

American Nephrology Nurses Association

Weekly Capitol Hill Update – Monday, January 23, 2017

Congressional Schedule

House

- “Convenes at 2 p.m. for consideration of 11 bills under the suspension of the rules.” (CQ)
- **Week Ahead:** “On Tuesday the House meets at noon for consideration of a bill (HR 7) that would permanently prohibit the use of federal funds to pay for abortions or abortion coverage, and prohibit federal medical facilities and health professionals from providing abortion services. It will also take up three bills under suspension of the rules.” (CQ)

Senate

- “Convenes at 3 p.m. and will resume consideration of the nomination of Rep. Mike Pompeo to lead the CIA, with a vote expected around 6 p.m.” (CQ)

Legislative Updates

- *Week in Review:*
 - **Trump Signs ObamaCare Executive Order.** “President Trump on Friday signed an executive order directing federal agencies to “ease the burden of ObamaCare. Trump signed the order in front of reporters at the Resolute Desk in the Oval Office, one of his first official acts as president. The order did not direct any specific actions, instead giving broad authority to the Department of Health and Human Services and other agencies to take actions available to them under the law to ease regulatory requirements from ObamaCare. It pushes agencies to target provisions that impose a “fiscal burden” on a state or a “cost” or “regulatory burden” on individuals or businesses. It is not clear what practical effects will come from the order.”
 - To read more: <http://thehill.com/homenews/administration/315414-trump-signs-obamacare-executive-order>
 - **GOP Senators: Give States the Option of Keeping ObamaCare.** “Two Republican senators on Monday unveiled the outlines of an ObamaCare replacement plan that they hope would be able to attract some Democratic

support. The plan, from Sens. Bill Cassidy (R-LA) and Susan Collins (R-ME), contains less drastic changes than some Republican proposals. It envisions keeping many of ObamaCare's taxes in place in order to provide revenue for the replacement plan and gives states the choice of whether they want to keep ObamaCare. Under the plan, known as the Patient Freedom Act, state legislatures would have the choice of whether to keep ObamaCare operating in their states, complete with its subsidies, mandates and protections for people with pre-existing conditions. Other states, the senators say, could opt into an alternative plan that would provide a uniform tax credit linked to a health savings account to help people afford a basic, less comprehensive health insurance plan."

- To read more: <http://thehill.com/policy/healthcare/315670-gop-senators-give-states-the-option-of-keeping-obamacare>
- *Trump Speaks With Top Dem About High Drug Prices.* "President Trump told Rep. Elijah Cummings (D-MD) at an inaugural luncheon Friday that the two needed to meet about the high cost of prescription drugs, according to a Cummings aide. Cummings is one of the most outspoken lawmakers in favor of government action to fight high drug prices. Trump's apparent willingness to work with him on the issue is a further sign that the new president is upending the usual GOP position against government action on drug prices. The conversation between Trump and Cummings was first reported by April Ryan of American Urban Radio Networks."
 - To read more: <http://thehill.com/policy/healthcare/315465-trump-speaks-with-top-dem-about-high-drug-prices>
- *What We Know and Don't Know About Trump's Health Care Plans.* "President Trump told Fox News last week that when it comes to ObamaCare, "we're going to have a plan that's going to be great for people." What that plan will actually be, though, remains unclear. Trump has said that he will put forward an ObamaCare replacement plan shortly after Rep. Tom Price (R-GA) is confirmed as secretary of Health and Human Services, an announcement that caught lawmakers off guard. If Trump actually follows through on putting forward his own plan, rather than letting Congress take the lead, it could provide some guidance to Republican efforts to come up with an ObamaCare replacement, though lawmakers are sure to want their own say on any plan as well. Trump has dropped a few hints on his ideas for a replacement plan."
 - To read more: <http://thehill.com/policy/healthcare/315387-what-we-know-and-dont-know-about-trumps-healthcare-plans>

Regulatory Updates

- *CMS and UM-KECC Issue Call for Nominations for ESRD Patient-Reported Outcomes Technical Expert Panel (TEP).* CMS and UM-KECC are seeking nominations of individuals to review potential patient-reported measure concepts and provide recommendations for measure development. The TEP will be comprised of patients and

individuals with expertise in the subject matter, methodology, and performance measurement.

- Nomination materials are due February 10, 2017.
 - For more information, please visit: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/TechnicalExpertPanels.html#2222>
- **GAO Report - National Institutes of Health: Kidney Disease Research Funding and Priority Setting.** “An estimated 17 percent of U.S. adults have chronic kidney disease—the most common form of kidney disease—a condition in which the kidneys are damaged and cannot filter blood sufficiently, causing waste from the blood to remain in the body. Kidney disease patients may progress to ESRD, a condition of kidney failure, which can cause death without dialysis or kidney transplant. In 2013, the Medicare program—which pays for ESRD treatment—spent \$30.9 billion to treat approximately 530,000 patients. Given the high cost of kidney disease in terms of health consequences and federal spending, GAO was asked to examine how the federal government funds and prioritizes kidney disease research. This report describes (1) the level of NIH funding for biomedical research on kidney disease, and for other leading diseases and conditions; and (2) how NIDDK sets priorities for kidney disease research.

To describe NIH funding for research on kidney disease and other diseases and conditions, GAO selected leading diseases and conditions (based on mortality and prevalence) and analyzed their levels of research funding based on NIH data for fiscal year 2015. To describe how NIDDK sets priorities for kidney disease research, GAO reviewed documents—including those on research portfolios and strategic planning—from NIDDK, NIH, and other relevant federal agencies. Also, GAO interviewed agency officials and private kidney care groups representing a broad range of perspectives.”

- To view the report, please visit: <http://www.gao.gov/assets/690/681714.pdf>
- **CMS Releases ESRD QIP Performance Score Reports for Payment Year 2017.** “CMS released End-Stage Renal Disease (ESRD) Quality Incentive Program (QIP) Payment Year (PY) 2017 Final Performance Score Reports (PSRs) for outpatient dialysis facilities. This PSR finalizes your facility’s performance, including any revisions from the Preview Period. In addition, PY 2017 performance and payment-reduction information for all facilities is posted on [Dialysis Facility Compare](#) and the [ESRD QIP](#) website.”
 - To retrieve your Final PSR and Performance Score Certificates, access your account via [QualityNet](#). For questions about the Final PSR or the program, contact ESRDQIP@cms.hhs.gov.
 - **Public Comment Request; NURSE Corps Loan Repayment Program.** “The need and purpose of this information collection is to obtain information for NURSE Corps LRP applicants and participants. The information is used to consider an applicant for a NURSE Corps LRP contract award and to monitor a participant’s compliance with the service requirements. Individuals must submit an application to participate in the program. The application asks for personal, professional, educational, and financial information required to determine the applicant's eligibility to participate in the NURSE Corps LRP. The semi-annual employment verification form asks for personal and

employment information to determine if a participant is in compliance with the service requirements. The Authorization to Release Employment Information form is now a self-certification within the NURSE Corps LRP application process with applicants clicking a box. This decreases the overall time burden by eliminating a form and not increasing the “average” time required to complete the NURSE Corps LRP application.”

- For more information: <https://s3.amazonaws.com/public-inspection.federalregister.gov/2017-00998.pdf>
- ***Request for Medicare Payment Advisory Commission Nominations.*** “GAO is now accepting nominations for MedPAC appointments that will be effective May 1, 2017. Letters of nomination and resumes should be submitted no later than March 10, 2017 to ensure adequate opportunity for review and consideration of nominees prior to appointment of new members. Acknowledgement of submissions will be provided within a week of submission. Please contact Greg Giusto at (202) 512-8268 if you do not receive an acknowledgment.”
 - For more information: <https://s3.amazonaws.com/public-inspection.federalregister.gov/2017-00593.pdf>

Articles of Interest

- ***Trump Signs Executive Actions on TPP, Abortion, Federal Hiring Freeze.*** “President Trump signed an executive order on Monday announcing his plan to withdraw the U.S. from the Trans-Pacific Partnership (TPP) trade deal. The order fulfills Trump’s campaign promise to abandon the Pacific Rim trade pact early in his administration. “We’ve been talking about this for a long time,” Trump said after signing the order in the Oval Office, adding that leaving the 12-nation pact is a “great thing for the American worker.” The president also signed two other executive actions: one that places a hiring freeze on non-military federal workers and another that cuts off federal funding for foreign organizations that provide abortions.”
 - For the full article: <http://thehill.com/homenews/administration/315654-trump-signs-orders-on-tpp-abortion-federal-hiring-freeze>
- ***GOP Governors Defend Medicaid Expansion.*** “Several Republican governors are defending ObamaCare’s expansion of Medicaid in their states, highlighting a thorny issue for the party as lawmakers navigate repeal of the healthcare reform law. Full repeal would mean eliminating the law’s expansion of eligibility for Medicaid coverage, which has provided insurance for about 11 million new people in 31 states. Many of those states have Republican governors who are wary of their constituents losing coverage and of their state budgets losing the infusion of federal money that came with the expansion of the program, which affects low-income citizens. Several governors came to Washington Thursday to meet with Republican lawmakers to discuss Medicaid and how to handle the future of the program.”
 - For the full article: <http://thehill.com/policy/healthcare/315173-gop-governors-defend-medicaid-expansion>
- ***Trump Summons Business Leaders, Lawmakers To White House.*** “Opening his first official week in office, President Donald Trump warned business leaders Monday that he would impose a “substantial border tax” on companies that move their

manufacturing out of the United States, while promising tax advantages to companies that produce products domestically. "All you have to do is stay," he said during a morning meeting in the White House's Roosevelt Room. Tesla CEO Elon Musk and Marillyn Hewson of Lockheed Martin were among the executives who attended the meeting. The gathering kicked off a jam-packed day for the new president...

- For the full article:

http://hosted.ap.org/dynamic/stories/U/US_TRUMP?SITE=AP&SECTION=HOME&TEMPLATE=DEFAULT&CTIME=2017-01-22-03-06-36&utm_source=&utm_medium=email&utm_campaign=5837

- ***Patients with Chronic Kidney Disease Not on Dialysis Have Higher Out-of-Pocket Costs.*** "Patients who have chronic kidney disease but are not on dialysis have higher out-of-pocket healthcare expenses than even stroke and cancer patients, according to a study by researchers at Loyola University Chicago and Loyola Medicine. Chronic kidney disease patients paid a median \$1,439 in annual out-of-pocket costs, compared with \$770 for cancer patients and \$748 for stroke patients. Patients who did not have chronic kidney disease, cancer or stroke spent \$226 on out-of-pocket costs. The study was published in the journal BMC Nephrology. Out-of-pocket spending includes coinsurance, deductibles and payments for services, supplies and other items not covered by insurance."
 - To read more, please visit: <http://www.newswise.com/articles/kidney-disease-patients-have-higher-out-of-pocket-costs-than-stroke-and-cancer-patients>

Hearings

Tuesday, January 24th:

- The Senate Finance Committee holds a hearing on the nomination of Rep. Tom Price (R-GA) to be HHS Secretary.
- The House Budget Full Committee holds a hearing on "The Failures of Obamacare: Harmful Effects and Broken Promises."
 - 10:15 am @ 1334 Longworth House Office Building
- The House Ways and Means Oversight Subcommittee holds a hearing on "Examining the Effectiveness of the Individual Mandate under the Affordable Care Act."
 - 2:00 pm @ 1100 Longworth House Office Building