

American Nephrology Nurses Association

Weekly Capitol Hill Update - Tuesday, January 22, 2019

Congressional Schedule

Senate

- Senate meets at 1pm

House

- House meets at noon; first and last votes expected 6:30-7:00 pm

Legislative Update

- **Week in Review**
 - *HHS secretary, Senate Finance Republicans talk drug pricing.* "Senate Finance Republicans met with Health and Human Services Secretary Alex Azar on Wednesday to discuss the administration's drug pricing proposals. The committee's new chairman, Sen. Chuck Grassley (R-Iowa), said the senators and Azar discussed the administration's controversial proposal to base what Medicare pays for prescription drugs on prices in other countries. Some Republicans aren't ready to back the proposal, claiming that it the proposal imports foreign price controls."
 - Read more: <https://thehill.com/policy/healthcare/425709-hhs-secretary-meets-with-senate-finance-republicans-on-drug-pricing>
 - *Dem chairwoman plans hearing on Medicare for all proposals.* "The incoming chairwoman of a powerful health care subcommittee on Wednesday said that she intends to hold a hearing on several 'Medicare for all' proposals, potentially giving the plans a chance to be considered by key lawmakers. 'There are several Medicare for all bills that are out there, but they all have a different interpretation,' Rep. Anna Eshoo (D-Calif.), the new chairwoman of the Energy and Commerce health subcommittee, told reporters. 'I think that it would be interesting to have the authors of these bills come to testify and explain what their bill does and have the members ask them questions.'"
 - Read more: <https://thehill.com/policy/healthcare/425704-dem-chairwoman-plans-hearing-on-medicare-for-all-proposals>

- **House Democrats launch drug-pricing probe into a dozen major health-care companies.** “The House Oversight Committee is investigating the actions of a dozen pharmaceutical companies in raising prescription drug prices in the U.S., the panel announced Monday. Chairman Elijah Cummings, D-Md., sent letters to AbbVie, Amgen, AstraZeneca, Celgene, Eli Lilly, Johnson & Johnson, Mallinckrodt, Novartis, Novo Nordisk, Pfizer, Sanofi and Teva Pharmaceuticals seeking detailed information and documents about the companies' pricing practices.”
 - Read more: <https://www.cnn.com/2019/01/14/house-democrats-launch-drug-pricing-probe-on-a-dozen-companies.html>
- **Grassley to test GOP on lowering drug prices.** “Sen. Chuck Grassley (R-Iowa) is giving Republicans an early test on their commitment to lowering drug prices. Legislation sponsored by the Senate Finance Committee chairman and Democratic Sen. Amy Klobuchar (Minn.) would allow people to buy prescription drugs from approved pharmacies in Canada. The bill is reigniting a long-simmering debate about drug importation, a proposal strongly opposed by the powerful pharmaceutical lobby.”
 - Read more: <https://thehill.com/policy/healthcare/426106-grassley-to-test-gop-on-lowering-drug-prices>
- **Week Ahead**
 - **Alexander, Murray introduce bill to support community health centers that allow over 27 million Americans to get care close to home.** “Senate health committee Chairman Lamar Alexander (R-Tenn.) and Ranking Member Patty Murray (D-Wash.) today introduced legislation that will extend for five years federal funding for community health centers, and four other federal health programs, that are set to expire at the end of the fiscal year. The Committee will hold a hearing on this legislation to hear from program experts on January 29, 2019.”
 - Read more: https://www.alexander.senate.gov/public/index.cfm/pressreleases?ContentRecord_id=0946AA0C-0281-4C66-8714-67CF0DCEE356

Regulatory and Administration Update

- **Assessing payment adequacy and updating payments: outpatient dialysis services.** MedPAC presentation by Nancy Ray and Andy Johnson dated January 17, 2019.
 - Read more: <http://www.medpac.gov/docs/default-source/default-document-library/dialysis-0119-public.pdf>
- **CMS issues the proposed Payment Notice for the 2020 coverage year.** “The Centers for Medicare & Medicaid Services (CMS) today issued the proposed annual Notice of Benefit and Payment Parameters for the 2020 benefit year (proposed 2020 Payment Notice). This rule proposes regulatory and financial parameters applicable to qualified health plans (QHPs) on the Exchanges, plans in the individual, small group, and large group markets, and self-funded group health plans. These changes proposed in the rule would further the Trump Administration’s goals of lowering premiums, enhancing the

consumer experience, increasing market stability, reducing regulatory burdens, and protecting taxpayers.”

- Read more: <https://www.cms.gov/newsroom/press-releases/cms-issues-proposed-payment-notice-2020-coverage-year>
- ***Azar raises possibility of allowing drug importation to help rein in drug prices.*** “Health and Human Services Secretary Alex Azar on Tuesday expressed support for the safe importation of drugs from other countries as a means to spur competition in the prescription drug market and prevent manufacturers from imposing price hikes – a significant turning point in the administration’s approach to drug costs, according to some analysts and experts in the pharmaceutical industry. Under the Medicare Prescription Drug, Improvement, and Modernization Act, the HHS secretary has the authority to permit the importation of drugs from Canada so long as the official can confirm the imports pose no additional risk to public health and safety and generate cost-savings for consumers.”
 - Read more: <https://morningconsult.com/2019/01/15/azar-raises-possibility-of-allowing-drug-importation-to-help-rein-in-drug-prices/>
- ***Trump administration proposes higher ‘Obamacare’ premiums.*** “The Trump administration on Thursday announced proposed rule changes that would lead to a modest premium increase next year under the Affordable Care Act, potentially handing Democrats a new presidential-year health care issue. The roughly 1 percent increase could feed into the Democratic argument that the Trump administration is trying to ‘sabotage’ coverage for millions. The administration said the proposal is intended to improve the accuracy of a complex formula that affects what consumers pay for their premiums.”
 - Read more: <https://www.apnews.com/27246e0cfafc49d885c6860440519e07>
- ***FDA advisory committee split on SGLT 1/2 inhibitor for T1D.*** “An FDA advisory committee is split down the middle on whether to recommend the SGLT-1/2 inhibitor sotagliflozin (Zynquista) for approval. In a vote of 8-8, members of the Endocrinologic and Metabolic Drugs Advisory Committee couldn’t reach a consensus whether or not the benefits outweighed the risks of Sanofi’s investigational drug, which the drugmaker wants OK’d as an add-on to insulin therapy in patients with type 1 diabetes.”
 - Read more: <https://www.medpagetoday.com/endocrinology/type1diabetes/77508>
- ***Hundreds of FDA staff return to work amid shutdown: Commissioner.*** “Gottlieb’s comments come as the longest U.S. government shutdown, triggered by President Donald Trump’s demand for \$5.7 billion from Congress to fund a wall on the border with Mexico, reached its 25th day. The FDA employees returning to work, mostly without pay, include about 100 staff focused on inspections of high-risk medical device manufacturing facilities, about 70 focused on inspections of high-risk drug manufacturing facilities and about 90 focused on inspections of high-risk biological manufacturing facilities, Gottlieb said.”
 - Read more: <https://www.reuters.com/article/us-usa-shutdown-fda/hundreds-of-fda-staff-return-to-work-amid-shutdown-commissioner-idUSKCN1P92IA>

- ***FDA clears the way to increase access and lower cost of life-saving opioid overdose treatment drug.*** “The Food and Drug Administration is clearing the way for drug companies to increase access and lower the cost of a life-saving drug used to treat opioid overdoses. The FDA said Thursday it is streamlining the labeling for naloxone, a prescription drug that can reverse an opioid overdose if caught early enough. The change will enable drugmakers to produce over-the-counter versions of the medication that some have criticized as prohibitively expensive and difficult to buy.”
 - Read more: <https://www.cnn.com/2019/01/16/fda-wants-pharma-to-bring-opioid-antidote-naloxone-over-the-counter.html>
- ***Medicare experiment could put more pressure on insurers to save money on prescription drugs.*** “The federal government is giving health insurance companies that run Medicare prescription drug plans new tools it hopes will save money for patients. The Centers for Medicare and Medicaid Services announced a voluntary program Friday that will allow Medicare Part D plans, which share the cost of prescription drug insurance with the federal government, to keep more of the savings they negotiate — with the caveat that if they don’t save enough money, they have to pay the government back for it.”
 - Read more: <https://www.statnews.com/2019/01/18/medicare-experiment-insurers-drug-prices/>

Articles of Interest

- ***Secretive ‘rebate trap’ keeps generic drugs for diabetes and other ills out of reach.*** “Lisa Crook was lucky. She saved \$800 last year after her insurance company started covering a new, less expensive insulin called Basaglar that was virtually identical to the brand she had used for years. But many people with diabetes can't get the deal Crook got. In a practice that policy experts say smothers competition and keeps prices high, drug companies routinely make hidden pacts with middlemen that effectively block patients from getting cheaper generic medicines.”
 - Read more: <https://www.healthleadersmedia.com/finance/secretive-rebate-trap-keeps-generic-drugs-diabetes-and-other-ills-out-reach>
- ***U.S. insulin costs per patient nearly doubled from 2012 to 2016: study.*** “The cost of insulin for treating type 1 diabetes in the United States nearly doubled over a five-year period, underscoring a national outcry over rising drug prices, according to a new analysis shared with Reuters. A person with type 1 diabetes incurred annual insulin costs of \$5,705, on average, in 2016. The average cost was roughly half that at \$2,864 per patient in 2012, according to a report due to be released on Tuesday by the nonprofit Health Care Cost Institute (HCCI). The figures represent the combined amount paid by a patient and their health plan for the medicine and do not reflect rebates paid at a later date.”
 - Read more: <https://www.reuters.com/article/us-usa-healthcare-diabetes-cost/u-s-insulin-costs-per-patient-nearly-doubled-from-2012-to-2016-study-idUSKCN1PG136>
- ***AHRQ Data Spotlight: Uncontrolled diabetes admissions.*** “According to a new Data Spotlight (PDF, 350 KB) from AHRQ, the overall hospitalization rate among American Indians and Native Alaskans for uncontrolled diabetes declined about 84 percent

between 2000 (58 per 100,000 people) and 2015 (9 per 100,000). The analysis from AHRQ's 2017 *National Healthcare Quality and Disparities Report*, showed the rate has declined for all age groups, including those 65 and older. The data is based on patients who served at Indian Health Service hospitals and others that operate under contract with tribes and tribal organizations (excluding those in the Portland, OR, and California regions)."

- Read more: <https://www.ahrq.gov/news/data-spotlight-diabetes.html>
- ***Physical activity reduces mortality in patients with diabetes.*** "Patients with type 2 diabetes should be prescribed physical activity to control blood sugar and improve heart health. That is one of the recommendations in a position paper of the European Association of Preventive Cardiology (EAPC), a branch of the European Society of Cardiology (ESC). The paper is published today in the *European Journal of Preventive Cardiology*, a journal of the ESC. The paper provides practical recommendations for doctors on how to motivate patients to incorporate physical activity into their daily routine, set achievable and measurable goals, and design individualised exercise training programmes to meet those goals."
 - Read more: https://www.eurekalert.org/pub_releases/2019-01/esoc-par011019.php
- ***Organ transplants in United States set sixth consecutive record in 2018.*** "The 36,527 organ transplants performed in the United States in 2018 set an annual record for the sixth straight year, according to preliminary data from United Network for Organ Sharing (UNOS), which serves as the national Organ Procurement and Transplantation Network (OPTN) under federal contract. In 2018, the total number of organ transplants exceeded 750,000 performed since 1988, the first full year national transplant data were collected."
 - Read more: <https://unos.org/organ-transplants-in-united-states-set-sixth-consecutive-record-in-2018/>
- ***Furloughed Feds health coverage intact, but shutdown still complicates things.*** "Although the estimated 800,000 government workers affected by the shutdown won't lose their health insurance, an unknown number are in limbo, unable to change insurers because of unforeseen circumstances; add family members such as spouses, newborns or adopted children to an existing health plan; or deal with other issues that might arise."
 - Read more: <https://californiahealthline.org/news/furloughed-feds-health-coverage-intact-but-shutdown-still-complicates-things/>
- ***Patient and medical groups blast Trump in administration drug pricing proposal in new ad campaign.*** "A coalition of patient advocacy and medical groups – led by the American Cancer Society's advocacy arm and joined by the American Medical Association – launched an advertising campaign Thursday to drum up opposition to a proposed change to Medicare they say will 'put patients' lives at risk.' The policies at the center of the groups' concerns would allow private Medicare prescription drug plans to further restrict what drugs patients can use through methods like prior authorization or step therapy."
 - Read more: <https://www.statnews.com/2019/01/17/patient-groups-ad-campaign-against-trump-drug-pricing-proposal/>

- ***Doctor says shutdown may force him to turn away patients addicted to opioids.*** “Senate Minority Leader Chuck Schumer (D-N.Y.) warned over the weekend that the shutdown could soon impact the treatment of patients addicted to opioids. Doctors treating those patients have to get approval from the now-shuttered Drug Enforcement Administration if they want to prescribe Suboxone, a drug used in conjunction with other therapies to manage opioid addiction. Doctors who want to prescribe the medication to more patients also have to get approval from the federal government.”

 - Read more: <https://www.wbur.org/hereandnow/2019/01/16/shutdown-opioid-patients-treatment>

- ***Compare Democrats' many Medicare-For-All proposals with this chart.*** “Now that Democrats have taken control of the U.S. House of Representatives, they have promised to hold hearings on proposals to move the U.S. toward the type of universal health care found in other industrialized nations, including our northern neighbors in Canada. These proposals range from extending the current Medicare program to people age 55 and older, to a single-payer system that does away with insurance companies and employer-based health insurance altogether. No fewer than eight proposals have been put forward to date, and more will surely follow.”

 - Read more: <https://www.pbs.org/newshour/economy/making-sense/compare-democrats-many-medicare-for-all-proposals-with-this-chart>

- ***Seven in 10 maintain negative view of U.S. healthcare system.*** “Seventy percent of Americans describe the current U.S. healthcare system as being ‘in a state of crisis’ or having ‘major problems.’ This is consistent with the 65% to 73% range for this figure in all but one poll since Gallup first asked the question in 1994.”

 - Read more: <https://news.gallup.com/poll/245873/seven-maintain-negative-view-healthcare-system.aspx>

- ***Drug maker payments to doctors are linked to higher opioid overdose deaths.*** “As efforts intensify to blunt the ongoing opioid crisis, a new study finds that increased marketing of the addictive painkillers to physicians resulted in more prescribing and, subsequently, more deaths from overdose. Interestingly, industry influence over physicians was greater based on the number of interactions, not the amount of money paid for speaking or the value of freebies, such as meals. Between August 2013 and December 2015, drug makers made nearly 435,000 payments totaling \$39.7 million to 67,500 doctors in 2,200 counties across the U.S. The payments were for meals, travel costs, speaking and consulting, but not research. And the data showed that the more marketing directed at physicians in a given county, the higher the number of overdoses, regardless of the money spent.”

 - Read more: <https://www.statnews.com/pharmalot/2019/01/18/opioids-payments-doctors-overdose-deaths/>