

April 13, 2018

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

\* On April 17 the House Veterans' Affairs Subcommittee on Health Committee will hold a hearing on pending legislation; including the VA Health Care Provider Education Debt Relief Act of 2017, among others.

\* On April 19 the Senate Finance Committee will hold a hearing on Tackling Opioid and Substance Use Disorders in Medicare, Medicaid, and Human Services Programs.

## **TAKE ACTION**

### **The 2018 Family Medicine Advocacy Summit Has Sold Out!**

There will be over 225 family physicians attending this year's [annual advocacy summit](#) in Washington, DC on May 21-22, 2018. The first day of the summit will consist of policy briefings and interactive trainings in preparation for meetings on the second day with legislators and their staff on Capitol Hill.

## **U.S. CONGRESS**

### **1. Health Committees Continue Reviewing Opioid Legislation**

The House Energy and Commerce Committee held a two-day [hearing](#) to examine 34 legislative proposals to address the nation's opioid crisis. The bills focused on the role of Medicaid and Medicare in providing care for patients who need substance use disorder treatment. The hearing addressed the potential use of telehealth to increase access to medication-assisted treatment and the development of potential payment models to support primary care coordination. The AAFP is reviewing these and other proposals before the Senate Health, Education, Labor, and Pensions Committee, which held a [hearing](#) on the same day.

### **2. Family Physician Testifies for HRSA at House Appropriations Hearing**

The House Labor, Health and Human Services, and Education, Appropriations Subcommittee held a [hearing](#) on fiscal year 2019 investments in health workforce and rural communities. Family physician [Luis Padilla, MD](#), the Associate Administrator for Health Workforce at the Health Resources and Services Administration (HRSA) and [Tom Morris](#), HRSA's Associate Administrator for Rural Health Policy testified, thanking legislators for their bipartisan, bicameral efforts to pass the [2018 Consolidated Appropriations Act](#) and the [Bipartisan Budget Act of 2018](#). Legislators in both parties criticized the Administration's proposal to eviscerate HRSA's health workforce programs including Title VII, Section 747 Primary Care Training and Enhancement grants. Several Subcommittee members raised concerns about rural maternity care and hospital closures. Others expressed interest in integrating substance abuse services into local police departments. Rep. Andy Harris, MD (R-MD) asked about steps to reduce physician administrative burden. Mr. Morris noted that HRSA recognizes that quality payment reporting can challenge small practices, so they are working to allow community based programs to spread the administrative burden. In addition, HRSA's licensure and portability program is working with

medical boards to look at ways to reduce the burden for telehealth clinicians who must apply for licensure in multiple states.

### **3. AAFP Supports FY 2019 Appropriations Priorities**

The AAFP continues to advocate for federal funding priorities as Congress works on FY 2019 appropriations. On March 27, the AAFP was one of 142 organizations that sent letters to the leadership of the [House](#) and [Senate](#) Labor, Health and Human Services (HHS) and Education Appropriations Subcommittees requesting \$454 million in budget authority for AHRQ to restore AHRQ to its FY 2010 level adjusted for inflation. Rep. Don Beyer (D-VA) circulated a Dear Colleague [letter](#) in support of AHRQ funding which was cosigned by 38 members of Congress.

On April 9, the AAFP and 152 other members of the CDC Coalition [wrote](#) to the bipartisan, bicameral leadership of the Labor-HHS Appropriations Subcommittees to request \$8.445 billion for the Centers for Disease Control and Prevention's programs in FY 2019.

### **4. AAFP Supports Paid Sick Leave**

On April 4, 2018, the AAFP sent a [letter](#) to the chairs and ranking members of the House Education and the Workforce Committee and the Senate Health, Education, Labor and Pensions Committee in support of paid sick leave legislation.

## **CENTERING ON THE STATES**

### **1. Bills of Interest**

- **Medicaid Eligibility** – The Oklahoma State Senate recently passed [SB 1030](#), a bill that would lower Medicaid eligibility for parents and caretakers in the state from 43 percent of the Federal Poverty Level (FPL) to 20 percent FPL. Oklahoma, which did not expand Medicaid to childless adults under the Affordable Care Act (ACA), already has one of the lowest eligibility thresholds for parents and caretakers in the country, and the new legislation would make parents in a family of four, making a combined income of \$5,020, ineligible for Medicaid coverage. The bill is now pending before the Oklahoma House.
- **Work requirements** – Illinois's [HB 1317](#) would prohibit the state from submitting a waiver for federal approval that would result in any loss of health insurance coverage under the Affordable Care Act's Medicaid expansion component. Because the work requirements submitted for approval in nearly a dozen states are expected to make some individuals ineligible for Medicaid, this legislation represents a de facto State ban on work requirements for the Medicaid program.
- **Direct Primary Care** – Governors in [Iowa](#) and [Florida](#) recently signed bills into law expanding direct primary care (DPC) in their states, joining 23 other states that allow this innovative practice model.

### **2. Chapter Advocacy Webinar – Prescription Drug Pricing**

[Registration](#) is open for the Chapter Advocacy Webinar focused on Prescription Drug Pricing. The webinar, scheduled for April 20 at 1:00 p.m. CT, will include presentations from the National Academy for State Health Policy, Health Access, and the AAFP Government Relations team.

### **3. The AAFP and Alabama AFP Submit Comments on Section 1115 Waiver**

On April 2, the AAFP and Alabama AFP sent a joint [letter](#) to the Alabama Deputy Commissioner Gretel Felton opposing their waiver application which would impose a work requirement on Medicaid recipients. Alabama's Medicaid program currently has the most stringent eligibility requirements of any state, with an upper income threshold of 18% of the federal poverty level.

### **4. Iowa Governor Signs Legislation to Allow Insurance Plans to Flout ACA Requirements**

Iowa Governor Kim Reynolds has signed bipartisan [legislation](#) to allow the Iowa Farm Bureau to partner with Wellmark Blue Cross Blue Shield to offer plans in the state exempt from regulatory oversight and ACA regulations. These plans, which are not be required to cover the ACA's list of

essential health benefits or accept individuals with pre-existing conditions, are modeled after similar plans currently offered in Tennessee. The new law is similar to a [rule](#), proposed by the Trump administration and [opposed by the AAFP](#), to allow certain employers and self-employed individuals to pool together to purchase association health plans not subject to many of the ACA's requirements.

## **5. CMS Announces Further Changes to Marketplace Insurance Regulations and Individual Mandate**

CMS released [rules](#) outlining changes to ACA insurance regulations and the marketplaces. Under the final rule, states would be allowed greater flexibility in choosing which of the ten essential health benefits to include in health plans beginning in 2020. The rule would also partially roll back the requirement that insurers spend at least 80 percent of their premiums on health care and quality improvement, and would raise the threshold that triggers an automatic rate review of premium hikes from ten to 15 percent. Additionally, CMS has announced that individuals living in counties with no or one insurer on the marketplace exchanges will be exempt from the individual mandate in 2018, ahead of its repeal in 2019.

## **EXECUTIVE BRANCH**

### **1. AAFP Supports Public Service Loan Forgiveness Clarity**

On April 4, 2018, the AAFP sent a [letter](#) to U.S. Department of Education Secretary Betsy DeVos urging consistent guidance on Public Service Loan Forgiveness qualifying payments and employment to promote this critical opportunity for medical student debt relief for borrowers who work in public service jobs while making regular payments on their student debt.

### **2. Head Start Commended for Addressing Tobacco Use**

On April 5, the AAFP and others sent a [letter](#) to the HHS Office of Head Start applauding the agency for including health education around tobacco use and facilitating access to tobacco cessation services in changes to the 2019-2020 Head Start Program Information Report (PIR) to better align with the revised Head Start Program Performance Standards. The Head Start PIR is intended to provide comprehensive data on the services, staff, children, and families served by Head Start and Early Head Start programs nationwide. The information collected is important in helping influence policies and supporting better health outcomes for children and families. The inclusion of health education about tobacco use and facilitating access to tobacco cessation services will support and enhance the quality of the information to be collected.

### **3. AAFP Provides Suggestions to FDA Nicotine Steering Committee**

On April 10, the AAFP sent the FDA a [letter](#) with suggestions for their Nicotine Steering Committee. The AAFP called for strong regulatory action on all nicotine and tobacco-related issues and for the FDA to work with CMS to increase opportunities for family physicians and other healthcare professionals to counsel patients about tobacco cessation. The AAFP also supported the use of over the counter nicotine replacement therapy (OTC NRT) since it is a safe and effective form of therapeutic nicotine used for combustible tobacco product cessation but pointed out that these products are more effective when partnered with counseling.