

## American Nephrology Nurses Association

Weekly Capitol Hill Update - Monday, January 8, 2018

### Congressional Schedule

#### Senate

- Senate is set to meet on Monday at 3pm.
- The Senate agenda includes proceeding to executive session to resume consideration of judicial nominees

#### House

- House is set to hold a quorum call on Monday to officially kick off second session of 115th Congress; lawmakers return Tuesday at 10am to consider 15 bills.

### Legislative Update

- **Week in Review**
  - *Trump administration rolls out bid to expand association health plans.* “The Trump administration Thursday proposed new rules following up on the president's pledge to let certain small businesses and trade groups band together to buy health care, a move that could weaken the Obamacare insurance marketplaces. The expansion of so-called association health plans is part of a broader effort to encourage the rise of cheaper coverage options that don't comply with certain Obamacare patient protections and benefit rules.”
    - To read more: <https://www.politico.com/story/2018/01/04/trump-administration-association-health-plan-324021>
  - *Credit rater predicts stable year for ObamaCare markets.* “The ObamaCare insurance markets will be relatively stable through 2018, analysts predicted Wednesday. Insurers have adapted to the uncertainty surrounding the Trump administration's handling of the law, A.M. Best, a global credit rating

organization, wrote in a briefing released Wednesday. It said insurers should have a stable 2018. The analysts had previously predicted a negative outlook for insurers in 2018.”

- To read more: <http://thehill.com/policy/healthcare/367216-analysts-predict-stable-year-for-obamacare-markets>

- **House GOP whip: Entitlement reform, ObamaCare repeal on 2018 agenda.** “‘ObamaCare repeal and entitlement reform are at the top of the agenda for House Republicans in 2018,’ Majority Whip Steve Scalise (R-La.) said Tuesday... House Speaker Paul Ryan (R-Wis.) has said recently that Republicans will focus on giving states "more flexibility in Medicaid," which could involve allowing them to impose work requirements on recipients. Scalise also indicated House Republicans would turn back to ObamaCare repeal in 2018.”

- <http://thehill.com/policy/healthcare/367035-house-gop-whip-entitlement-reform-obamacare-repeal-on-agenda-for-2018>

- **Week Ahead**

- **10 Issues Congress Faces in January.** “As the second session of the 115th Congress kicks off Wednesday, lawmakers are confronted with a daunting January to-do list full of issues they punted on in 2017. Typically, January is a slow legislative month leading up to the party caucuses’ annual retreats, where lawmakers formally develop an agenda for the year. House and Senate Republicans will hold a joint retreat from Jan. 31 to Feb. 2 at the Greenbrier resort in West Virginia, and House Democrats will huddle the following week in Cambridge, Maryland. But last year, Congress deferred action on an omnibus spending bill for the current fiscal year and extended deadlines on expiring programs into the new year, procrastinating until at least January on those topics. So lawmakers face the prospect of confronting at least 10 major legislative issues before their party retreats.”

- To read more: <http://www.rollcall.com/news/politics/10-issues-congress-faces-january>

- **Confirmation hearing for Trump's health secretary pick scheduled for next week.** “President Trump's pick to lead the Department of Health and Human Services (HHS) will face his confirmation hearing next week, Senate Finance Chairman Orrin Hatch (R-Utah) announced Tuesday. Alex Azar, a former HHS official and pharmaceutical executive, will go before the Finance Committee 10 a.m. Jan. 9.”

- To read more: <http://thehill.com/policy/healthcare/367133-confirmation-hearing-for-trumps-health-secretary-pick-scheduled-for-next>
- *It's unclear what gets done this month on health care.* “Congress still has the same long list of health care problems to solve as it has had since the fall. The Children's Health Insurance Program needs to be reauthorized, the individual insurance market likely needs to be stabilized, and the health care industry really wants some Affordable Care Act taxes to be delayed. But it's unclear how much of that will be addressed this month. Be smart: The big political fight this month is much more likely to be around immigration than health care, although Democrats – or even key Republicans – could use their leverage to get CHIP funding reauthorized, as well. What to watch: The GOP will need Democrats' support to pass a spending bill. But you can only win so many battles at once, and Democrats are fighting this month to raise domestic spending caps, pass an immigration measure and pass a CHIP bill – or at least to find an agreement in all these areas.”
  - To read more: <https://www.axios.com/so-much-to-do-but-unclear-what-gets-done-this-month-on-health-care-2521876137.html>
- *Trump poised to take action on Medicaid work requirements.* “The Trump administration is preparing to release guidelines soon for requiring Medicaid recipients to work, according to sources familiar with the plans, a major shift in the 50-year-old program. The guidelines will set the conditions for allowing states to add work requirements to their Medicaid programs for the first time, putting a conservative twist on the health insurance program for the poor. Democrats are gearing up for a fight, likely including lawsuits, arguing the administration is trying to undermine ObamaCare’s Medicaid expansion on its own after Congress failed to repeal the health-care law.”
  - To read more: <http://thehill.com/policy/healthcare/367514-trump-poised-to-take-action-on-medicaid-work-requirements>

### Regulatory and Administration Update

- *Proposed MAC policy undermines value of more frequent dialysis.* “Medicare administrative contractors are responsible for reviewing claims from health care providers, including dialysis companies, and paying Medicare rates for provided patient services. Seven of these MACs simultaneously released proposed LCDs, or payment policy rules, last September on how these contractors would cover more frequent hemodialysis, defined as beyond the standard three times per week covered in the bundled payment rate. These seven MACs (there are 10 total) proposing new rules on more frequent dialysis represent 11 of the 12 jurisdictions, and cover 45

states and nearly 90% of dialysis patients in the United States. As a result, these proposed rules are far reaching for nephrologists who want to prescribe more frequent dialysis (MFD) and providers who get paid for the treatments. The MACs offered public hearings on the proposed rules in November and December.”

- To read more: <https://www.nephrologynews.com/proposed-mac-policy-undermines-value-frequent-dialysis/>

- ***Government advisory committee recommends RPA shared savings model for initial dialysis care.*** “A proposal to implement a shared savings model for nephrologists’ reimbursement during the initial 6 months of dialysis care has won approval from a government advisory committee and is under review by CMS for possible implementation. The Renal Physicians Association, which has developed the alternate payment model, presented its proposal to the Physician-Focused Payment Model Technical Advisory Committee (PTAC) on Dec. 18, 2017. The committee reviewed the RPA’s proposal and voted to recommend to the Secretary of the HHS that CMS implement the proposal.

“RPA believes that the daunting patient presentation and fiscal circumstances of the current entrance into [end-stage renal disease] ESRD (defined as ‘incident dialysis’) offer a discernible and viable opportunity to improve patient choice of treatment modality, clinical outcomes and quality of life, while reducing the overall ‘spend’ for these patients in both the Medicare program and with private insurers,” Robert Blaser, director of public policy for the RPA, wrote in an article in NN&I’s November 2017 issue. ‘Given that the first 6 months for adult patients transitioning from chronic kidney disease (CKD) to ESRD and facing the need for renal replacement therapy are associated with the highest mortality and complication rates, frequent hospitalizations and significantly higher costs, this period in a patient’s kidney disease journey offers the prospect of enhanced patient-centric care and cost savings through nephrology-specific medical management of their disease.’”

- To read more: <https://www.nephrologynews.com/government-advisory-committee-recommends-rpa-shared-savings-model-initial-dialysis-care/>

- ***Trump takes new tack to weaken ObamaCare.*** “The Trump administration is turning to regulations as their last, best hope of chipping away at ObamaCare in 2018, with congressional Republicans unlikely to pass full repeal. A proposed rule released Thursday targeting the health law is likely the first step in a new effort to undermine the law. And advocates for ObamaCare worry that another forthcoming rule could cause even more damage. The administration on Thursday eased rules on small businesses that band together to buy health insurance through what are known as association health plans (AHPs). The proposal retains ObamaCare protections for people with pre-existing conditions and prohibits lifetime limits on benefits. But it would allow associations to purchase cheaper health insurance that

won't cover the ten 'essential health benefits,' which include mental health, substance abuse treatment, maternity care and prescription drugs."

- To read more: <http://thehill.com/policy/healthcare/367698-trump-takes-new-tack-to-weaken-obamacare>
- ***What FDA Commissioner Scott Gottlieb is planning for 2018.*** "Helping foster gene therapies; overhauling medical device reviews; using nutrition to fight disease: They're all priorities for FDA in 2018, Commissioner Scott Gottlieb said on POLITICO's 'Pulse Check' podcast. 'We're going to announce in the next couple of weeks a policy road map,' Gottlieb said. '[It's] going to lay out what our 2018 agenda's going to be, or at least a good part of it.' Gottlieb, who was tapped by President Donald Trump to reform an agency the president had criticized as 'slow and burdensome,' has overseen a flurry of activity to speed up FDA, including approving more than 1,000 generic drugs last year, a record. One major focus in 2018: gene therapy, just months after FDA approved its first. 'We think we're at an inflection point,' Gottlieb said, adding that FDA will likely put out disease-specific guidance on how to develop gene-therapy products, how to define the endpoints and how to create accelerated approval pathways."
  - To read more: <https://www.politico.com/story/2018/01/05/pulse-check-what-fda-commissioner-scott-gottlieb-is-planning-for-2018-264256>

### Articles of Interest

- ***'Forget About the Stigma': Male Nurses Explain Why Nursing Is a Job of the Future for Men.*** "The experiences of male nurses offer lessons that could help address a problem of our time: how to prepare workers for the fastest-growing jobs, at a time when more than a quarter of adult men are not in the labor force. Only 13 percent of nurses in the United States are men, but that share has grown steadily since 1960, when the number was 2 percent, according to a working paper published in October by the Washington Center for Equitable Growth."
  - To read more: <https://www.nytimes.com/interactive/2018/01/04/upshot/male-nurses.html>
- ***Out-of-Pocket Health Costs Are Rising, But Not That Much.*** "'Dad, I got a bill for \$1,113.' One of our daughters was incensed. 'I went to my doctor with a simple question. She sent me downstairs where they drew a few tubes of blood for tests. It took two minutes. How do I owe over \$1,000?' She's not the only one outraged by out-of-pocket health costs in the U.S. Many of us feel we are paying more for less and less insurance coverage. We blame high-deductible plans, rising co-pays and other policies that seem to shift more costs onto patients. Headlines such as 'Out-of-pocket health spending in 2016 increased at the fastest rate in a decade' amplify the

unhappiness. But the perception of ever higher out-of-pocket health-care costs obscures important facts.”

- To read more: <https://www.bloomberg.com/view/articles/2018-01-04/out-of-pocket-health-costs-are-rising-but-not-that-much>
  
- ***Racial-Ethnic Gap in Living Donor Kidney Transplantation Widens.*** “From 1995 to 2014, racial and ethnic disparities in living donor kidney transplantation have increased despite national efforts to narrow the gap, according to a new study. Of 453,162 first-time adult candidates (mean age 50.9 years; 39% women) on the Scientific Registry of Transplant Recipients (SRTR), receipt of a kidney from a living donor within 2 years on the waiting list increased from 7.0% to 11.4% among white patients and from 5.1% to 5.6% among Asian patients from 1995 to 2014. Black and Hispanic candidates were less fortunate. Receipt of a living donor kidney decreased from 3.4% to 2.9% among blacks and from 6.8% to 5.9% among Hispanics over the same period, a team led by Dorry L. Segev, MD, PhD, of Johns Hopkins Medical Institutions in Baltimore, reported in the Journal of the American Medical Association.”
  - To read more: <http://www.renalandurologynews.com/transplantation/living-donor-kidney-transplantation-ethnic-disparities-grew-1995-to-2014/article/734398/>
  
- ***Proposed MAC policy undermines value of more frequent dialysis.*** “Medicare administrative contractors are responsible for reviewing claims from health care providers, including dialysis companies, and paying Medicare rates for provided patient services. Seven of these MACs simultaneously released proposed LCDs, or payment policy rules, last September on how these contractors would cover more frequent hemodialysis, defined as beyond the standard three times per week covered in the bundled payment rate. These seven MACs (there are 10 total) proposing new rules on more frequent dialysis represent 11 of the 12 jurisdictions, and cover 45 states and nearly 90% of dialysis patients in the United States. As a result, these proposed rules are far reaching for nephrologists who want to prescribe more frequent dialysis (MFD) and providers who get paid for the treatments. The MACs offered public hearings on the proposed rules in November and December.”
  - To read more: <https://www.nephrologynews.com/proposed-mac-policy-undermines-value-frequent-dialysis/>
  
- ***In a turf battle for organs, a policy review rattles the national transplant system.*** “Tethered to a breathing machine at a Manhattan hospital, 21-year-old Miriam Holman would die without a lung transplant. But her odds of finding a suitable organ were especially low in New York, where waiting times are among the longest in the country. Just across the Hudson River in New Jersey, patients in far better condition routinely receive lungs much more quickly. Pockets of the South and Midwest also have dramatically shorter waiting times. The disparities stem from a

principle that has always guided the national transplant system: local first. Most organs stay in the areas where they are donated, even if sicker patients are waiting elsewhere. But a federal judge's recent emergency order in a lawsuit by Holman is threatening to upend decades of organ transplant policy and force places with a relative abundance of organs to start sharing more of them. With too few donors to meet the demand – last year there were 33,610 transplants while 12,412 patients died on waiting lists or were removed from consideration because they were deemed too sick to survive surgery – transplant centers have long fought over how to allocate organs. California and New York, which have the most severe shortages, have been on the losing side of that battle.”

- To read more: <http://www.latimes.com/nation/la-na-organ-transplant-20180103-htmlstory.html>