

# The Washington Insider

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## Economy Triggers Flurry of Congressional Action

### ***Congress Passes Recovery Bill, 2009 Omnibus, and Begins FY 2010 Budget***

Since the inauguration of President Obama, long-term and short-term economic concerns have dominated the work of the new administration and the new 111<sup>th</sup> Congress. With the nation's economic woes escalating, Congress wasted no time passing an economic recovery package and focusing on budget work with significant implications for low-income communities.

### **Economic Recovery Package**

First on the agenda was a \$787 billion economic recovery package, the American Recovery and Reinvestment Act of 2009 (H.R. 1). In February and early March, the House and Senate developed their versions of a recovery package, each of which exceeded \$800 billion. It soon became clear that gaining the support of a block of three moderate Republican senators – whose votes were essential to final passage – required compromise. To gain consensus, the package was trimmed to \$787 billion, with concessions in areas such as education spending and taxes.

The final legislation was approved by the House and the Senate on February 13, by a vote of 246 to 183 and 60 to 38 respectively. President Obama signed the American Recovery and Reinvestment Act into law on February 17, commenting that he could not pretend “that today marks the end of our economic problems, nor does it constitute all of what we have to do to turn our economy around. But today does mark the beginning of the end, the beginning of what we need to do to create jobs for Americans.”

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The economic recovery package includes many provisions that will benefit the memberships of the Alliance and UNCA. Key provisions include \$86.6 billion for the Federal Medical Assistance Percentage (FMAP), \$2.1 billion for Head Start and Early Head Start, \$1.2 billion for Workforce Investment Act (WIA) youth funds, and \$2 billion for the Child Care and Development Block Grant (CCDBG). For a full analysis of the recovery legislation visit: [http://www.alliance1.org/Public\\_Policy/budgets/Economic\\_Recovery\\_Summary.pdf](http://www.alliance1.org/Public_Policy/budgets/Economic_Recovery_Summary.pdf).

The Washington office, which began advocating for recovery legislation in the summer of 2008, has now shifted its focus to helping members understand the contents of the package and how to access these new funding streams. For additional information about accessing recovery funding, or to join the member-only federal grants opportunity email list, contact [plester@alliance1.org](mailto:plester@alliance1.org).

### **2009 Spending**

President Obama approached the omnibus FY 2009 appropriations bill as “last year’s business,” but that did not prevent the omnibus from being caught up in this year’s politics over earmarks.

In the run up to the presidential election in 2008, Congress passed only three of twelve annual appropriations bills for fiscal year 2009—defense, veterans affairs, and homeland security. The remaining nine bills were funded through a continuing resolution (CR). The CR maintained government funding at fiscal year 2008 levels through March 11, 2009.

In February, Congress began work on an omnibus package that included all nine outstanding appropriations bills. The nine bills included the labor, health and human services, education appropriations bill, which funds the majority of programs of interest to the memberships of the Alliance and UNCA.

The House passed its \$410 billion omnibus package (H.R. 1105) on February 24. In the Senate, much of the debate focused on the issue of earmarks, with many Republicans criticizing the package for containing too much “pork.” Sen. John McCain (R-AZ) called the earmarks in the omnibus, “unnneeded, unwanted, [and] unnecessary.” Democrats countered that the package featured unprecedented transparency and that earmarks accounted for only about one percent of the total cost.

The Senate passed a package that was identical to the House version on March 10. President Obama signed the omnibus into law on March 11.

A number of programs that are important to the membership of the Alliance and UNCA saw increases through the omnibus. For example, the 21<sup>st</sup> Century Community Learning Center (21<sup>st</sup> CCLC) program received a \$50 million increase, the Community Services Block Grant (CSBG) received a \$46 million increase, and the Adoption Incentives Program received a \$36 million increase. In some instances, increases will support expanded services. However, many programs experienced flat funding or modest increases that do not keep pace with inflation. For a full analysis of program funding in the 2009 omnibus visit:

[http://www.alliance1.org/Public\\_Policy/budgets/Omnibus\\_FY\\_2009.pdf](http://www.alliance1.org/Public_Policy/budgets/Omnibus_FY_2009.pdf) .

### **Obama Releases Draft 2010 Budget**

In late February, President Obama released a draft budget proposal for FY 2010, which starts October 1, and laid out his plan for reducing the federal deficit over the next ten years. Congress is working to pass a joint budget resolution some time in early April.

President Obama’s budget includes funding for health reform, education, and environmental concerns. The budget uses proceeds from taxes on households that earn more than \$250,000 and a cap-and-trade system for carbon emissions to create a \$630 billion reserve fund to offset the cost of health reform.

Republicans quickly criticized the size of the president’s budget and the scaling back of President George W. Bush’s tax cuts. House Minority Leader John Boehner (R-OH) commented, “this budget makes clear that the era of big government is back.”

President Obama responded to criticism explaining, “what I won’t do is sacrifice investments that will make America stronger, more competitive and more prosperous in the 21<sup>st</sup> century, investments that have been neglected for too long.”

Obama’s budget proposal aims to cut the deficit in half by the end of his first term. However, a Congressional Budget Office (CBO) analysis released in March suggests that the president’s initial budget projections may have been too optimistic. While the Obama budget projects a deficit for 2009 that is 12.3% of GDP, CBO projects a fiscal year 2010 deficit reaching

13.1% of GDP under the proposal. At this rate, deficits would surpass 4% of the overall economy over the next ten years – a level that Peter R. Orszag, the White House budget director, has called “unsustainable.”

### **Budget Committees Approve Resolutions**

House and Senate Democrats approached this year’s budget with the dual goals of supporting Obama’s plan while addressing the nation’s long term financial solvency. House Budget Committee Chairman John M. Spratt (D-SC) commented, “we will follow President Obama’s lead...and produce a budget that cuts the deficit in half over the next four years, but still invest in areas critical to our future such as energy, education, and healthcare.”

Since then, both the House and Senate budget committees have approved budget resolutions on party line votes. The House and Senate plans are similar to President Obama’s draft outline, with some modifications to reduce the deficit. President Obama requested \$540 billion in non-military domestic spending. The Senate plan reduces this amount by \$15 billion and the House reduces it by \$7 billion.

The committee plans both include a reserve fund for health care reform but omit specifics on how those funds will be generated. The resolutions leave out the cap-and-trade and tax measures that Obama proposed.

Republicans lambasted the committee resolutions, with Sen. John Cornyn (R-TX) saying, “it would be prudent at a time we are asking the American people to tighten their belts a little bit that the government tighten its belt.” Senate Budget Committee Chairman Kent Conrad (D-ND) responded to critics by pointing out that the Senate plan cut back spending from Obama’s budget by \$160 billion over five years.

A budget resolution outlines spending totals that set the appropriations committee’s funding parameters for the fiscal year. Generally, appropriations funding levels for specific programs are set before the new fiscal year begins on October 1.

### **Tactical Maneuvering on Health Reform**

The House version of the budget resolution includes a controversial procedural measure called reconciliation. This tactic allows the committees to pass policy related to deficit reduction by a majority vote, which negates the possibility of a filibuster. If reconciliation

instructions are included in the resolution, it would pave the way for the Democrat’s priorities in health care reform.

Democratic leaders have not yet ruled out this tactic, but some leaders say they would prefer to enact reform with bipartisan support. Sen. Sherrod Brown (D-OH) commented, “if [Republicans] are not going to do it bi-partisanly, than [reconciliation] has to be an option.” Senate Republicans charged that Democrats are only taking a non-committal stance on reconciliation to gain political credit for bipartisan outreach, but that they will eventually use this partisan tactic.

Reconciliation has been used previously by Presidents Reagan, Clinton, and George W. Bush to push through legislation. Decisions about reconciliation and other details of a final joint budget resolution will be determined in a conference between the House and the Senate, expected in early April.

### **Earmark Reform**

Following vocal criticisms of the earmarks included in the 2009 omnibus package enacted in March, President Obama stated publicly that all future earmarks should have a “legitimate and worth public purpose.” Obama called for a new policy that would require every earmark be made public by its sponsor, subject all earmarks to a 20 day review by the relevant executive branch agency, and award earmarks to for-profit companies only through a competitive bidding process.

One earmark reform proposal (Sen. Res. 63), introduced by Sen. Claire McCaskill (D-MO) and Sen. Mark Udall (D-CO), goes further by proposing a ban on all earmarks for private (for-profit and non-profit) organizations. The proposal does not appear to have gained political traction, but the Alliance and UNCA are monitoring it closely.

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## Congress, Administration Move Forward on Health Reform

### **Agreement on Need for Action, But Not Details**

With increasing numbers of Americans losing health insurance or experiencing reductions in benefits, leading members of Congress and the Obama administration say they are committed to achieving comprehensive health care reform this year. Support also runs high among interest groups, ranging from consumer advocates to business leaders and private insurance representatives. Despite agreement on the need for reform, however, the major players have not yet reached a consensus on specifics.

In March, President Obama invited 150 lawmakers, industry representatives, labor leaders, consumer advocates, and policy experts to a "Forum on Health Reform" at the White House. In his opening remarks, Obama stressed the need for a commitment from Congress to overcome the intense opposition from special interests that derailed health reform in 1993-94. He expressed faith that all sides would eventually come together, saying, "this time, the call for reform is coming from the bottom up, from all across the spectrum – from doctors, nurses and patients; unions and businesses; hospitals, health care providers and community groups." He urged lawmakers to send a health reform bill to his desk this year.

There is some reason for optimism. In March, the health insurance industry announced it would end the practice of charging sick people more for insurance if lawmakers agreed to enact a mandate requiring individuals to obtain health insurance. Shortly after that, a broad coalition of groups, including consumer groups and the insurance industry, announced agreement on a broad set of principles for reform. Among the 18 signatories were the American Medical Association, AARP, Families USA, America's Health Insurance Plans, and Pharmaceutical Research and Manufacturers of America. The group, known as the "Health Care Dialogue," announced support for universal coverage, strengthening existing public programs, improving wellness and prevention efforts, and increasing the quality and value of health services.

However, the group was unable to reach a consensus on several other aspects of reform.

One was whether a new public insurance plan similar to Medicare, but open to everyone, should be created. Proponents argue that a public plan would lower costs by competing against private plans and forcing insurers to streamline and improve their products.

Opponents fear that the plan would force private insurers out of business by undercutting their prices to such an extent that they could no longer attract customers.

Another controversial issue is President Obama's proposal to partially pay for reform by limiting the itemized charitable deduction for high-income earners. Critics fear that it would reduce charitable giving. The Alliance for Children and Families and UNCA have taken no position on this issue.

Efforts to pay for the overhaul effort are complicated by congressional budget rules, known as pay/go, that require any new spending to be offset with spending reductions or tax increases, thus maintaining budget neutrality. OMB Director Peter Orszag indicated administration support for this position when he testified before the Senate Finance Committee and said that a health overhaul must be budget-neutral over 5-10 years.

This issue will likely be settled by the budget resolution, the broad budgetary outline that has been passed by the House and Senate budget committees (see separate story, this issue). Among other issues is the question of whether the resolution will include instructions for reconciliation, a process that would allow the budget to move through the Senate with only a majority vote as opposed to 60 votes usually needed to end a filibuster. Reconciliation could help Democrats pass health care reform without relying on Republican votes.

Chairman of the Senate Finance Committee Max Baucus (D-SD) has announced a schedule of hearings and his intent to produce a proposal by the end of summer. Senator Edward Kennedy (D-MA), whose Health, Education, Labor, and Pensions Committee also has jurisdiction over some health care issues, has formed a "workhorse group" made up of consumer, provider, and industry advocates. Staff for the two committees say they have been in close collaboration but have not reached any final details on language for a reform bill.

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## Congress Creates Medicaid and CHIP Payment and Access Commission

### *New Commission Offers Opportunities to Increase Provider Reimbursement*

As part of the Children's Health Insurance Program Reauthorization Act of 2009, Congress created a new commission to study payment rates and access for Medicaid beneficiaries: the Medicaid and CHIP Payment and Access Commission (MACPAC). MACPAC has its roots in a series of payment reform commissions stretching back to 1985, efforts which have been successful at raising Medicare rates.

Provider and children's health advocates have long called for a similar commission to study Medicaid payment rates and their effect on patients' access to health services. Although most low-income children are eligible for Medicaid, low reimbursement rates limit provider participation in Medicaid and decrease access to health services. In a 2000 survey on physician participation in Medicaid, the American Academy of Pediatrics found that 54 percent of pediatricians said Medicaid payments do not cover their overhead, and 56 percent cited low reimbursement as a reason for limiting their participation in the program.

MACPAC is tasked with reviewing Medicaid policies (including payment policies) that affect beneficiaries' access to covered health services and making recommendations to Congress regarding these policies. MACPAC does not constitute a federal requirement that states raise their reimbursement levels; rather, it provides a source of unbiased, expert information for Congress to use in debating federal Medicaid policy.

It is premature to speculate about what recommendations MACPAC may eventually make to Congress, or the level of congressional support those recommendations might generate. However, if MACPAC does recommend some form of reimbursement increase, as advocates hope, Alliance and UNCA members might be able to anticipate some of the following potential benefits:

- **Increased Reimbursement for Medicaid Services Generally:** The American Academy of Pediatrics has recommended that Congress raise Medicaid rates to at least parity with

Medicare. If MACPAC were to endorse this recommendation, and if Congress were to pass it, Alliance and UNCA members who provide Medicaid-covered health services to children could expect to see a significant increase in reimbursement for any services they provide that are currently reimbursed at a lower rate than Medicare.

- **Increased Reimbursement for Rehabilitative Services and Targeted Case Management:** A mandated increase in reimbursement rates could be especially helpful for Alliance and UNCA members if the increase applies to the rehabilitative and targeted case management options of Medicaid, two types of services provided by hundreds of our members.
- **Potential Opportunity to Serve on Commission:** Mental and behavioral health professionals are not mentioned in the text of the bill, making it especially important to ensure that these providers and the needs of children who use these services are fairly represented on the commission. Many Alliance and UNCA members have a high degree of expertise in the needs of children with severe mental, behavioral, and developmental health needs.
- **Improvements in Children's Health:** Many Alliance and UNCA members do not provide health services directly, but work closely with children that need mental and physical health care. As noted above, it can often be hard for patients or patient advocates to find primary care and specialty providers who will accept Medicaid. If MACPAC and Congress are able to increase low-income children's access to health care, these member organizations will see great improvements in the health of the children they serve.

The Government Accountability Office is charged with setting up MACPAC, which must be operational by January 1, 2010. GAO must establish a nomination process for the commission and also determine the source and amount of funding needed. Congress has

already authorized “such sums as may be necessary” to fund the work of the commission, but there has not yet been an appropriation of federal funds.

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## **House Passes Residential Bill**

### ***Legislation Faces Unclear Future in Senate***

On February 23, 2009, the House of Representatives passed the “Stop Child Abuse in Residential Programs for Teens Act of 2009” (H.R. 911) by a vote of 295-102. The legislation, introduced on February 9, 2009, by Representatives George Miller (D-CA) and Carolyn McCarthy (D-NY) is almost identical to H.R. 6358, the “Stop Child Abuse in Residential Programs for Teens Act of 2008,” from the 110<sup>th</sup> Congress. It is unclear when the Senate might take up similar legislation.

Rep. Miller originally introduced the bill in 2008 to address what he claimed was a “weak patchwork of regulations” that allowed programs in some states to operate without oversight, leading in some cases to instances of abuse and even death. The Government Accountability Office (GAO) has investigated several of these cases and Congress has held several hearings since the fall of 2007. In their reports, GAO found gaps in both state licensing standards and oversight of some residential programs, with some states requiring no licensing at all. A separate GAO report found that some private residential programs use deceptive marketing practices to convince parents to send their troubled children to such programs.

In reintroducing the legislation this year, Rep. Carolyn McCarthy, chairwoman of the House Subcommittee on Healthy Families and Communities, said “...it is crucial that federal standards are set in place to prevent the abuse, neglect and deceptive marketing practices that have devastated so many children and families.”

The reintroduced legislation directs the Assistant Secretary for Children and Families of the Department of Health and Human Services (HHS) to implement 14 minimum standards to protect children from abuse in residential programs, including prohibitions on certain disciplinary techniques such as seclusion and restraint as well as withholding of food and

water. The bill would establish a national toll-free hotline to report abuse, require state investigation of child abuse reports, and institute civil penalties of up to \$50,000 per violation for programs that violate the standards.

The bill transfers responsibility for monitoring and implementing standards to the states within three years. States’ ability to continue receiving Child Abuse Prevention and Treatment (CAPTA) funds would be contingent on meeting such standards within the given time period. A more complete analysis of the bill can be found on the Alliance for Children and Families’ website:

[http://www.alliance1.org/Public\\_Policy/welfare/StopChildAbuse\\_HR911.pdf](http://www.alliance1.org/Public_Policy/welfare/StopChildAbuse_HR911.pdf).

Concerned with potential over-regulation of facilities that are already state-licensed, the Alliance for Children and Families is working with several other national organizations and Senate staff to craft compromise legislative language. The Alliance has also established an advisory group to review this language. Members who are interested in participating in this advisory group should contact Patrick Lester at [plester@alliance1.org](mailto:plester@alliance1.org).

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## **National Service Expansion to Become Law**

### ***AmeriCorps More Than Tripled In Size***

On March 31, Congress passed the Edward M. Kennedy Serve America Act (H.R. 1388), legislation that reauthorizes the AmeriCorps program, tripling the number of funded positions. The President is expected to sign the bill into law upon his return from London. The final bill reflects months of compromise between the two bodies of Congress and both political parties.

According to the Urban Institute’s Nonprofit Almanac, nonprofit organizations accounted for almost 10% of jobs and 5% of Gross Domestic Product (GDP) in 2006. However, with the nation more than a year into one of its worst economic downturns in decades, demands being placed on the social service-providing nonprofit sector are higher than ever, even as foundation support, charitable giving and other revenue sources have dried up.

Leaders of the nonpartisan Service Nation campaign believe the new service legislation will

help jumpstart the nation's flagging economy by bringing services into high-need areas at a low cost. The law will utilize already existing groups to create jobs and service opportunities, instead of relying on government bureaucracy.

The legislation authorizes new funding for the Corporation for National and Community Service for fiscal years 2010 through 2014, triples the number of AmeriCorps volunteers from 75,000 to 250,000, and establishes five new service corps and several new programs that will engage students in service and service-learning.

The Alliance for Children and Families successfully supported the inclusions of an amendment that will enhance nonprofit capacity building. The Alliance also worked with other advocacy groups to defeat amendments that would have limited the advocacy and lobbying rights of nonprofits participating in the program.

The House passed the final bill on March 31, 2009 by a vote of 275-149. The Senate passed it on March 26, 2009 by a vote of 78-20.

The Alliance is developing an analysis of the final legislation. For more information on either the earlier House version or the Senate version, please see the Public Policy section of our website,

[http://www.alliance1.org/Public\\_Policy/nonprofit\\_workforce/generations.pdf](http://www.alliance1.org/Public_Policy/nonprofit_workforce/generations.pdf) or [http://www.alliance1.org/Public\\_Policy/nonprofit\\_workforce/serve\\_america.pdf](http://www.alliance1.org/Public_Policy/nonprofit_workforce/serve_america.pdf), respectively.

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## **In Brief**

**SCHIP Reauthorization Signed into Law:** On February 4, President Obama signed the Children's Health Insurance Program Reauthorization Act of 2009 into law. The reauthorization of SCHIP represents a victory for children's health advocates. Among several important changes, the new law extends mental health parity to SCHIP beneficiaries for the first time, allows states the option of providing coverage to legal immigrant children and pregnant women who have been in the country for less than five years, and creates a commission to study the adequacy of Medicaid payment rates.

## **Employees Free Choice Act Facing Major Hurdles:**

After failing to pass in the 110<sup>th</sup> Congress, the Employees Free Choice Act, also known as the "card check" bill inside the Beltway, is again facing obstacles in the 111<sup>th</sup> Congress. The only Republican senator that did not oppose it last year stated on March 25 that he would vote to block it this year. The bill needs 60 votes in the Senate to avoid filibuster. Senate Democrats had hoped Sen. Arlen Specter (R-PA) would cross party lines to support the bill. The bill would make it possible for workers to form a union if a majority sign union cards without a secret-ballot election; stiffen penalties for employer violations; and require arbitration if a union and an employer do not agree on a contract within 120 days. The Alliance for Children and Families has no position on this bill.

## **Obama Memo Limits Lobbyists' Stimulus Influence:**

A March 20 memo sent from President Obama to the heads of all executive departments and agencies prevents executive branch from speaking to lobbyists about economic stimulus projects. "General policy" conversation is still allowed, but lobbyists will be limited to writing letters when communicating with administration officials about specific projects. On March 31, the American Civil Liberties Union (ACLU), Citizens for Responsibility and Ethics in Washington (CREW) and the American League of Lobbyists sent a joint letter to the administration opposing this policy. Absent any change, the groups may challenge President Obama's directive in court as an unconstitutional infringement of First Amendment rights.

## **Ethics Guidelines Bar Public Interest**

**Lobbyists from Federal Appointments:** Strict new ethics guidelines issued by President Obama are blocking lobbyists from being appointed to positions in the new administration. The policy treats all lobbyists identically, and thus also bar nonprofit and public interest lobbyists from being appointed, a policy that has prompted many to terminate their lobbying registrations. The guidelines, aimed at "changing the culture of Washington," bar officials from working at any agency they lobbied in the previous two years and from making policy decisions involving any former employer during that period. According to a report in the Washington Post, the new guidelines were set in place primarily to prevent former corporate

lobbyists from having too much influence over policies set by the new administration. Some nonprofit lobbyists say the ban does not make sense when it comes to charity lobbyists, who lobby on behalf of public interest causes, not private ones.

**Vaccines Do Not Cause Autism, Court**

**Concludes:** On February 12, a federal court ruled that thousands of families with autistic children are not entitled to compensation from vaccine manufacturers because scientific evidence shows that vaccines do not cause autism. An advisor for the plaintiffs predicted that the cases would be appealed, but the ruling has dealt a blow to the thousands of other families whose cases are still in court. These families contend that harmful substances found in routine childhood vaccinations are linked to a rise in autism cases across the country, although the most scientific studies have found no connection.

**Wal-Mart Announces Plans to Sell Electronic Health Records:**

Retail giant Wal-Mart has announced plans for a partnership with Dell and eClinicalWorks to produce a low-cost electronic health record (EHR) marketed to small physician practices that have traditionally lacked the resources to purchase costly EHR systems. Currently, only about 17 percent of U.S. physicians are using EHRs, predominantly in large group practices. Wal-Mart is targeting small practices, which together employ the majority of all physicians, with a streamlined distribution system and a high-value package that includes software, hardware, training, and technical support. The package will become available in the spring. It will cost under \$25,000 for the first physician in a practice and \$10,000 for each additional physician after that. The company estimates that annual maintenance costs will be \$4,000-6,500 per practice.

**Former Kennedy Aide and Obama Campaign Advisor Picked to Lead Health IT Office:**

David Blumenthal, a former aide to Senator

Edward Kennedy and a senior advisor to President Obama during last year's campaign, has been selected as the Director of the Office of the National Coordinator for health information technology. The Office of the National Coordinator will have a crucial role in determining how to spend the \$19 billion allocated for health IT in the economic recovery act. Blumenthal is a physician and former professor at Harvard Medical School. He has served as an advisor to former Massachusetts Governor Michael Dukakis and most recently was the director of the Institute for Health Policy at the Massachusetts General Hospital/Partners HealthCare System.

**Hispanic Caucus Leaders Push Obama on Immigration Reform:**

In mid-march, members of the Congressional Hispanic Caucus used their first meeting with President Obama to put immigration reform back on the national agenda. Since attempts at reform failed in 2006 and 2008, immigration has received little attention in Washington. Hispanic leaders spent their time with the president discussing issues such as ending raids and deportation of immigrants that split up families, workplace and border enforcement, augmented visa programs, and pathways to legalization. After the meeting, White House Spokesman Nick Shapiro commented, "the president is serious about immigration reform. He said we will start the debate this year, and this continues to be the plan."

The issue of comprehensive immigration reform remains divisive. A House Republican aide commented, "the Obama team is smart, and they are looking at this and realizing this is a very tough sell. How do you make the argument when you have 7 million illegal immigrants in the workforce and you have 12.5 million Americans out of work?" Congressional Hispanic Caucus member Rep. Henry Cuellar (D-TX) countered that criticism, stating "right now, practically speaking, we have to focus on the economy. But immigration is a part of that — and addressing it can have an impact there."

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**About the Alliance for Children and Families and United Neighborhood Centers of America**

The Alliance for Children and Families, a nonprofit association, was formed by the 1998 merger of Family Service America and the National Association of Homes and Services for Children. The

Alliance represents over 370 nonprofit organizations across the nation that provide services and economic empowerment to children and families. Alliance agencies cover a wide spectrum of providers, including a diversity of faith-based organizations and nonsectarian agencies. Together, these organizations deliver more than \$2 billion annually in services to more than 8 million people in nearly 6,700 communities across the United States. More information about the Alliance is available at [www.alliance1.org](http://www.alliance1.org).

United Neighborhood Centers of America (UNCA) is a voluntary, nonprofit, national organization with neighborhood-based member agencies throughout the United States. Formerly known as the National Federation of Settlements and Neighborhood Centers, it was founded in 1911 by Jane Addams and other pioneers of the settlement movement. More information about UNCA is available at [www.unca.org](http://www.unca.org).