

December 1, 2017

### **On the Horizon ...**

- \* On December 5, the Senate Labor, Health and Human Services, and Education Appropriations Subcommittee will hold a hearing on the prevention, treatment, and recovery activities related to the opioid crisis in America.
- \* On December 7, the Senate Health, Education, Labor and Pensions Committee will hold a hearing on implementation of the 21st Century Cures Act, focusing on progress and the path forward for medical innovation.

## **TAKE ACTION**

### **1. Policies in Tax Reform Bill Threaten to Harm Health Coverage and Access**

On November 27, the AAFP posted a [Speak Out](#) urging Congress to protect access to health care coverage for all Americans and retain the student loan Interest deduction in any final tax reform bill. The AAFP released a [statement](#) today noting increasing alarm regarding the trajectory and content of the Senate bill. The Senate bill would repeal the individual mandate, which is projected to increase premiums in the individual market and cause 13 million people to become uninsured. The House bill would eliminate the Student Loan Interest Deduction that family medicine residents and students rely on to help finance their education. The AAFP is concerned that these harmful provisions will end up in a final tax bill. [Speak Out today to urge the removal of these provisions!](#)

## **U.S. CONGRESS**

### **1. Senate Continues Debate on GOP Tax Bill**

On Friday, the Senate is scheduled to resume debate and vote on the GOP tax bill. The latest analysis from the Joint Committee on Tax estimates the bill would have a \$1 trillion deficit effect. The bill would trigger an automatic 4-percent reduction in Medicare payments to physicians in 2018 and later years, as a consequence of a 2010 law that makes automatic cuts to blunt deficits. The bill would also repeal the individual mandate of the Affordable Care Act which the AAFP has [opposed removing because of its impact on affordability and coverage](#). The bill also threatens an automatic 4-percent reduction in Medicare payments to physicians in 2018, as a consequence of a 2010 law that makes automatic cuts to blunt deficits.

### **2. PDMP Use Now Required of Veterans Health Administration Prescribers**

On November 21, President Trump signed into law the *VA Prescription Data Accountability Act 2017* ([HR 1545](#)) requiring the Veterans Health Administration to use prescription drug monitoring programs (PDMPs) for anyone – veteran or non-veteran – who is prescribed a controlled substance medication through the VA. In 2016, the AAFP [called](#) on the VA to require that their prescribers participate in PDMPs.

### **3. Health Professions Programs Highlighted in Capitol Hill Briefing**

Family physician and Assistant Professor at the Georgetown University School of Medicine, Yalda Jabbarpour, MD, spoke at the November 28 Health Professions and Nursing Education Coalition (HPNEC) briefing on the Title VII health professions and Title VIII nursing workforce development programs administered by the Health Resources and Services Administration. This well-attended briefing provided Congressional staff with an overview of how Title VII and VIII grantees are helping patients with opioid use disorders, increasing access to care for rural communities, practicing preventive medicine, and promoting health equity.

#### **4. AAFP Joins the Call for Bipartisan Gun Violence Prevention Policies**

The AAFP joined 32 organizations in urging House and Senate leaders to act on bipartisan gun violence prevention policies. The [November 21 letter](#) expressed concerns about recent mass shootings and encouraged support for safety policies such as enhanced background checks and funding for gun safety research.

### **CENTERING ON THE STATES**

#### **1. Center for State Policy Backgrounders**

The Center for State Policy has produced backgrounders on [Scope of Practice - Pharmacists](#) and [Scope of Practice - Physician Assistants](#) to help aid state advocacy efforts.

#### **2. AAFP Comments on the NAIC's Prescription Drug Benefit Management Model Act**

On November 30, the AAFP joined a [coalition letter](#) to the National Association of Insurance Commissioners (NAIC) as they work to update their Model Act related to prescription drug benefits. The letter urges the NAIC to revise the Model Act before approving it, including (1) prohibiting health plans from making mid-year changes to prescription drug formularies or utilization management changes; (2) improving formulary disclosure information; and (3) requiring stronger conflict of interest standards for the entities creating formularies and utilization management programs.

#### **3. AAFP Staff Attend the Republican Governors Association Annual Conference**

To strengthen AAFP's state advocacy capacity, FamMedPAC has begun supporting the Democratic Governors Association (DGA) and the Republican Governors Association (RGA). FamMedPAC will not be giving to individual Governors' races, but feels these associations are an important way to connect with state leaders. As a result, staff attended the RGA Annual Conference where they discussed the value of family medicine to Governors and key staff. AAFP staff will attend a DGA event at the beginning of 2018.

#### **4. State Work on Children's Health Insurance Program Funding**

On November 27, the Colorado Medicaid agency began sending [notices](#) to Children's Health Insurance Program enrollees urging them to begin researching other coverage options since Congress has not yet extended federal funds for the program. States are expected to face tough decisions if Congress doesn't extend CHIP quickly as 27 states are [expected](#) to exhaust federal CHIP funds January-March 2018. The Georgia AFP and Maine AFP have sent letters to their Governors urging their support for Congress to extend CHIP.

#### **5. Massachusetts Enacts Legislation Advancing Contraceptive Coverage**

Massachusetts Gov. Charlie Baker (R) signed [legislation](#) into law that requires state insurers cover birth control without copay. This is the first state level requirement and will guarantee access to birth control with no copay if the *Affordable Care Act* is repealed or changed.

### **EXECUTIVE BRANCH**

#### **1. Comments Sent on 2019 Marketplace Proposed Rule**

In a [letter](#) sent to CMS on November 21, the AAFP expressed concern on a proposed rule designed to offer additional state flexibility in the definition of essential health benefits. As proposed, a single outlier plan with minimum benefits could now count as typical, even if it's

much less generous than other plans in the market. The AAFP is further concerned that under the rule, insurers could reduce or eliminate certain EHBs to avoid vulnerable, expensive patients by excluding specific services. The AAFP proposes to maximize the proven benefits of health care coverage and a continuous relationship with a primary care physician by establishing a standard primary care benefit in high-deductible health plans (HDHP). Under our proposal, individuals would be able to connect with the health care system through visits with their primary care physician or their primary care team.

## **2. AAFP urges HHS to Withdraw Regulations Impacting Access to Contraceptives**

The AAFP sent CMS a [letter](#) on November 30 urging HHS to preserve guaranteed coverage of women's preventive services, including contraception, at no out-of-pocket cost in private insurance plans. The letter also urged the withdrawal of the two interim final rules so that women do not lose coverage. The interim final rules are designed to expand exemptions to protect religious or moral beliefs for certain entities and individuals whose health plans are subject to a mandate of contraceptive coverage through the ACA.

## **3. Family physicians nominated to agency advisory committees**

- On November 21, the AAFP nominated Joy Melnikow, MD, MPH and Eric Wall, MD, MPH to serve on the Medicare Evidence Development & Coverage Advisory Committee, which provides advice and guidance regarding the adequacy of scientific evidence available to CMS in making coverage determinations under the Medicare program.
- The AAFP nominated Beth Anne Fox, MD, MPH, CPE, FAAFP and Clare Arnot Hawkins, MD, MSC, FAAFP to serve on the FDA's Tobacco Products Scientific Advisory Committee in a letter sent November 29. This committee advises the FDA in discharging responsibilities related to the regulation of tobacco products.