMS and Indian Country. They included: ensuring that tribal health clinics are treated as federally qualified health centers (FQHCs) when determining eligibility for Medicaid electronic health record incentive payments; ensuring American Indians and Alaska Natives benefit fully from the establishment of health care exchanges; and improving the partnership between CMS and Indian Country.

## **OTHER UPDATES**

### **Third PPACA Case Reaches Appeals Court**

On June 1<sup>st</sup>, oral arguments from the federal government and the Thomas More Law Center were heard by a three judge panel in the 6<sup>th</sup> Circuit Court of Appeals in Cincinnati, Ohio. The case, *Thomas More Law Center vs. Obama*, was dismissed October 7, 2010 by Judge George Caram Steeh of the Eastern District of Michigan. The Thomas More Law Center appealed the decision to the 6<sup>th</sup> Circuit on December 15<sup>th</sup>. The case centers on whether the individual mandate to purchase health insurance is protected by the commerce clause, with Robert Muise, an attorney for the Law Center arguing that the mandate attempts to regulate inactivity and acting U.S. Solicitor General Neal Katyal arguing that the mandate simply regulates the way individuals pay for care that they are certain to eventually need.

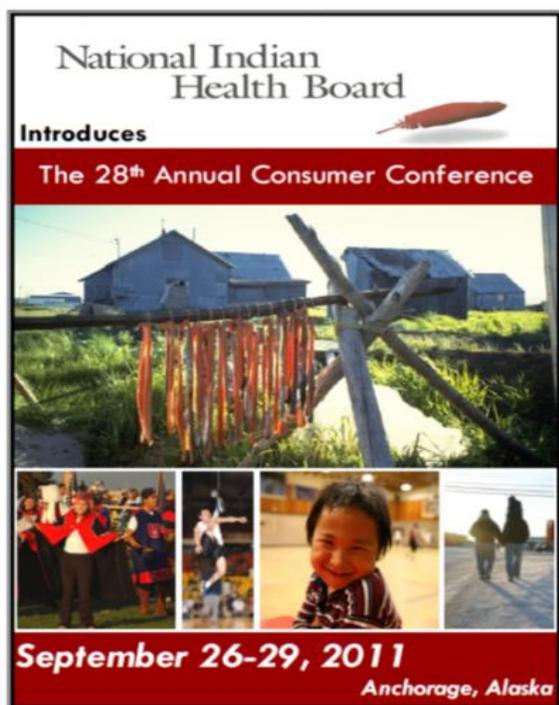
Mr. Katyal also argued that the case should be dismissed because one of the plaintiffs recently purchased employer-sponsored health insurance. In the original suit, the plaintiff in question noted that the purchase of individual insurance represented an undue financial burden to her.



The panel, consisting of Republican appointees Judges Jeffrey Sutton and James Graham, and Democratic appointee Judge Boyce Martin Jr., will first have to decide if the Thomas More Law Center can continue to sue based on this new information. If so, the panel will then rule on the constitutionality of the individual mandate.

For more information and to track existing cases, please visit the Kaiser Health Network at:

<http://www.kaiserhealthnews.org/Stories/2011/March/02/health-reform-law-court-case-status.aspx?#thomasmore>



## NEXT WEEK IN WASHINGTON

### **WHITE HOUSE AND HHS TRIBAL OUTREACH CALL ON ACA**

DATE: TUESDAY, JUNE 7<sup>TH</sup>

TIME: 3:00 PM EST

Conference Call #: 888-552-9182

Pass code: 1598939

### **SENATE COMMITTEE ON INDIAN AFFAIRS HEARING ON, "SETTING THE STANDARD: DOMESTIC POLICY IMPLICATIONS OF THE UN DECLARATION ON THE RIGHTS OF INDIGENOUS PEOPLES"**

DATE: THURSDAY JUNE 9<sup>TH</sup>

TIME: 2:15 PM EST

LOCATION: 628 DIRKSEN SENATE OFFICE BUILDING

WASHINGTON, DC

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