

February 26, 2016

IN THIS REPORT...

1. Administration's Health Programs Probed by House Committee
2. House Subcommittee Examines FY 2017 HHS Spending Proposals
3. Prescription Drug Abuse Issues Considered in Senate Finance Committee
4. Director of AHRQ, Who Is Leaving, Justifies Budget Request
5. FamMedPAC Supports Legislators on Both Sides of the Aisle
6. Precision Medicine Initiatives Are the Subject of White House Summit
7. AAFP Supports Screening Guidelines for Hepatitis B
8. Items of Interest:
 - Senate Confirms New Administrator of FDA
 - AAFP Advises Congress to reform Toxic Substances Control Act
 - Three family physicians nominated to CDC committee on smoking
9. State Legislators Introduce Health Care Measures
10. Chapters Advocate for Family Medicine in State Capitols
11. Governors Discuss Complex Problems in States
12. Regulatory Briefs

NEXT WEEK IN WASHINGTON...

- * All week, the Senate is scheduled to debate the *Comprehensive Addiction and Recovery Act* (S 524), which among other provisions would encourage the distribution and use of naloxone.
- * On Tuesday, March 1, the Health Subcommittee of the House Energy and Commerce Committee will hold a hearing on the financing and delivery of long-term care in the U.S.
- * On Wednesday, March 2, the Oversight and Investigations Subcommittee of the House Energy and Commerce Committee has scheduled a hearing to examine the U.S. public health response to the Zika virus.

1. HOUSE ENERGY AND COMMERCE COMMITTEE DISCUSS KEY HEALTH PRIORITIES

On February 24, the House Energy and Commerce Committee held a [hearing](#) to discuss the administration's fiscal year 2017 health budget with the Secretary U.S. Health and Human Services Sylvia Burwell. Overall, committee members were concerned about the *Affordable Care Act's* impact on current and future budget spending. Rep. Brett Guthrie (R-KY) expressed concerns about spending for the Medicaid program and asked about the potential for implementing a per-capita cap. Rep. Kathy Castor (D-FL) expressed interest in graduate medical education (GME) reform. Rep. Doris Matsui (D-CA) inquired about the administration's efforts to promote telehealth and to increase reimbursement for physicians. Rep. Joe Kennedy (D-MA) shared his interest in promoting a federal payment increase for mental health care services. Secretary Burwell agreed to work with policy makers to review GME reform proposals. She also noted that the administration would like to support the increased use of telehealth and said the administration is identifying more sites equipped to provide those services.

2. HOUSE COMMITTEE BEGINS WORK ON FY 2017 HHS SPENDING BILL

The House Appropriations Subcommittee on Labor, Health and Human Service and Education met on February 25 to hear from HHS Secretary Sylvia Burwell on the President's fiscal year 2017 budget. Subcommittee Chairman Rep. Tom Cole (R-OK) commended the Secretary's dedication but was less complimentary about the Administration budget, condemning the White House for budget tricks to meet the budget caps and for proposing to cut discretionary spending for the National Institutes of Health by a billion dollars from FY 2016. He insisted that his spending bill would not cut NIH, and Committee Chairman Rep. Hal Rogers (R-KY) concurred.

The AAFP joined more than 660 national, state, and local organizations, in sending a [letter](#) on Monday, February 22, to the House and Senate Appropriations Committees urging them to allocate as much as possible to support the programs and agencies within the Departments of Labor, Health and Human Services, and Education.

3. SENATE PANEL EXAMINES CAUSES AND SOLUTIONS FOR OPIOID CRISIS

On Tuesday, February 23, the Senate Finance Committee held a hearing to examine the opioid epidemic. The hearing was a wide-ranging exploration of what tools the Finance Committee could use to stem the growing addiction to pain medication and other opioids.

The hearing focused on the *Stopping Medication Abuse and Protecting Seniors Act* (S 1913), sponsored by Senators Pat Toomey (R-PA) and Sherrod Brown (D-OH). This bill would add a patient review and restriction (PRR) program to Medicare Part D. In effect, Part D plans would establish methods to "lock in" at-risk Medicare beneficiaries to a single treating physician and single pharmacist for the purposes of receiving pain medication. Sen. Rob Portman (R-OH) elicited testimony explaining that PRR programs require patient input in the choice of provider and pharmacy.

4. FRIENDS OF AHRQ MEET WITH DIRECTOR ON FY 2017 BUDGET REQUEST

On Tuesday, February 23, Richard G. Kronick, Ph D, the Director of the Agency for Healthcare Research and Quality (AHRQ), discussed the administration's FY 2017 budget request for the agency. The budget proposes \$363.7 million in FY 2017 which \$29.7 million above the FY 2016. Dr. Kronick outlined the "elevator speech" about AHRQ as an agency that supports:

- Research and evidence related to making health care safer and of high quality,
- Dissemination of training and resources to systems and providers to catalyze improvements in care, and
- Investments in new measures and data to facilitate practice improvement.

He also described the great strides in making patient care much safer. Dr. Kronick will be leaving his position at AHRQ on March 18, and Deputy Director Dr. Sharon Arnold will become acting director.

5. FamMedPAC SUPPORTS IMPORTANT LEGISLATORS THIS WEEK

FamMedPAC partnered with several physician specialty societies this week to support important legislators and campaign committees in Washington, DC:

- **Rep. Kevin Brady (R-TX)** is the Chair of the House Ways and Means Committee.
- **Democratic Senatorial Campaign Committee**, which supports Democratic candidates for the U.S. Senate. AAFP President Dr. Wanda Filer attended a dinner with the Chair of the Committee **Sen. Chuck Schumer (NY)**.
- **Rep. David Rouzer (R-NC)** is a founding Co-Chair of the House Primary Care Caucus.
- **Rep. Kevin McCarthy (R-CA)** is the Majority Leader of the U.S. House.
- **Rep. Frank Pallone (D-NJ)** is the senior Democrat on the House Energy and Commerce Committee.

- **The Tuesday Group PAC** is a campaign committee made up of moderate Republican members of the U.S. House. Members attending the event included: **Reps. Tim Murphy (PA), Bill Johnson (OH), Leonard Lance (NJ), Chris Collins (NY), Susan Brooks (IN), and Renee Ellmers (NC)**, all members of the House Energy and Commerce Committee. The Chair of the Tuesday Group, **Rep. Charlie Dent (PA)**, a member of the House Appropriations Committee, also attended.
- **Rep. Marsha Blackburn (R-TN)** is a member of the Health Subcommittee of the House Energy and Commerce Committee.
- **Rep. Fred Upton (R-MI)** is the Chair of the House Energy and Commerce Committee.

6. WHITE HOUSE FEATURES PROGRESS IN PRECISION MEDICINE

On Thursday, February 25, the White House held a summit to discuss progress on the Precision Medicine Initiative. As part of the update, the White House released a [fact sheet](#). The goal of the initiative, which is a year old, is speedier research into treatments tailored to individual patients. The President's latest budget asks Congress for \$309 million for the initiative next year, an increase of more than \$100 million over this year's spending. The initiative includes a National Institutes of Health project to gather data on the health habits of one million volunteers, a goal the NIH hopes to reach by the end of 2019. In addition, the National Cancer Institute is putting a new focus on studying the genomic factors that can lead to cancer.

7. AAFP SUPPORTS CMS POLICY ON SCREENING FOR HEP B VIRUS INFECTION

In a [letter](#) sent February 15 to CMS, the AAFP offered full support regarding the national coverage analysis (NCA) for the screening of the Hepatitis B virus (HBV) infection since this approach aligns with the AAFP's hepatitis policy for screening for HBV infection in persons at high risk for infection. The AAFP fully agrees with the request that by including the USPSTF hepatitis B screening recommendations under Medicare Preventive Services, CMS would align its policy not only with the science, the Centers for Disease Control and Prevention (CDC) and the USPSTF, but also with the goals of the federal government's Action Plan for the Prevention, Care, and Treatment of Viral Hepatitis.

8. ITEMS OF INTEREST

- *Senate Confirms Head of FDA:* The Senate this week voted 89-4 to confirm Robert Califf, MD as the next FDA Commissioner. Before arriving at the FDA to be Deputy Commissioner for Medical Products and Tobacco, Dr. Califf ran Duke Clinical Research Institute-Duke University School of Medicine's academic research organization.
- *AAFP Joins in Letter to Congress on Toxic Substances Control Act:* In a [letter](#) sent February 12 to Congress, the AAFP joined other organizations urging Congress to continue to prioritize public health during its consideration of legislation to update the 1976 *Toxic Substances Control Act (TSCA)*.
- *Family Physicians Nominated to CDC Interagency Committee on Smoking:* In a January 18 letter to the CDC, the AAFP nominated Abigail Halperin, MD MPH, Thomas Houston, MD, FAAFP, and Ada D. Stewart, RPh, MD, FAAFP, AAHIVS to the Office on Smoking and Health Interagency Committee on Smoking and Health.

9. STATE LEGISLATIVE BILLS OF INTEREST

Following are a few bills of interest in the 2016 session:

- **Graduate Medical Education-** California [AB 2216](#) would require the Office of Statewide Health Planning and Development and the State Department of Health Care Services to provide technical assistance as follows: (1) to support the expansion of primary care residency programs at the Teaching Health Center Graduate Medical Education

(THCGME) programs, (2) to THCGME programs in federally qualified health centers (FQHCs) and rural health clinics to support the maximizing of federal financial participation, and (3) to Medi-Cal providers, including FQHCs, community mental health centers, rural health clinics, Indian Health Service or tribal clinics, and Title X family planning clinics interested in establishing an accredited primary care residency program.

- **Immunizations**—Mississippi has long had the most strict immunization policies in the nation and the state has benefited. During the 2014-15 school year vaccinations in Mississippi for measles-mumps-rubella and diphtheria-tetanus-pertussis stood over 99 percent for kindergarteners, the highest rate in the country. Four bills have been introduced that could hurt these strong immunization policies. [HB 938](#) would authorize vaccination exemptions for medical purposes. [HB 939](#) would authorize vaccination exemptions from the requirement for school attendance based on religious or philosophical beliefs. [HB 979](#) would authorize vaccination exemptions from the requirement for school attendance based on medical reasons or for conscientious beliefs. [HB 1168](#) would require everyone who is 21 years of age or older to have the right to determine if they will receive vaccinations or immunizations for any disease.
- **Liability/Prescription Drug Abuse**—Tennessee [HB 2447](#) and [SB 1850](#) requires the Office of Vital Records to forward death certificates of those who died because of possible prescription opiates for investigation and referral of associated prescribers to licensing boards for investigation. The committee will investigate to determine whether a prescriber acted in good faith and in accordance with applicable community standards of practice; and a pattern of over-prescribing exists that warrants corrective action.
- **Medical Malpractice**—Maryland introduced [HB 814](#) and [SB 849](#) which would establish a task force to study the establishment of health courts. The task force would study the adequacy and cost of state laws and policies relating to the litigation of medical malpractice cases and make recommendations regarding the establishment of health courts to hear medical malpractice cases and the feasibility of assigning a medical malpractice case to a single judge throughout the litigation process.
- **Scope of Practice**—So far, 20 states have introduced scope of practice measures for nurse practitioners. Hawaii [HB 1755](#), New York [AB 9318](#), Utah [SB 58](#), Virginia [HB 909](#), and West Virginia [HB 2450](#) are examples of legislation being monitored.

10. MARYLAND, MISSISSIPPI & SOUTH DAKOTA ADVOCATE FOR FAMILY PHYSICIANS

States chapters are beginning to host Advocacy Days made possible by the AAFP Chapter Advocacy Day Assistant Grants. This program provides funds for small and medium sized chapters to host a state advocacy day. On February 4, the South Dakota Academy of Family Physicians held a chapter advocacy day. The Maryland Academy of Family Physicians and the Mississippi Academy of Family Physicians held their chapter advocacy day on February 25.

11. GOVERNORS DISCUSS HEALTH CARE

On February 19, the POLITICO State Solutions Conference featured a series of one-on-one conversations with governors from Arkansas, Colorado, Delaware, Mississippi, Missouri, Tennessee, Wyoming and Vermont. The focus was on innovative approaches their states have taken to address complex problems. Several governors mentioned the policy challenges of prescription drug abuse. Republican governors discussed their ideas for the ACA moving forward which included support of Medicaid block grants and removing the individual health insurance mandate. Governors also discussed health issues like obesity, single-payer health care and women's health.

12. REGULATORY BRIEFS

- On February 16, AAFP, CMS, AHIP and others [released](#) seven sets of clinical quality measures as part of a broad Core Quality Measures Collaborative of health care system

participants. These measures support multi-payer alignment, for the first time, on core measures primarily for physician quality programs.

- On February 17 CMS released an [updated list](#) of Essential Community Providers (ECPs), to assist issuers with identifying providers that qualify for inclusion in an issuer's plan network toward satisfaction of the ECP standard. ECPs are defined as providers who serve predominantly low-income, medically underserved individuals.
- On February 19 CMS [announced](#) proposed changes to the Medicare Advantage and Part D prescription drug programs for calendar year 2017, which would increase payment rates by a net 1.35%. When combined with expected growth in plan risk scores, CMS anticipates the MA plans and Part D sponsors will see an average revenue increase of 3.55%.
- On February 22, CMS [released](#) two new public data sets, one on the availability and use of services provided to Medicare beneficiaries by ambulance and home health agencies (HHAs and the other is a list of all approved providers and suppliers in Medicare's fee-for-service operations. Both data sets are available at <https://data.cms.gov>.
- On February 24, CMS [announced](#) a new Special Enrollment Confirmation Process in the 38 states using the HealthCare.gov platform. Under the new process, all consumers applying through the most common special enrollment periods will need to submit documentation to verify their eligibility to use an SEP.
- On February 24, CMS published a [blog](#) on the implementation of ICD-10.
- On February 25 CMS [released](#) a proposed rule to allow CMS to take action to remove or prevent the enrollment of health care providers and suppliers that attempt to circumvent Medicare's enrollment requirements through name and identity changes as well as through elaborate, inter-provider relationships. Comments are due April 25.
- On February 25 the Departments of Defense (DoD) and Veterans Affairs (VA) [announced](#) an effort to ease the transition for service members who require complex care management as they transition from the DoD system of health care to VA or within each system.
- On February 25 CMS [issued](#) a final payment notice providing for the funding methodology for the Basic Health Program (BHP) for program years 2017 and 2018. This final notice is substantially the same as the final notice for 2016.
- On February 26, CMS extended the application deadline for the Medicare EHR Incentive Program [hardship exception process](#) until July 1, 2016. CMS is extending the deadline so providers have sufficient time to submit their applications to avoid adjustments to their Medicare payments in 2017.
- CMS will host the following free educational call, [registration](#) is required:
 - Provider Enrollment Revalidation Call on March 1 at 2:00pm ET
 - National Partnership to Improve Dementia Care and QAPI Call on April 28 at 1:30pm ET