

The House draft proposes over \$6 billion for the Health Resources and Services Administration (HRSA), a decrease of \$218 million from the current level.

The draft bill includes \$390 million in funding dedicated to the Zika response effort and another \$300 million to create a new Infectious Diseases Rapid Response Reserve Fund, which will give the CDC quick access to funding to act in future disease outbreaks without waiting for supplemental funding. The separate emergency funding for Zika is still being negotiated.

Reps. Rosa DeLauro (D-CT) and Nita Lowey (D-NY) offered amendments to permit the Centers for Disease Control and Prevention (CDC) to support gun violence research, but those amendments failed on party-line votes. Rep. Lowey also offered an amendment to provide \$300 million for Title X family planning grants, which were eliminated in the House measure; however, the Senate's bill would level-fund Title X at \$286.5 million.

SAMHSA and CDC would receive more than \$600 million for the opioids crisis.

The Senate Appropriations Committee approved its draft in a bipartisan 29-1 vote last month, and the House Committee is scheduled to finalize its version next week. However, it is likely that the final bill will not be completed until after the new fiscal year begins on October 1.

4. HOUSE APPROVES LONG-AWAITED MENTAL HEALTH REFORM BILL

On July 7, the House of Representatives approved the *Helping Families in Mental Health Crisis Act* (HR 2646) by a vote of 422-2. The bill aims to improve current mental health programs, reduce the mental health workforce shortages, promote greater coordination, and increase patient access. To do so, the *Helping Families in Mental Health Crisis Act*:

- Requires states to include primary care integration within its state plan for Community Based Mental Health Services grants
- Clarifies that nothing in the Medicaid statute should prevent the same-day billing of mental health and physical health services
- Requires HHS to clarify patient-privacy requirements of the Health Insurance Portability and Accountability Act to improve coordination between patients and physicians
- Organizes a stakeholders' review meeting to determine if regulations on sharing substance abuse records have affected patient care, privacy, and health outcomes
- Authorizes \$9 million over 3 years for child and adolescent tele-psychiatry programs
- Provides \$20 million over 5 years for early childhood mental health programs
- Makes child and adolescent psychiatrists eligible to participate in the National Health Service Corps

The Senate also has taken action. The Health, Education, Labor and Pensions Committee approved a companion bill titled, the *Mental Health Reform Act of 2016* (S 2680). Congress is expected to approve a final bill before the end of the year.

5. CMS SHORTENS MEANINGFUL USE REPORTING PERIOD TO 90 DAYS

On Wednesday, July 6, the Centers for Medicare & Medicaid Services (CMS) proposed a modification to the Medicare and Medicaid Electronic Health Record (EHR) Incentive Program, also known as "Meaningful Use." CMS proposed to shorten the reporting period in 2016 for returning participants—from the full calendar year to any continuous 90-day period. Although the 90-day period is only proposed at this point, it is highly likely that CMS will incorporate the change in the final version. Successfully attesting to Meaningful Use in 2016 will allow family physicians and other EPs to avoid a 3-percent negative Medicare payment adjustment in 2018.