Deal Reached on Debt Ceiling

Following a Presidential announcement on the evening of July 31st that a bipartisan deal on increasing the nation’s debt ceiling had been reached, Congress enacted last-minute legislation that prevented a U.S. default. The Budget Control Act of 2011 was approved by the House of Representatives on August 1st, then passed by the Senate and signed into law by the President on August 2nd.

The deal allows for a minimum increase in the nation’s borrowing power of $2.1 trillion, which will avoid default and ensure the U.S. retains its AAA credit rating until 2013. It immediately enacts 10 years worth of discretionary spending caps (with small cuts in the beginning and larger cuts coming later), which are balanced between defense and non-defense spending, and will lead to about $900 billion in deficit reduction in the next decade. For additional deficit reduction, it establishes a 12-member Congressional Committee tasked with finding another $1.5 trillion in savings over the next decade. The Committee will be appointed by House and Senate party Leadership, and split equally between chambers and parties. The Committee may consider all aspects of the federal budget in deciding how to further reduce the deficit, including entitlement reform and revenue increases. The Committee must report its recommendations to the President by November 23, 2011.

Should the Committee be unable to come to an agreement, an automatic $1.2 trillion reduction in the federal budget over 10 years is triggered. These budget cuts would come equally from mandatory and discretionary spending, with certain programs “sequestered” or protected from cuts. These sequestered programs include Social Security, Medicaid, and the Children’s Health Insurance Program (CHIP). While Medicare would not be completely sequestered in a trigger situation, the law requires that the only cuts to the program come in the form of a 2% provider reimbursement reduction.

At present, the remaining details (including committee appointments) are unclear. NIHB continues to monitor the progress of the deal and analyze its effect on the budget of the Indian Health Service (IHS). More information will be provided as it becomes available.
HEALTH REFORM UPDATES

HHS Issues New Guidelines on Preventive Care for Women

New guidelines intended to ensure women receive preventive health services at no additional cost were announced August 1st by the U.S. Department of Health and Human Services (HHS). Developed by the independent Institute of Medicine, the new guidelines require new health insurance plans to cover women’s preventive services such as well-woman visits, breastfeeding support, domestic violence screening, and contraception without charging a co-payment, co-insurance or a deductible.

Last summer, HHS released new insurance market rules under the Affordable Care Act requiring all new private health plans to cover several evidence-based preventive services like mammograms, colonoscopies, blood pressure checks, and childhood immunizations without charging a copayment, deductible or coinsurance. The Affordable Care Act also made recommended preventive services free for people on Medicare.

This week’s announcement builds on implementation by making sure women have access to a full range of recommended preventive services without cost sharing, including:

- well-woman visits;
- screening for gestational diabetes;
- human papillomavirus (HPV) DNA testing for women 30 years and older;
- sexually-transmitted infection counseling;
- human immunodeficiency virus (HIV) screening and counseling;
- FDA-approved contraception methods and contraceptive counseling;
- breastfeeding support, supplies, and counseling; and
- domestic violence screening and counseling.

New health plans will need to include these services without cost sharing for insurance policies with plan years beginning on or after August 1, 2012.

IHS Provides ACA Behavioral Health Provision Documents

On July 29th at the request of Tribes, the Indian Health Service (IHS) released two documents related to behavioral health provisions in the permanent reauthorization of the Indian Health Care Improvement Act (IHCIA). Section 127 of IHCIA included a required behavioral health hiring plan that IHS completed by the statutory deadline. Section 702 of IHCIA required an inpatient needs assessment be performed within one year of passage of the law, and IHS also completed this assessment by the statutory deadline. To view the documents, please click on the links below:

IHS Behavioral Health Hiring Plan
IHS Behavioral Health Inpatient Needs Assessment

NIHB UPDATES

NIHB Announces 28th Annual Consumer Conference

The National Indian Health Board (NIHB) invites tribal leaders, health administrators, policy makers, and area health boards to the 28th Annual Consumer Conference (ACC) in Anchorage, Alaska at the Dena’ina Civic and Convention Center from September 26 to 29, 2011. The theme for this year’s conference, Health, Hope, and Heroes: Using the Foundations of Tribal Values and Knowledge to Advance Native Health!, will provide a chance for attendees to discuss successes, challenges, opportunities, and the future of health care for American Indian and Alaska Native people.
Meetings before and after the ACC will include tribal consultations conducted by federal agencies such as the Health Resources and Services Administration, health information technology and electronic medical record marketplace, and culture night. During the conference, NIHB plans to offer plenary and workshop sessions on topics including Medicare/Medicaid and tribal health, youth health, health care reform implementation, behavioral health, health information technology and electronic medical records, and public health issues. In addition there are many opportunities for attendees and tribes to be involved in the conference. Click the links below to learn more about those opportunities.

2011 ACC Call for Proposals  
2011 ACC Sponsorship Packet  
2011 Awards Nomination Form  
2011 Exhibitor Application

You can register and learn more about the conference details here. If you register before September 9, 2011 for the discounted rate of $400, after September 9, 2011, registration will be $475. For more details, visit the ACC’s website or contact NIHB Deputy Director, Evangelyn “Angel” Dotomain.

**NEXT WEEK IN WASHINGTON**

**CONGRESS IS OUT OF SESSION**

**MMPC CONFERENCE CALL**  
DATE: AUGUST 9th  
TIME: 2:00 PM EDT  
PHONE NUMBER: 866-303-3137  
pASSCODE: 414526#

**WHITE HOUSE AND HHS TRIBAL OUTREACH CALL ON THE AFFORDABLE CARE ACT**  
DATE: AUGUST 9th  
TIME: 3:00 PM EDT  
PHONE NUMBER: 888-552-9182  
pASSCODE: 1598939

**SENATE COMMITTEE ON INDIAN AFFAIRS OVERSIGHT FIELD HEARING ON, “EMPOWERING NATIVE YOUTH TO RECLAIM THEIR FUTURE”**  
DATE: AUGUST 9th  
TIME: 1:30 PM MDT  
LOCATION: POPULAR HIGH SCHOOL  
400 4th AVENUE WEST  
POPLAR, MONTANA

Sign Up for Washington Report, at:  

For More Information Contact:  
Jennifer Cooper, JD, Legislative Director  
jcooper@nihb.org or  
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