

February 10, 2017

On the Horizon ...

* On February 15, the Senate Labor, Health and Human Services, Education Appropriations Subcommittee will hold a hearing titled “Mental Health Care: Examining Treatments and Services.”

* On February 16, the Senate Finance Committee will hold a hearing on the nomination of Seema Verma to be the Administrator of the Centers for Medicare and Medicaid Services.

U.S. CONGRESS

1. Senate Confirms Price for HHS Secretary

The Senate on February 10 voted to confirm Rep. Tom Price, MD (R-GA), to be the next Secretary of Health and Human Services. The vote was [52-47](#). The confirmation process continues next week when Senate Finance Committee holds a hearing on the nomination of Seema Verma to be the Administrator of the Centers for Medicare and Medicaid Services.

2. House Subcommittee Approves Minor Medicaid Reform Bills

On February 7, the House Energy and Commerce Health Subcommittee approved two bills to achieve budget savings through small Medicaid program eligibility changes. The two bills are under review as part of the health reform “repeal and replace” process to improve health care efficiencies. First, the Subcommittee approved [HR 829](#), by a vote of 20-11, a bill introduced by Rep. Fred Upton (R-MI), which would change how lottery winnings and other lump sum income are calculated for Medicaid beneficiary eligibility. The Health Subcommittee also approved [HR 181](#), by a 19-13 vote, a bill sponsored by Rep. Markwayne Mullin (R-OK) to amend how spousal income is considered for those whose spouse may be considered for the Medicaid [Long Term Services and Supports Program](#) benefits. The budget savings from the two bills will be targeted to the [Home and Community Based Services Program](#).

CENTERING ON THE STATES

1. Bills of Interest

Following are a few bills that may be of interest:

- **Affordable Care Act** – The Hawaii Senate advanced [legislation](#) out of committee to maintain core provisions of the *Affordable Care Act* in the event of a federal repeal. The legislation preserves the individual mandate, ensures all health insurers provide ten essential health benefits, and extends dependent coverage for adult children to 26. The bill also prohibits pre-existing condition exclusions and gender discrimination.
- **Family Planning Coverage Requirements** – [Massachusetts](#) and [Oregon](#) introduced legislation which would mandate that insurers cover contraceptives with no cost-sharing in anticipation of federal action deleting these provisions.
- **Medicaid/Medicare Parity** – [Massachusetts](#) and [Washington](#) introduced legislation to mandate that Medicaid rates be equal to the federal Medicare rates for the same services.

- **Primary Care Provider Payment Rates** – Minnesota [SF 694](#) repeals the tax on hospital and health care providers and increases primary care provider payment rates.
- **Prescription Drug Abuse** – Colorado [SB 74](#) creates the Medicaid-Assisted Treatment (MAT) Pilot Program. The bill would assist nurse practitioners and physician assistants working in specific counties to prescribe buprenorphine as part of providing MAT to opioid-dependent patients.

2. State Medicaid Fact Sheets Available

The Kaiser Family Foundation has published Medicaid state [fact sheets](#). The two-page documents provide a snapshot with key data for Medicaid in every state related to current coverage, access, and financing. The fact sheets also highlight implications of reduced federal financing in a Medicaid block grant or per capita cap.

THE EXECUTIVE BRANCH

1. AAFP and Others Call for “Unequivocal” Vaccine Support

On February 7, the AAFP joined over 350 national and state organizations in a sign-on [letter](#) to President Donald Trump urging “unequivocal” support for vaccines. The letter was supported by the American Academy of Pediatrics, the American College of Physicians, American College of Preventive Medicine, and the American Medical Association. It commented on the well-documented value of vaccines and their role in saving lives for children and adults. It also points to the evidence regarding vaccine safety and cost-effectiveness.

2. Regulatory Briefs

- On February 2, CMS [released](#) information that the Open Enrollment for 2017 coverage ended with more than 9.2 million plan selections in states that use the HealthCare.gov eligibility and enrollment platform. This Open Enrollment Snapshot covers the period from January 15, 2017 through January 31, 2017. This snapshot does not include plan selections from State-based Marketplaces. CMS will release a detailed final enrollment report in March.
- On February 3, CMS extended the submission deadline for 2016 Quality Reporting Document Architecture (QRDA) data submission for the EHR reporting mechanism. Individual eligible professionals (EPs), PQRS group practices, qualified clinical data registries (QCDRs), and qualified EHR data submission vendors (DSVs) now have until March 13, 2017 to submit 2016 EHR data via QRDA. The original submission deadline was February 28, 2017.
- CMS will host the following free educational calls; [registration](#) is required:
 - Understanding and Promoting the Value of Chronic Care Management Services Call, on Feb 21, 1:30 pm ET.
 - Looking Ahead: The IMPACT Act in 2017 Call, Feb. 23, 1:30pm ET.
 - Global Surgery: Required Data Reporting for Post-Operative Care Call, April 25, 1:30 pm ET.

TAKE ACTION

1. Join Your Colleagues as a Key Contact

Do you have a relationship with your elected official? A new Congressional Management Foundation study found that of the top five ways to impact legislation, four are through direct contact with constituents. We want to give you the tools and training to make the most out of your communications. If you would like to learn more about our Key Contact program, [please click here](#) or email our Grassroots Strategist, [Eric Storey](#), directly. Do you not have a relationship, but would still like to get involved? Join the [Family Physician Action Network](#), and learn how you can give voice to family medicine.