

July 18, 2016

## IN THIS REPORT...

1. CMS Issues Medicare Physician Fee Schedule for 2017
2. Congress Finishes Work on Opioid Prevention Bill
3. AAFP Tells the VA to Support Physician-Led Health Care Teams
4. Solo and Small Practices Are Emphasized in MACRA Hearing
5. House Committee Would Keep Current Funding for Title VII
6. Health Is Primary in the U.S. Capitol
7. FamMedPAC Is Meeting Congressional Leaders at Party Conventions
8. Stark Law Comes under Scrutiny in the Senate Finance Committee
9. Congress Could Not Prevent Cut to DME Payments
10. Conscience Protection Law Approved by the House
11. Alabama Ends Enhanced Payments to Primary Care Providers
12. Regulatory Briefs

### COMING UP IN WASHINGTON...

\* Congress has adjourned until September 6.

## 1. AAFP SUMMARY OF 2017 PROPOSED MEDICARE PAYMENT RULE

On July 7, the Centers for Medicare & Medicaid Services (CMS) released a [proposed rule](#) titled, “Medicare Program; Revisions to Payment Policies under the Physician Fee Schedule and Other Revisions to Part B for CY 2017; Medicare Advantage Pricing Data Release; Medicare Advantage and Part D Medical Low Ratio Data Release; Medicare Advantage Provider Network Requirements; Expansion of Medicare Diabetes Prevention Program Model.” The agency also issued a related [press release](#), [fact sheet](#), and a [blog](#) titled, “Focusing on Primary Care for Better Health.”

The AAFP created a [summary](#) of this proposed rule for members. The AAFP is analyzing the regulation and will provide detailed comments to CMS before the due date of September 6.

## 2. SENATE CLEARS OPIOID LEGISLATION FOR WHITE HOUSE ACTION

The Senate voted 92-2 on Wednesday, July 13 to approve the *Comprehensive Addiction and Recovery Act* (CARA, S 524) sending it to President Obama for his signature. The House passed CARA by a bipartisan vote of 407-5 last week. The AAFP joined 78 organizations on a [letter](#) to the House and Senate commending the passage of CARA and urging Congress to provide adequate funding so that physicians and health professionals will have the resources necessary to prevent opioid addiction from claiming more lives and causing more devastation to families and communities.