

September 26, 2008

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1. HOUSE APPROVES STOP-GAP SPENDING BILL, SENATE TO VOTE THIS WEEKEND

The House of Representatives passed the *Consolidated Security, Disaster Assistance, and Continuing Appropriations Act* (HR 2638) on September 24 by a vote of 370 to 58. The bill, known as a Continuing Resolution or CR, would fund most of the federal government through March 6. While it provides stop-gap funding for federal agencies, the CR prevents agencies from initiating or resuming programs or procurements not funded in FY 08 and from awarding new grants. The Senate is expected to consider the CR over the weekend. If the Senate approves the measure unchanged, it would go to President Bush for his signature.

2. DEMOCRATS INTRODUCE SECOND STIMULUS LEGISLATION

Senate and House Democrats have prepared separate proposals for a second economic stimulus package that include additional federal funds for Medicaid and other programs. The Senate Majority Leader, Senator Harry Reid (D-Nev.), and the Appropriations Committee Chair, Senator Robert Byrd (D-W.Va.), on Thursday, September 25 released the details of a \$56.2 billion package that includes additional federal funds for Medicaid, NIH and other programs. The package temporarily would increase the federal medical assistance percentage for Medicaid by four percentage points, a provision that would cost \$19.6 billion. In addition, the package would provide an additional \$1.2 billion for NIH. The House may consider the bill this weekend and the Senate may add it to the final omnibus appropriations bill early next week.

3. NBME ACTS ON THE DOCTOR OF NURSE PRACTITIONER DEGREE

AAFP President, Ted Epperly, MD, accompanied by staff and representative from the Scope of Practice Partnership Steering Committee, met with leadership of the National Board of Medical Examiners (NBME) on September 25 to discuss the decision to provide certification testing of doctorate degree nurses based on the USMLE Part 3. NBME providing the examination has generated concern within the medical community regarding the potential for nursing scope expansion based on claims of testing parity with physicians. Dr. Epperly also conveyed concerns based on public perceptions, quality of care, and patient safety. NBME staff agreed

with two of AAFP's key requests: 1) That the NBME will ask the contracting organization to notify those taking the examination to attest that the examination is not equivalent to the physician USMLE part 3 used for physician licensure; and 2) that the NBME will step up and clarify this position when nursing groups use the examination as a basis to expand scope of practice.

4. SEVERAL PUBLIC HEALTH BILLS EARN HOUSE APPROVAL

Rushing to the pre-election recess, the House approved several bills this week that affect public health programs:

- *Physician Workforce and Graduate Medical Education Enhancement Act* (HR 2583) would authorize a loan program for eligible hospitals to establish residency training programs in family medicine, internal medicine, emergency medicine, obstetrics or gynecology, or general surgery and would assign preference to hospitals in a rural or underserved urban area.
- *Health Insurance Restrictions and Limitations Clarification Act* (HR 6908), which requires health plans to disclose limitations on coverage.
- *Ryan Haight Online Pharmacy Consumer Protection Act* (HR 6353) would bar online pharmacies from dispensing prescriptions to anyone that the prescribing physician has not seen in person.
- *Healthy Start Reauthorization Act* (S. 1760), which would reauthorize the Healthy Start program at \$120 million annually and would create new programs to reduce infant mortality
- *Breast Cancer Patient Protection Act* (HR 758), which prohibits insurance companies from limiting hospital stays to less than 48 hours for patients who have had surgery related to breast cancer
- *Stephanie Tubbs Jones Organ Transplant Authorization Act* (HR 6469), which would authorize an increase in funding for the nation's public-private Organ Procurement and Transplantation Network from \$2 million to \$7 million
- *Comprehensive Tuberculosis Elimination Act* (HR 1532) directs NIH to conduct studies on the treatment of tuberculosis and provides \$1.7 billion over five years for those activities
- *National Pain Care Policy Act* (HR 2994) requires the Institute of Medicine to convene a Conference on Pain to increase the recognition of pain as a significant public health problem and establish an agenda for action that will improve pain care research, education, and clinical care.
- *Paul D. Wellstone Muscular Dystrophy Community Assistance, Research, and Education Amendments* (HR 5265) would support research on the treatment of muscular dystrophy.

5. MENTAL HEALTH PARITY BILL TIED TO FEDERAL TAX LEGISLATION

On Tuesday, September 23, the Senate amended the large federal tax bill to include a proposal approved by the House of Representatives that would require health insurers to offer mental health insurance with benefits equal to traditional medical coverage plans. The House had originally passed this version, but had included a ban on physician-owned specialty hospitals. The Senate version has dropped this ban. However, by including the mental health parity provision in the tax bill, its fate rests with the more controversial measure.

On the same day, in a separate action that would allow the Senate to consider mental health parity separately if the tax bill gets bogged down in end-of-session politics, the House passed the *Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act* (HR 6983) by a vote of 376-47.

6. FamMedPAC RECEIVES NEARLY \$35,000 IN SAN DIEGO

AAFP's federal PAC received over \$25,000 in contributions during the Congress of Delegates, and over \$9,000 in contributions from AAFP members who came by the Government Relations booth in the AAFP Marketplace during the 2008 Scientific Assembly last week in San Diego. Dr. Michael Fleming, FamMedPAC Board Chair, made a presentation at the new Marketplace Theater on the exhibit hall floor. Dr. Fleming gave a brief overview of FamMedPAC and spoke of the importance of all AAFP members getting involved.

Contributions to FamMedPAC total over \$770,000 for this election cycle. More than 2,600 AAFP members have contributed.

Government Relations staff attended a healthcare breakfast for **Rep. Rahm Emanuel (D-IL)**, who serves on the Health Subcommittee of the House Ways and Means Committee and is the past Chair of the Democratic Congressional Campaign Committee. Rep. Emanuel touched on health care reform, insisting that whoever was elected President, universal coverage would be a priority. But he said that recent economic woes have clouded the prospect such legislation. He advised everyone to have a fallback position on type of coverage rather than expanded coverage. He did not think that the Medicare bill at the end of 2009 would do anything more than avoid the payment reductions for a set period of time (another year or two). He noted the costs of doing anything more than that would be affected by the huge price tags for the bail-out of the financial markets, the Iraq and Afghanistan wars, and other costly priorities. He was clear that neither presidential candidate can now hope to implement his health care reform proposals in the next Congress. He also revealed a lingering concern for Democratic Members of Congress in the medical liability debate. He favors a system that several states have taken in delegating medical malpractice complaints to a professional administrative forum out of the court system.

Government Affairs staff attended a healthcare breakfast this week for Speaker of the House **Nancy Pelosi (D-CA)**. Speaker Pelosi thanked the physician groups for their help with the Medicare payment legislation and said that the calls and letters from physicians were a major factor in building support for the legislation. She is confident the healthcare reform will be on the agenda early in the next Congress and will make sure that physicians are at the table when discussions begin. She feels that any reforms must focus on prevention and primary care and is hopeful that savings produced by keeping people healthy can be "scored" by the Congressional Budget Office to help offset any increase in payments to primary care physicians. The Speaker's attention was on the current financial crises and the ongoing negotiations over the federal response. She expressed concern that the economic downturn and the continued costs of the wars in Iraq and Afghanistan would limit what Congress and the next President could spend on healthcare reforms.

7. SENATE APPROVES COMMUNITY HEALTH CENTERS BILL, INSURANCE MANDATE

On Wednesday, September 24, the Senate approved legislation (HR 1343) that would provide \$13.1 billion for community health centers until fiscal year 2012, including \$2.2 billion in FY 2009. Since the Senate approved an amendment that would reauthorize programs that encourage health providers to practice in medically underserved areas and health programs for rural areas, the bill must go back to the House for approval before it can be signed by the President.

The Senate also gave final Congressional approval to *Michelle's Law* (HR 2851), which prohibits a group health plan from terminating coverage of a dependent child due to a medically necessary leave of absence from a postsecondary education institution or any other change in enrollment if the child is suffering from a severe illness or injury and causes such child to lose full-time student. The bill applies such requirement to coverage offered in the individual market.

8. OF INTEREST TO FAMILY PHYSICIANS...

- **NIH Director Zerhouni To Step Down**

After over six years in the position, National Institutes of Health Director Elias A. Zerhouni, announced that he plans to step down in late October “to pursue writing projects and explore other professional opportunities.” Zerhouni won praise for his resistance to the Bush administration limits on embryonic stem cell research and for his advocacy for federal biomedical research spending even in the face of administration’s flat budget requests for the agency after Congress completed a doubling of NIH’s budget in President Bush’s first term. He was an advocate for improved translation of basic research into clinical practice.

- **Funding for Veterans Health Administration Boosted**

In the final version of the Continuing Resolution (HR 2683), the Senate has included funding for the full fiscal year for the Veterans Health Administration that is a \$4.1 billion increase over last year. Much of that increase would go to medical services for veterans. The VHA also would receive more funds (\$250 million more than last year) for next-generation prosthetic devices for wounded veterans. An additional \$510 million would be allocated for trauma and mental health research.

- **The House Energy and Commerce Committee Approves Public Health Bills**

On Tuesday, September 23, the House Energy and Commerce Committee approved two public health bills by voice vote. The first, the *Breast Cancer and Environmental Research Act* (HR 1157), would expand federal research into possible environmental causes of breast cancer, such as pollution and household chemicals. The second, the *Tom Lantos Pulmonary Hypertension Research and Education Act* (HR 6568) would create an education campaign about pulmonary hypertension.