

October 23, 2015

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NEXT WEEK IN WASHINGTON...

- * On Wednesday, October 28, the Senate Veterans Affairs Committee will hold a hearing on ensuring access to mental health care.
- * On Thursday, October 29, the Senate HELP Committee will hold a hearing: "Mental Health and Substance Use Disorders in America: Priorities, Challenges, and Opportunities."
- * Also on October 29, the Energy & Commerce Health Subcommittee will hold a hearing to examine the regulation of Diagnostic Tests and Laboratory Operations.

1. HOUSE PASSES PARTIAL ACA REPEAL IN BUDGET RECONCILIATION

By a largely party-line vote of 240-189, the House on Friday, October 23 passed the *Restoring Americans' Healthcare Freedom Reconciliation Act* (HR 3762). The bill would repeal several components of the *Affordable Care Act* (ACA), including the individual and employer mandate requirements, medical device tax and the tax on high-cost health plans. The bill also would terminate the Prevention and Public Health Fund, prohibit funding to Planned Parenthood for one year and eliminate the ACA's employer automatic enrollment requirement. It is not clear when the Senate will act on the measure but it does face a certain Presidential veto.

2. AAFP JOINS WHITE HOUSE PROGRAM AGAINST PRESCRIPTION DRUG ABUSE

The AAFP President, Wanda Filer, MD, participated in a White House forum in Charleston, West Virginia at which President Obama announced new efforts to address the prescription drug abuse and heroin epidemic. The October 22 event highlighted the AAFP's commitment, detailed in a [statement](#), to increase:

- family physician education in opioid prescribing practices,
- the number of family physicians who complete medication-assisted training for the treatment for opioid addiction, and
- overall awareness of opioid abuse and pain management.

3. HOUSE COMMITTEE CONTINUES HEARINGS ON DRUG ABUSE POLICIES

On Tuesday, October 20, the House Energy and Commerce's Health Subcommittee held [another in a series of hearings](#) on drug abuse policies with witnesses from the medical community. The meeting examined many of the same proposals discussed during the previous hearing: physicians prescribing practices, access to naloxone, medication assisted treatment, social determinants of health and substance abuse treatment access. Reps. Susan Brooks (R-IN) and Larry Bucshon, MD (R-IN) highlighted their concerns about physician prescribing practices would be improved with mandatory education and continuing medical education. Rep. Frank Pallone (D-NJ) asked about the role of primary care physicians in providing medication assisted treatment and the barriers some may face in terms of accessing and utilizing the drugs.

4. AAFP PRESSES CONGRESS TO MAINTAIN FUNDING FOR AHRQ

On Thursday, October 22, the AAFP was one of 195 organizations to sign the Friends of AHRQ [letter](#) to House and Senate appropriators urging Congressional legislators to work together to enact sequestration relief and keep the Agency for Healthcare Research and Quality (AHRQ)'s budget at \$364 million for fiscal year 2016. The House Appropriations Committee proposed terminating AHRQ in its FY 2016 bill, and the Senate Appropriations Committee bill would cut AHRQ's budget by 35 percent. The current stopgap appropriations bill expires on December 11.

5. PART D MEDICATION TREATMENT MANAGEMENT PROGRAM REVIEWED

On Thursday, October 22, the House Energy and Commerce's Health Subcommittee held a [hearing](#) on the Medicare Part D Medication Treatment Management (MTM) program [announced](#) by the Centers for Medicare & Medicaid Services (CMS) on September 28. According to the announcement, MTM will include activities and resources devoted to optimizing medication use by specific patients. The goal is to improve therapeutic outcomes by ensuring that patients are taking their medications safely and as prescribed, addressing barriers, and bringing concerns to the attention of the treating physician. The *Medicare Modernization Act*, which created the Part D program, requires every Part D plan offer an MTM program as a quality improvement feature.

6. HOUSE COMMITTEE PROBES HEALTH INSURANCE ENROLLMENT

On Friday, October 23, the House Energy and Commerce's subcommittee on Health held a [hearing](#) to review the [findings](#) of a Government Accountability Office (GAO) [report](#) highlighting a 2015 fraud investigation that may have identified program vulnerabilities. The report said that undercover applicants were able to submit fake Social Security numbers and other information to qualify for health care benefits. In addition, the GAO report found that eight of the 10 applicants were initially rejected. The review also noted that CMS has improved state enrollment oversight. During the hearing, Rep. Frank Pallone (D-NJ) expressed concerns about the integrity of the report and its usage as a tool to undermine the *Affordable Care Act*. Others, like Rep. Marsha Blackburn (R-TN), commented that the government applicants from other states should not be able to apply for health care benefits for which they are ineligible. The timing coincides with the upcoming ACA [open enrollment](#) period that begins November 1, 2015.

7. CONGRESS LOOKS AT PRIMARY CARE IN THE VETERANS ADMINISTRATION

On Thursday, October 22, the House Veterans' Affairs Subcommittee on Health held a [hearing](#) on "Evaluating VA Primary Care Delivery, Workload, and Cost." The hearing was in response to the GAO's [report](#), *VA Primary Care: Improved Oversight Needed to Better Ensure Timely Access and Efficient Delivery of Care*. The GAO found that the VA is missing opportunities to improve the efficiency of primary care service delivery through the lack of reliable data and wide variation in expenditures across VA medical facilities. The witnesses from the Veterans Health Administration (VHA) agreed with the GAO's findings; however, the VA defended their progress with patient centered medical homes. The VHA stated since the 2010 move to the PCMH model of care, they have been considered a national leader. In his opening statement, Dr. Thomas Lynch, Assistant Deputy Under Secretary for Health Clinical Operations, explained that they

have found that patients who have been placed in well implemented medical homes have had lower hospital readmission rates, improved levels of patient satisfaction and higher results on measures of quality care.

8. FTC RELEASES GUIDANCE ON STATE SUPERVISION

On October 14, the Federal Trade Commission (FTC) released the [Staff Guidance on Active State Supervision of State Regulatory Boards Controlled by Market Participants](#). The guidance addresses two issues in particular: when active supervision is required and what satisfies the active supervision requirement. The guidance was released in response to state officials seeking advice from the FTC regarding antitrust compliance for state boards regulating professions.

9. STATE LEGISLATURES HEAD INTO SPECIAL SESSIONS

The **Florida** legislature kicked-off the third special session of the year on Monday, October 19 to address redistricting.

Alaska will convene on Saturday, October 24, to debate two bills regarding gas reserves in the state and how to address a budget deficit caused by falling gas and oil prices. Legislators will debate adding a gas reserve tax as well funding for a gas pipeline through the state.

On Wednesday, October 28, the **Delaware** Senate will hold a special session to vote on confirming Governor Jack Markell's (D) nominee for vice chancellor on the Court of Chancery. The Court of Chancery is Delaware's highest court of equity and consists of one chancellor and four vice chancellors. Gov. Markell has yet to announce his nominee.

10. JOINT LETTER SENT TO HHS ON QUALITY MEASURE FUNDING

In a coalition [letter](#) sent to HHS and CMS on October 7, 2015, medical organizations asked for funding to be used for the development of quality measures and for technical assistance to small practices under the *Medicare Access and CHIP Reauthorization Act* (MACRA). The letter called for timely and targeted funding for these two activities critical to the success of physician payment reform. The letter called on CMS to fund these activities and to give priority to efforts generated by or in concert with the medical profession.

11. REGULATORY BRIEFS

- On October 14, HHS [awarded](#) \$240 million to support the National Health Service Corps (NHSC) and NURSE Corps scholarship and loan repayment programs to increase access to primary health care. These programs provide funding to primary care clinicians and students in exchange for their service in underserved communities.
- On October 15, CMS [announced](#) the beginning of the Medicare Open Enrollment period where people with Medicare can shop for a Medicare Advantage (MA) or Prescription Drug Plan (PDP) for 2016. The Medicare Open Enrollment period happens every year from October 15 through December 7.
- On October 20, HHS [announced](#) new members of the [Advisory Council on Alzheimer's Research, Care, and Services](#).
- On October 21, CMS issued a [proposed payment notice](#) providing for the funding methodology for the Basic Health Program (BHP) for program years 2017 and 2018. The BHP provides states with the option to establish a health benefits coverage program for individuals with incomes that are too high to qualify for Medicaid under the Medicaid expansion, but are in the lowest income bracket of individuals who would otherwise be eligible to purchase coverage through the Health Insurance Marketplace.
- On October 21, HRSA [announced](#) that more than \$2.2 billion in Ryan White HIV/AIDS Program grants was awarded in 2015 to cities, states and local community-based

organizations. This funding supports a coordinated and comprehensive system of care to ensure that more than half a million people living with and affected by HIV continue to have access to critical HIV health care, support services, and essential medications.

- CMS will host the following free educational calls, [registration](#) is required:
 - Clinical Diagnostic Laboratory Test Payment System Proposed Rule, November 10, 2:00pm
 - National Partnership to Improve Dementia Care and QAPI, December 1, 1:30pm