House Proposes Deep Cut in FY 2013 LHHS-ED Appropriations Bill

Today, July 18, 2012, the House of Representatives Labor, Health and Human Services, Education, and Related Agencies (LHHS-ED) Appropriations Subcommittee approved their draft bill for FY 2013 by a vote of 8-6, with Rep. Jeff Flake (R-AZ) breaking party lines to vote against the measure as he thought the bill should have even deeper cuts. The bill provides a total of $150 billion, which falls $6.3 billion below the FY 2012 enacted funding level and $8.8 billion less than the spending caps established through the *Budget Control Act (BCA) of 2011*. By comparison, the full Senate Appropriations Committee approved their FY 2013 LHHS-ED appropriations bill on June 14, 2012 and provided $158.8 billion (a $2 billion increase from FY 2012) in discretionary spending, adhering to levels outlined in BCA. For more information on the Senate funding levels, see: http://www.aacn.nche.edu/government-affairs/FY13FundingChart.pdf

The text of the draft legislation was released yesterday, July 17, and in a press statement Chairman of the House Appropriations Committee Rep. Hal Rogers (R-KY) stated:

“This legislation reflects our strong commitment to reduce over-regulation and unnecessary, ineffective spending that feeds the nation’s deficits and hampers economic growth. A careful look was given to all programs and agencies in the bill, with the budget knife aimed at excess spending and underperforming programs, but also with the goal of making wise investments in programs that help the American people the most.”


In reaction to the draft legislation, Ranking Member of the House Appropriations Committee, Rep. Norm Dicks (D-WA), stated,

“The Labor HHS Education bill released today, the last bill to be considered, is the most partisan we’ve seen this year. The subcommittee Chairman proposes a bill loaded down with highly controversial partisan riders and too many programmatic cuts to list… This bill is an extremely partisan proposal, stands little chance of even being brought up on the House floor, and will rightly be disregarded by both the Senate and the President.”


Outlined below are funding levels proposed in the bill of interest to AACN members:

- The draft bill provides the Health Resources and Services Administration (HRSA) $5.9 billion in discretionary budget authority ($453 million less than FY 2012).

- The Health Professions and Nursing Workforce Development programs (Title VII & Title VIII of the *Public Health Service Act (PSA)*) along with Title III of PSA are provided $623.272 million. While Title VII and VIII specific funding levels will not be available until the committee releases its report, the bill reportedly
includes over $100 million in cuts to the health professions, including a 14% cut to Title VIII, funding the Nursing Workforce Development programs at approximately $197 million. Specific to the Title VII Health Professions programs, the Area Health Education Centers, Health Careers Opportunity Program, and Scholarships for Disadvantaged Students programs were all eliminated.

- The bill provides $30.6 billion (level funding) for the National Institutes of Health, and allocates $144.597 million to the National Institute of Nursing Research (level funding from FY 2012).
- The bill also eliminates funding for the Agency for Healthcare Research and Quality (AHRQ) dedicated to supporting research to help the public make informed healthcare decisions and improving healthcare services.
- The Centers for Disease Control is funded at $6.123 billion, an 11% cut in funding.
- The bill completely eliminates funding for the Affordable Care Act (ACA), thereby eliminating the Prevention and Public Health Fund, which was created to serve as the first dedicated stream of mandatory federal funding for public health initiatives and workforce training. The ACA stipulates that $1.25 billion is to be made available through the fund in FY 2013.

To view the House LHHS-ED Appropriations Subcommittee draft bill, see: http://appropriations.house.gov/uploadedfiles/bills-112hr-sc-ap-fv13-laborhhsed.pdf

AACN is concerned with the steep cuts proposed in the House LHHS-ED Appropriations Subcommittee bill. AACN will be working with our colleagues in the health and education communities to protect funding for these programs, which are critical to our nation’s wellness. The fiscal and political reality surrounding this year’s appropriations process creates an increased urgency for AACN members to react to these expansive cuts. In the weeks and months to come, please watch for AACN’s action alerts that will request your support in urging Congress’ steadfast support for nursing education, research, and practice in FY 2013.

AACN will continue to keep you apprised of the appropriations process as it unfolds.

To view information on AACN’s Appropriations advocacy, see: http://www.aacn.nche.edu/government-affairs/appropriations

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**Supreme Court Upholds Affordable Care Act**


The debate regarding the effectiveness of the ACA continues as the 2012 Congressional and Presidential races unfold. On July 11, 2012, the House of Representatives voted on Repeal of Obamacare Act (H.R.6079), which passed 244-185.

The law will newly insure 32 million Americans when fully implemented. With the ACA being upheld as well as the numerous factors creating a demand for healthcare services, AACN continues to raise awareness to Congress and the Administration that the nursing workforce must be bolstered in order to meet the impending influx of patients. Federal support for the Title VIII Nursing Workforce Development programs and other health professions training programs is critical in the coming years.
Non-Defense Discretionary Funding: 3,000 Organizations Unite to Protect Against Sequester

As Congress works toward reducing the federal deficit, widespread support for non-defense discretionary (NDD) funding remains imperative. Historically, discretionary spending for defense has been safeguarded from severe spending cuts, leaving all other non-defense discretionary programs affected by the need to reduce the deficit. In the face of drastic cuts imposed by the impending sequester, and a series of automatic spending cuts mandated through the Budget Control Act of 2011, thousands of organizations have united to relay to Congress and the public the importance of seeking a balanced approach toward federal deficit reduction.

Last month, over 300 federal advocates convened as part of the larger NDD community at the NDD Summit—a network created to coordinate advocacy efforts surrounding sequestration. Led in part by the Coalition for Health Funding of which AACN is a member, the NDD Summit addressed the importance of advocating for a balanced approach—one that takes into consideration funding allocations relative to program budget size and shares the burden of funding cuts appropriately.

A sign-on letter circulated among the NDD community expressed the devastating impact further funding cuts would pose on the hundreds of millions of Americans who benefit from NDD programs, including education, health, scientific research, public safety, and job training. The letter states that if no action is brought forth by Congress and the President to repeal sequestration, NDD programs overall will have assumed as much as a 20% cut between fiscal years 2010 and 2021.

At the time of its release, the letter had garnered nearly 3,000 signatures from local, state, and national organizations. AACN is one of these supporting signatories. The letter demonstrates the powerful dedication to protecting NDD programs necessary to prevent further depletion of programs vital to the public.


NIH Director Testifies Before Congress the Impact of Sequestration

Last month, National Institutes of Health (NIH) Director Francis Collins, MD, PhD, spoke to the House Energy and Commerce Subcommittee on Health about the potential impact of sequestration on NIH programs and goals. The sequestration will be put into place if the Congress does not pass alternative legislation to counteract these cuts prior to January 2, 2013. Representatives Henry Waxman (D-CA) and Frank Pallone (D-NJ) inquired how NIH would manage the 7.8% cut in funding should sequestration occur. Dr. Collins testified that large sweeping, across the board cuts to nearly all NIH programs would be necessary to absorb the sequester’s harsh effect, posing severe losses to the world’s largest funder of biomedical research. Dr. Collins testified that sequestration would diminish the number of grants by 2,300, bringing research success rates to an historic low. In FY 2012, NIH’s budget provided funding for 50,000 research projects and research training awards executed by over 300,000 researchers at more than 2,600 institutions. Dr. Collins asserts, “Every state, along with nearly every Congressional district, receives NIH research funding… NIH basic research and translational and clinical advances have sparked a revolution in the diagnosis, treatment, and prevention of disease. Biomedical research funded by NIH has prevented immeasurable human suffering and yielded economic benefits as well as helping tens of thousands of U.S. citizens live longer, healthier, and more productive lives.”

To read Dr. Collins’ full testimony, see: http://republicans.energycommerce.house.gov/Media/file/Hearings/Health/20120621/HHRG-112-IF14-Wstate-CollinsF-20120621.pdf

**HHS to Host Forums on ACA Implementation- Register Now!**

The Supreme Court’s ruling to uphold the *Affordable Care Act* (ACA) has created questions as to how the future implementation of the law’s provisions will affect state and community stakeholders. The U.S. Department of Health and Human Services (HHS) invites states and community stakeholders to attend upcoming forums to address next steps in implementation of the healthcare law and ask questions about work needed to build Affordable Insurance Exchanges in every state. HHS leadership will provide an overview of provision related to insurance coverage effective starting 2014.

The forums will be particularly useful to stakeholders who seek information regarding next steps in the creation of a more competitive private health insurance marketplace through the establishment of Affordable Insurance Exchanges.

Four regional sessions outlining the anticipated benefits and challenges of establishing the exchanges will be held in August. Sessions are open to the public, and registration is required.

To RSVP for one of the following sessions, visit: [https://www.quickbase.com/db/bg92mriu2](https://www.quickbase.com/db/bg92mriu2)

**Each session is scheduled from 9:00-4:30pm.**

**August 14: Washington, DC**
Hubert H. Humphrey Building, Great Hall
200 Independence Ave., SW
Washington, DC 20201
*Note: This session will also be webcast*  

**August 21: Chicago**
Social Security Administration, Center Auditorium
600 West Madison Street
Chicago, IL 60661

**August 15: Atlanta**
National Archives at Atlanta
5780 Jonesboro Road
Morrow, GA 30260

**August 22: Denver**
Davis Auditorium in Sturm Hall, University of Denver
2000 E. Asbury Ave.
Denver, CO 802

For more information on the Affordable Care Act and Exchanges, see: [www.healthcare.gov/exchanges](http://www.healthcare.gov/exchanges).

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**Community Health Centers to Serve Additional Patients, Create New Jobs**

Last month, Health and Human Services (HHS) Secretary Kathleen Sebelius announced a total of $128.6 million in new awards to expand community health centers in 41 states, the District of Columbia, Puerto Rico, and the Northern Mariana Islands. The award funding—granted through the *Affordable Care Act*—will be allocated to 219 health centers and is anticipated to expand access to care to more than 1.25 million additional patients. Moreover, these centers will require additional health professionals and are expected to create approximately 5,640 new jobs for nurses, physicians, dental care providers, and support staff. “The health care law is making our community health centers stronger and ensuring more Americans get the care they need,” said Secretary Sebelius.

Award applicants included public or nonprofit private entities, tribal organizations, faith-based and community-based organizations.
To view a complete listing of Health Center New Access Point grants visit:  

To learn more about HRSA’s Health Center Program, visit http://bphc.hrsa.gov/about/index.html.

**NIH Director’s Early Independence Awards Funding Opportunity**

The National Institutes of Health (NIH) Common Fund announces the 2013 NIH Director’s Early Independence Awards (EIA) opportunity for exceptional scholars. EIA allows chosen participants to accelerate their research career by permitting them to circumvent traditional post-doctoral training. The NIH Common Fund created the EIA program as part of an initiative to support High Risk-High Reward research. This type of research is defined by highly innovative ideas for which, because of their pioneering nature, it may be difficult to secure traditional funding. The High Risk-High Reward program is part of the NIH Common Fund’s broader mission to support innovative research that has the potential to catalyze further research in NIH focus areas.

To apply, candidates must be within one year of completion of their terminal degree or clinical residency. **The deadline for letters of intent is December 30, 2012. The application deadline is January 30, 2013.** Institutions interested in hosting EIA awardees should communicate this on the Matching Web Resources website.

For more information about the EIA application process, visit:  

To visit the Matching Web Resources site:  

For more information about the NIH Common Fund, see: http://commonfund.nih.gov

**HRSA’s Division of Nursing to Hold Diversity Summit**

The Health Resources and Services Administration's (HRSA) Bureau of Health Professions, Division of Nursing, will host an invitational summit examining diversity within the nursing workforce. “Nursing in 3-D” will gather workforce experts, nursing leaders, and diversity stakeholders to focus on the social, economic, political, and environmental impacts of diversity patient outcomes and health disparities. The summit is open to the public on a first-come, first-serve basis, and will be held from 7:30am to 5:00pm on August 16, 2012, and from 8:00am to 1:00pm on August 17, 2012 in Bethesda, MD.

To view more information in the Federal Register’s notice including registration details, see:  

**Calling Nominations for the 2012 AACN Policy Luminary Award**

Granted annually to an exceptional nursing leader in the realm of public policy, the AACN Policy Luminary Award highlights the achievements and contributions made by this individual to the advancement of the nursing profession. Initiated in 2009, the Policy Luminary Award has been received by Dr. Mary Wakefield, Administrator of the U.S. Health Resources and Services Administration, Dr. Mary Naylor, Marian S. Ware Professor in Gerontology at the
University of Pennsylvania and Director of New Courtland Center for Transitions and Health, and, most recently, Dr. Ellen-Marie Whelan, Senior Advisor at the Center for Medicare & Medicaid Innovation.

AACN’s Government Affairs Committee is seeking nominations for this year’s award, which will be presented at the AACN 2012 Fall Semiannual Meeting. Each nomination package should include two letters of recommendation from peers, the nominee’s CV, and a one page bio-sketch. Nominations are due Monday, September 17, 2012, by 5pm E.T. For more information on the Policy Luminary Award, see: http://www.aacn.nche.edu/membership/awards/CallforNomPolicy.pdf

**Sponsor the 2013 AACN Student Policy Summit!**

The fourth annual Student Policy Summit will be held March 17-19, 2013 in Washington, DC. The Summit is open to baccalaureate and graduate students of AACN member schools who desire to gain a more in-depth understanding about the legislative process and nursing’s role in healthcare policy. Summit sponsorship ensures that the cost of attending the Summit is affordable for all students, and that the Summit is a highly rewarding experience.

Based on level of sponsorship, institutions that choose to sponsor have the opportunity to have their name and logo featured on Summit materials. Higher levels of sponsorship cover the cost of registration for a limited number of students awarded on a merit-basis.

This year’s Summit, which convened March 25-27 in Washington, DC, was a great success due largely in part to the generous support of its sponsors. In attendance were over 100 students who represented 41 schools across 23 states. Summit attendees were provided a rich experience that included discussion sessions with leadership from federal departments and agencies, as well as the opportunity to meet with members of Congress and their staff to discuss issues relating to nursing education, research, and policy.

*Sponsorship opportunities are limited and are granted on a first-come, first-serve basis. To view sponsorship packages for the 2013 Summit, see: http://www.aacn.nche.edu/government-affairs/SPSSponsorPackages.pdf

For more information on the 2013 Student Policy Summit, including registration, visit: http://www.aacn.nche.edu/events/2013/03/17/student-policy-summit

**Nursing Leader Appointed to AARP Council**

AARP recently appointed Barbara J. Sabol, MA, RN, to serve on its National Policy Council (NPC). As a member of the NPC, Ms. Sabol will join a select group of AARP members who work to develop and advance AARP’s strategic policy direction. The council represents a diverse array of professions including health care, law, and public service. The members combine their respective expertise to formulate an annual advocacy agenda presented to the AARP Board of Directors for approval. Ms. Sabol has formerly served as commissioner for the New York City Human Resources Administration, as well as Executive Deputy Commissioner of New York Department of Social Services, and Secretary of the Kansas Departments of Health and Environment and aging. Ms. Sabol’s full AARP bio along with a list of all AARP NPC members can be found here: http://championnursing.org/sites/default/files/AARP-NPC-Brief-Bios-2012-2014.pdf