

October 25, 2013

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NEXT WEEK IN WASHINGTON...

- * On October 29, CMS Administrator Tavenner will testify at a House Ways & Means Committee hearing.
- * On October 30:
 - Secretary Sebelius will testify before the House Energy & Commerce Committee.
 - the House-Senate Budget Conference Committee is set to hold its first meeting.
 - the Senate HELP Committee will consider a bill (S 1557) reauthorizing children's hospitals GME.

1. HOUSE LEGISLATORS CALL ON LEADERSHIP TO REPEAL SGR

Reps. Bill Flores (R-TX) and Dan Maffei (D-NY) are inviting legislators to sign onto a letter to Speaker John Boehner (R-OH) and Minority Leader Nancy Pelosi (D-CA) that calls for permanently repealing and replacing the Medicare sustainable growth rate (SGR) formula. The letter notes that Congress has spent more than \$146 billion on short-term patches over the last 10 years, a figure more than the current cost estimate of \$138 billion to permanently repeal the formula. Meanwhile next week, the Senate Finance Committee may release an outline of proposed legislation to repeal the SGR.

2. MEDICAID PARITY PAYMENT MAP LIVE ON AAFP.ORG

After surveying our members and touching base with CMS, AAFP has created a [Medicaid Medicare Parity Payment Implementation Map](#) on aafp.org to show the status of the parity payment implementation across the country. The map is part of AAFP's ongoing efforts to monitor the parity payment implementation and assist members with the attestation process. On the map, green shaded states are paying fee-for-service at parity, red shaded states have not started paying yet, blue shaded states are paying fee-for-service at parity, but managed care payments have not started yet. The AAFP will continue to collect stories from members about their experiences with the increased payment.

3. HOUSE COMMITTEE HEARS FROM AFFORDABLE CARE ACT CONTRACTORS.

On Thursday, October 24, the Energy and Commerce Committee held a hearing focusing on the failures and issues surrounding the website serving the new health insurance marketplaces. Invited to testify were four of the contractors hired to do the technical work of the website, and who testified just four weeks earlier that everything was on track for the launch of the open

enrollment period which began on October 1. None of the companies took responsibility for the disappointing rollout. The nearly five-hour hearing did not produce an answer to the question of how the problems with the website will be resolved.

4. FDA WILL RESTRICT ACCESS TO HYDROCODONE-BASED DRUGS

According to a statement from the agency on Thursday, October 24, the Food and Drug Administration (FDA) plans to recommend that painkillers containing hydrocodone be moved from “Schedule III” to “Schedule II,” the same level as drugs containing oxycodone. The move has been a long-term goal of the Drug Enforcement Agency (DEA), which argues hydrocodone drugs are too widely available. The change would reduce the number of refills patients can receive without seeing their doctors.

5. PENNSYLVANIA PRESCRIPTION DATABASE LEGISLATION ADVANCES TO SENATE

A Pennsylvania AFP-supported prescription drug monitoring bill passed the House of Representatives on October 22 and now moves to the state Senate for consideration. [House Bill 1694](#) would create a database to monitor the use of prescription drugs and help prevent abuse and addiction. An amendment to the bill also would require investigators to obtain a search warrant before reviewing records for Schedule II drugs, which include opiate-based painkillers.

6. HEALTH INSURANCE MARKETPLACE APPLICATIONS ON THE RISE

The Centers for Medicare & Medicaid Services (CMS) reported on October 24 that more than 700,000 people have submitted applications for marketplace insurance coverage nationwide. This total includes both applications submitted through the federal marketplace website, HealthCare.gov, and applications submitted in the 14 state-run marketplaces. CMS contractors also report that they have received nearly 4,000 paper applications.

7. STATES BRACE FOR MEDICAID ENROLLMENT GLITCHES

On November 1, Healthcare.gov is supposed to send enrollment data to the states to assist them in enrolling their eligible patients in the Medicaid program. However, after the technical failures during the first few weeks of Marketplace enrollment, it is unclear whether this information will be transferred successfully to the states. Those states that are running their own health insurance marketplace websites have encountered fewer issues with enrollment, so officials urged caution mostly to states utilizing the federal exchange data. It is possible that the Department of Health and Human Services will delay the transfer of Medicaid enrollment, but an official announcement has yet to be made.