

April 29, 2016

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### NEXT WEEK IN WASHINGTON...

\* Congress is in recess until the week of May 9.

## 1. CMS RELEASES MACRA PROPOSED RULE

On April 27, the Centers for Medicare & Medicaid Services released the first [proposed rule](#) that implements provisions of the *Medicare Access and CHIP Reauthorization Act (MACRA)*. Under the new law, various quality payment programs affecting clinicians will be merged into a single framework to help them transition from payments based on volume to payments based on value. The proposed rule implements these changes through a unified framework called the Quality Payment Program, which includes two paths:

- The Merit-based Incentive Payment System (MIPS)
- Advanced Alternative Payment Models (APMs).

CMS will accept comments until June 26, 2016. The AAFP is currently analyzing the regulation and will comment on behalf of family physicians. Upon the regulation's release the AAFP issued a [statement](#) and a related AAFP News [article](#).

## 2. HOUSE COMMITTEES ADVANCE BILLS TO FIGHT OPIOID ABUSE

Two House committees approved bills on opioid abuse this week. On April 27, the Judiciary Committee approved by voice vote the bipartisan *Comprehensive Opioid Abuse Reduction Act (HR 5046)* to streamline opioid abuse grants encompassing new and existing programs, for criminal justice training and resources for first responders and law enforcement, criminal investigations of unlawful opioid distribution, drug courts, and residential treatment. The bill authorizes \$103 million annually for the grant program which would be offset by cuts to other federal spending. Comprehensive opioid abuse program grantees would be required to report

on the efficacy of the grants by the *Opioid Program Evaluation “OPEN” Act* (HR 5052), sponsored by House Majority Leader Kevin McCarthy (R-CA), which the committee also passed by voice vote.

The third bill approved by voice vote of the Judiciary Committee, the *Good Samaritan Assessment Act* (HR 5048), requires the Government Accountability Office to study state and local Good Samaritan laws that protect caregivers, law enforcement personnel, and first responders who administer opioid overdose reversal drugs or devices from criminal liability, as well as those who contact emergency service providers in response to an overdose. Since 1960, AAFP [policy](#) has supported Good Samaritan laws.

Also on April 27, the House Energy and Commerce Committee approved several bills related to opioid abuse. The AAFP had [informed](#) the committee members of concerns about [HR 4641](#), to establish an inter-agency task force to review, modify, and update best practices for pain management and prescribing pain medication. The AAFP [letter](#) dated April 22, supported a number of bills passed by the committee including:

- *Opioid Use Disorder Treatment Expansion and Modernization Act* ([HR 4981](#)) which expands access to medication-assisted treatment (MAT) by raising the limit on patients who can be treated from 100 to 250.
- *John Thomas Decker Act* ([HR 4969](#)) to study what information and resources are available to youth athletes and their families regarding the dangers of opioid use and abuse, non-opioid treatment options, and how to seek addiction treatment.
- *Reducing Unused Medications Act* ([HR 4599](#)) to clarify when a prescription for a drug listed on Schedule II of the CSA may be partially filled.
- *Co-Prescribing to Reduce Overdoses Act* ([HR 3680](#)) to create a grant program for co-prescribing opioid reversal drugs for patients who are at a high risk of overdose.
- *Lali’s Law* ([HR 4586](#)) to authorize grants to states for developing standing orders for naloxone prescriptions and educating health care professionals regarding the dispensing of opioid overdose reversal medication without person-specific prescriptions.

House Majority Leader Kevin McCarthy (R-CA) has announced that the full House will consider measures to address prescription drug abuse during the week of May 9.

### **3. SENATE FINANCE COMMITTEE EXAMINES MENTAL HEALTH**

On April 28, the Senate Finance Committee held a [hearing](#) on the status of the mental health system. The Committee Chair, Senator Orin Hatch (R-UT), mentioned that Medicare and Medicaid were the biggest payers of mental health coverage. The two programs represent 45 percent of mental health spending. Senator Ron Wyden (D-OR), the senior Democratic member of the committee, said that the federal government should be focused on three priorities: intervening early to prevent mental illness, coordinating health care, and linking law enforcement with mental health systems.

During the hearing, witnesses talked about the financial burdens linked with accessing appropriate mental health treatment, the associations between child trauma and mental illness, and the need for better suicide prevention strategies.

### **4. NO PROGRESS ON ZIKA VIRUS EMERGENCY FUNDING**

This week, House and Senate leaders considered debating [legislation](#) to provide immediate funding to curb the Zika virus, but failed to agree on how to pay for the \$1.9 billion effort. The AAFP signed a [letter](#) supporting emergency funding. Federal health officials on April 28 confirmed the first Zika-related death in the U.S. A 70-year-old man died in Puerto Rico in February, [according to the CDC](#).

## 5. FINAL RULE RELEASED TO MODERNIZE MEDICAID MANAGED CARE

On April 25, the Centers for Medicare & Medicaid Services (CMS) released the long awaited final [rule](#) to align Medicaid and the Children's Health Insurance Program (CHIP) managed care plans with other health insurance rules. CMS reported that the Medicaid Managed Care Rule had four key goals:

- (1) supporting states' efforts to advance delivery system reform and improvements in quality of care for Medicaid and CHIP beneficiaries;
- (2) strengthening the consumer experience of care and key consumer protections;
- (3) strengthening program integrity by improving accountability and transparency; and
- (4) aligning rules across health insurance coverage programs to improve efficiency and help consumers who are transitioning between sources of coverage.

The rule sets a minimum medical loss ratio for Medicaid of 85 percent, creates a Medicaid managed care quality rating system, and ensures network adequacy. The AAFP had sent CMS a [letter](#) commenting on the regulation last summer. Government Relations staff is reviewing the regulation and will be updating members on important changes.

## 6. AHRQ HAS NEW DIRECTOR

Dr. Andrew Bindman has been named the Director for the Agency for Healthcare Research and Quality (AHRQ) and will join the agency on Monday, May 2. Dr. Bindman is a primary care physician who served as Professor of Medicine and Epidemiology & Biostatistics and affiliated faculty member within the Philip R. Lee-Institute for Health Policy Studies at the University of California, San Francisco (UCSF).

## 7. FAMILY PHYSICIAN ADVOCACY NETWORK IS LAUNCHED AT FMCC

In front of the largest Family Medicine Congressional Conference to date, the AAFP launched the [Family Physician Advocacy Network](#). Designed to be a forum to educate, coordinate, and engage family physicians, the Network will be the grassroots assembly of the AAFP membership. This program will give AAFP members a chance to organize and engage in grassroots advocacy. In the first phase, the Network will consist of a simple website for registration. The second phase will consist of a much more robust website that will allow access to members-only content, webcasts, and message boards. This will support those AAFP members who are interested in advocacy to better target messaging. It also will allow for a more efficient coordination of Speak Out, Social Media, and awareness campaigns.

## 8. FamMedPAC REMAINING ACTIVE IN DC POST-FMCC

FamMedPAC is keeping up its activities in Washington, DC following the highly successful Family Medicine Congressional Conference. Thanks to the PAC's record fundraising pace, the PAC Board approved increased spending for the 2016 election cycle.

The PAC supported the following legislators this week:

- **Rep. Tom Price (R-GA)**, a physician and member of the House Ways and Means Committee, also serves as Chair of the House Budget Committee.
- **Rep. John Larson (D-CT)**, a member of the House Ways and Means Committee, is also a member of the House Primary Care Caucus.
- **Rep. Steve Scalise (R-LA)** is the Majority Whip of the House.
- **Rep. Eric Paulsen (R-MN)**, a member of the Health Subcommittee of the House Ways and Means Committee, was our special guest at the PAC-Grassroots Reception at the Family Medicine Congressional Conference last week.
- **Rep. Joe Courtney (D-CT)** is the Co-Chair of the House Primary Care Caucus.
- **Rep. Brad Ashford (D-NE)** is a member of the House Primary Care Caucus.

## 9. JOINT LETTER SENT TO CMS ON THE PCMH AND MACRA

On April 22, presidents from five primary care organizations sent a [letter](#) urging CMS to recognize existing patient-centered medical homes to qualify as an alternative payment model in the *Medicare Access and CHIP Reauthorization Act* (MACRA). It follows a [letter](#) the AAFP sent to CMS on April 11 providing AAFP's views on how to implement MACRA.

## 10. AAFP COMMENTS ON HEALTH IT CERTIFICATION PROCESS

In a [letter](#) sent to HHS on April 27, the AAFP responded to a proposed rule titled, "ONC Health IT Certification Program: Enhanced Oversight and Accountability." The letter described corrections for the proposed rule's lack of emphasis on testing methodologies and results analysis. The AAFP letter called on HHS to reconsider the role of its testing processes and certification to address patient safety risks posed by usability and interoperability issues.

## 11. STATE LEGISLATIVE BILLS OF INTEREST

State legislation of interest in the 2016 session:

- **Maintenance of Certification**—[Kentucky](#) and [Oklahoma](#) passed legislation prohibiting Boards from requiring any maintenance of certification and related continuing education requirements for licensure as a physician.
- **Medicaid Reform**—[Alaska](#) passed a Medicaid reform bill that is estimated to save the state \$365 million over six years by requiring the Department of Health and Social Services to adopt new approaches to care coordination, payment reform, and behavioral healthcare. The bill is expected to be signed by Governor Bill Walker (I).
- **Medical Malpractice**—[Indiana](#) passed medical malpractice reform this year. The bill increases the overall damage cap from \$1.25 million to \$1.65 million in 2017 and to \$1.80 million in 2019. The Indiana Academy of Family Physicians tracked this key piece of legislation throughout the legislative process.
- **Naloxone**—Maine passed [legislation](#) to direct the Maine Board of Pharmacy to establish by rule procedures and standards for authorizing pharmacists to dispense naloxone. This bill was then vetoed by Governor Paul LePage (R). In the Governor's [veto message](#) he stated that, "naloxone does not truly save lives; it merely extends them until the next overdose." The legislature will convene on April 29 to vote on the Governor's vetoes.
- **Prescription Drug Abuse**—The Connecticut House of Representatives recently passed [legislation](#) that would prohibit an opioid prescription for more than seven days. This measure will now be sent to the Senate for consideration. Similar legislation has been passed in [Maine](#) and [Massachusetts](#).
- **Legal Age for Tobacco Use** – The Massachusetts Senate voted on April 28 to raise the legal sales age for tobacco products [from 18 to 21](#). If the House passes the measure, Massachusetts would join Hawaii as the only states prohibiting those under 21 from purchasing tobacco products.

## 12. REGULATORY BRIEFS

- On April 25 CMS released a [blog](#) titled, "Pursuing Health Equity for the Nation."
- On April 28 CMS released [guidance](#) describing how states can better facilitate access to Medicaid services for individuals transitioning from incarceration to their communities
- CMS will host the following free educational call, [registration](#) is required:
  - How to Register for the 2016 PQRS Group Practice Reporting Option Call on May 4 at 3:00pm ET
  - MACRA Listening Session: Quality Payment Program Proposed Rule on May 10 at 2:00pm ET
  - 2015 Mid-Year QRURs Webcast on May 19 at 1:30pm ET