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NEXT WEEK IN WASHINGTON...

* The Senate will continue debate on the Patient Protection and Affordable Care Act (HR 3590).

* The House may begin consideration of a Continuing Resolution, which should contain provisions for extending the Medicare physician payment for a few months, to give Congress more time to finish health reform legislation. Cardiologists are lobbying Congress to include a suspension of the CMS payment rule's use of current practice expense data to reallocate payment.

1. THE SENATE BEGINS ITS LONG AWAITED DEBATE ON HEALTH REFORM

Returning from a week-long Thanksgiving break on November 30, Senators began debate on the *Patient Protection and Affordable Care Act* (HR 3590). The AAFP sent the senators a letter outlining family medicine's views of the Senate bill. (A copy of the letter will be posted on the AAFP Federal Advocacy webpage.)

After several days of desultory consideration, on Thursday, December 3, the Senate took its first votes. Senator Barbara Mikulski (D-MD) offered the first amendment, which would eliminate co-payments and other cost-sharing requirements for many preventive health care services for women. It also would prevent the U.S. Preventive Services Task Force's controversial recent recommendations on breast cancer screening from being used for coverage determinations, an addition offered by Senator David Vitter (R-LA). By a vote of 61-39, the Senate agreed to the amendment.

The Senate, by a vote of 41-59, then rejected an amendment offered by Senator Lisa Murkowski (R-AK), which sought to instruct the HHS secretary not to use any recommendations or rankings by the Preventive Services Task Force in deciding to deny coverage in federal health programs, such as Medicare or Tri-Care.

Finally, the Senate, 42-58, rejected a motion offered by Senator John McCain (R-AZ) to send the health care bill back to the Finance Committee with instructions to strip out \$440 billion worth of penalties, cuts in spending and payment revisions to several Medicare programs called for in the legislation. Instead, the Senate unanimously adopted an amendment from Senator

Michael Bennet (D-CO) stating the bill would not reduce guaranteed Medicare benefits and that any savings from Medicare would go back into that program.

The Week Ahead

The Senate will continue to be in session through the weekend. Various senators have filed nearly 100 amendments with many others being held for later introduction. Some of these are technical and non-partisan, like an amendment from Senator Jon Tester (D-MT) to focus federal agencies' attention on rural health needs. Others are bipartisan, like the one offered by Senator Byron Dorgan (D-ND), which would allow for re-importation of pharmaceuticals from Canada. However, most of the amendments are attempts to highlight partisan differences and will be adopted or rejected by largely party-line votes.

The major issues that dominated the debate in the House last month either have taken center stage, or will shortly. These include whether there is a public plan option, and if so, how it will be administered. The coverage of abortion services also will be debated, and the extent of reductions in Medicare spending overall will be considered. The Assistant Majority Leader, Senator Dick Durbin (D-IL), said the public option and federal funding of abortions are "the two really critical issues we have." The Majority Leader still anticipates a final vote in the Senate before the Christmas break.

Senate Democrats' attempt to craft a public option proposal they all can agree to appears to be ramping up. Senator Thomas Carper (D-DE) is rolling out his public option compromise to senators and has said discussions are intensifying. Sen. Carper described his plan as "something akin to a public option for states that do not meet a standard of affordability." He said the proposal is meant to be offered only if Senate Majority Leader Reid cannot find 60 votes in favor of the public option included in the overhaul bill, which allows states to opt out.

The Senate has moved to consider an amendment from Senator Sheldon Whitehouse (D-RI) and another from Senator Orrin Hatch (R-UT). Sen. Whitehouse's amendment is a sense of the Senate that any surpluses generated by the bill for Social Security and a long-term care insurance program not be diverted to other programs. Sen. Hatch's amendment would strip the bill of cuts to the Medicare Advantage program.

Sen. Dorgan (D-ND) said he hopes to have a vote on his drug reimportation amendment either today or this weekend.

In addition to the public option and abortion issues, cost-containment measures dominated amendment discussions Thursday. Freshmen senators are working on a package to bring down the growth of healthcare spending, as are moderates, who met Wednesday with the Director of the Congressional Budget Office. Senator Susan Collins (R-ME) and Senator Joe Lieberman (I-CT) are planning to announce today their cost-containment amendments.

Senator Patrick Leahy (D-VT) also will introduce an amendment to repeal the health and medical malpractice insurance industry's exemption from federal antitrust laws. Senator Bob Casey (D-PA) will offer an amendment to boost the Children's Health Insurance Program by streamlining the enrollment process and increasing the federal matching rate to states that meet best practices for enrollment. Pennsylvania's other Senator, Arlen Specter (D-PA) has filed an amendment to increase penalties to fight health care fraud. Senator Ron Wyden (D-OR) may propose an amendment to speed up access to government-run insurance exchanges, while Senator Mary Landrieu (D-LA) will try to expand subsidies for middle-income individuals to defray to cost of mandated health insurance. She also wants to expand tax credits offered to small businesses.

2. HOUSE SUBCOMMITTEE EXAMINES BREAST CANCER SCREENING ADVICE

The House Energy and Commerce Subcommittee on Health held a hearing titled, "Breast Cancer Screening Recommendations," on Wednesday, December 2 to examine the recommendations issued by the U.S. Preventive Services Task Force (USPSTF) on November 16. Republicans opposed to the House-passed health reform bill pointed to the task force's actions as an indicator of what would happen if government commissions were to set policy. The USPSTF Chairman Ned Calonge, MD, MPH, acknowledged that the timing of the report was unfortunate, coming in the midst of a national fight over the future of health care. Links to the submitted testimony can be found [on the web](#).

3. NIH APPROVES FIRST HUMAN EMBRYONIC STEM CELL LINES FOR RESEARCH

On December 2, NIH Director Francis Collins, MD, PhD announced the approval of the first 13 human embryonic stem cell lines for use in NIH-funded research under the NIH Guidelines for Human Stem Cell Research. On March 9, 2009, President Obama issued Executive Order 13505: Removing Barriers to Responsible Scientific Research Involving Human Stem Cells. The executive order states that the HHS Secretary, through the Director of NIH, "may support and conduct responsible, scientifically worthy human stem cell research, including human embryonic stem cell research, to the extent permitted by law."

4. ANALYSIS OF HEALTH CARE REFORM IMPACT ON STATES UNVEILED

Just before Thanksgiving, Health and Human Services Secretary Kathleen Sebelius announced the Department published state-by-state analyses of the beneficial impacts of health care reform. Using the Senate bill, the report underlines, among other things, the extent to which the legislation would reduce the number of uninsured in that state. The online tool--which can be found at <http://healthreform.gov/> --also explains the incentives for primary care specific to each state.

5. STATES BALANCE BUDGETS, SLASH FUNDING TO HEALTH CARE PROGRAMS

- Kansas Governor Mark Parkinson (D) cut millions in state funding to bring the current budget into balance. A 10-percent reduction in Medicaid reimbursement rates, which will not take effect immediately, is estimated to save \$22 million. In New Mexico, Governor Bill Richardson (D) is proposing to overhaul the state's Medicaid program to cope with a projected budget shortfall of \$300 million next year. Officials from the state's Human Services Department reported to lawmakers that Medicaid benefits and eligibility likely will be limited to minimum federal requirements—including covering low-income pregnant woman and some children.
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- Wyoming Governor Dave Freudenthal (D) released his proposed \$2.9 billion budget for the two-year fiscal cycle that begins July 1. The proposal includes \$25 million for an anticipated deficit in the state's Medicaid program and a freeze on Medicaid provider reimbursements rates.