

## American Nephrology Nurses Association

Weekly Capitol Hill Update - Tuesday, May 17th, 2016

### Congressional Schedule

#### House

- “Met at 2 p.m. on Monday for work on nine bills under suspension of the rules, including a measure (H.R. 3832) that would require the Internal Revenue Service to take numerous actions to combat tax-related identity theft and fraudulent tax refunds and a bill (H.R. 1150) that would strengthen a State Department program that promotes religious freedom around the world.” (CQ)
- **Week Ahead:** “On Tuesday and Wednesday, the House will meet at noon for legislative business and members have been advised to expect late votes. On Thursday, the House will meet at 9 a.m. for work, with last votes expected no later than 3 p.m. The schedule for bills to be considered this week has yet to be set, but expect action on the House version of the annual Defense Authorization Act (H.R. 4909), the Military Construction-VA spending bill (H.R. 4974), and a postponed Democratic motion to instruct House conferees on a bill (S. 524) to authorize opioid abuse treatment programs.” (CQ)

#### Senate

- “Convened at 2 p.m. on Monday for legislative business. At 5:30 the Senate voted on the nomination of Paula Xinis to be a U.S. district judge.” (CQ)
- **Week Ahead:** “The chamber is expected to begin consideration of the vehicle (H.R. 2577) for its Military Construction-VA and Transportation-HUD spending bills. It will also hold votes Tuesday on amendments to provide money for the Zika virus outbreak.” (CQ)

### Legislative Updates

- **Lawmakers to Vote on Zika Funding.** “Republican leaders in both chambers plan to advance funding packages for a response to the Zika virus in the coming week, ending a months-long standoff with Democrats. Sens. Roy Blunt (R-MO) and Patty Murray (D-WA) reached a deal Thursday on a \$1.1 billion funding package. That legislation would bring the total amount of money available to fight Zika to \$1.6 billion – about \$300 million shy of President Obama’s request in February. The Senate’s funding would be on top of \$589 million redirected from the Obama administration’s last emergency

funding request for the Ebola virus. The Blunt-Murray package will be attached to the joint appropriations bill for transportation and military construction, which is headed for a Senate floor vote, likely on Thursday.”

- For the full article, please see the following link:

<http://thehill.com/policy/healthcare/279886-week-ahead-lawmakers-to-vote-on-zika-funding>

- ***House GOP Unveils \$622 million Zika Bill.*** “House Republicans on Monday introduced a bill to provide \$622 million in additional funding to fight the Zika virus this year. The measure is fully paid for, in part by shifting over unspent money that was intended to fight Ebola, the House Appropriations Committee said. The House is likely to vote on the bill, which would provide a fraction of the \$1.9 billion requested by the White House, this week. Republicans had previously stated that funding could wait until next year, but Democrats have been increasing pressure on the GOP to act. Still, the path forward for funding to be signed into law is far from clear. While both House and Senate Republicans are now moving forward with funding, they are working with significantly different amounts. The Senate is expected to vote this week on a \$1.1 billion bill. Drew Hammill, a spokesman for House Democratic Leader Nancy Pelosi (CA), said Democrats would oppose the House GOP bill. ”
  - For the full article, please see the following link:  
<http://thehill.com/policy/healthcare/280027-house-gop-unveils-622-million-zika-bill>
- ***Moderate Senate Democrats Want Changes to Part B Demo.*** “They're asking CMS to change the size and scope of the demo and make alterations to ensure that seniors' care is protected, Sen. Heidi Heitkamp and colleagues wrote to Slavitt on Friday. The Democrats also raised concerns about patient access and rural doctors. (Politico)
  - To view the letter, please see the following link: <http://bit.ly/1TckHHi>
- ***House Begins Work on Spending Bills Despite Budget Impasse.*** “House Republicans are plowing ahead with their first spending bill of the year despite the lack of a budget resolution to guide them. GOP leaders say they haven't given up on passing a budget resolution after months of internal debate about what it should contain. Yet passing a budget is increasingly a moot point; the House can consider appropriations measures after May 15 without a new spending blueprint. The House and Senate are running out of time to work on the 12 annual spending bills, with both chambers set to recess on July 15 for the national party conventions. The compressed schedule makes it all but inevitable that lawmakers will have to approve some sort of stopgap measure to avoid a government shutdown before the elections. A larger spending package, known as an omnibus, appears likely at the end of the year. In the meantime, some election-year mischief may be in store thanks to the freewheeling process used to consider appropriations bills in the House. Lawmakers can offer as many amendments as they want, often with little or no advance notice to their colleagues. While GOP leaders tout an “open” process in the name of returning to regular order, the procedure allows members of the minority party to force uncomfortable votes.”

- For the full article, please see the following link:  
<http://thehill.com/homenews/house/280106-house-begins-work-on-spending-bills-despite-budget-impasse>
- ***GOP Prepares Opioids Bills to Send to Obama's Desk.*** "The House on Friday put the finishing touches on a major package of legislation to address the opioids epidemic, which GOP leaders say could be one of their top achievements in 2016. Lawmakers voted 400-5 on the *Comprehensive Addiction and Recovery Act* – its version of the opioids legislation passed the Senate in March. The sweeping bill passed Friday is the 18th measure on opioids approved this week, all on a broad bipartisan basis. The legislation will now move to a conference with the Senate package, and is likely to receive President Obama's signature despite Democratic protests that the bill lacks sufficient funding. Speaker Paul Ryan (R-WI) and House Majority Leader Kevin McCarthy (R-CA) have made the legislation tackling drug addiction the centerpiece of the week, despite the focus on GOP presumptive presidential nominee Donald Trump's presence in D.C. on Thursday. 'This has been a big week in the House,' McCarthy said at a ceremony after the bill's passage, with about 25 GOP lawmakers behind him. Many of the bill's authors are House Republicans from states hit hard by drug addiction who are facing reelection this fall. Reps. Frank Guinta (NH), Ryan Costello (PA) and Barbara Comstock (VA), who each touted their roles in the legislation at Friday's press conference, are listed among the House's most competitive races of 2016, according to the Cook Political Report."
  - For the full article, please see the following link:  
<http://thehill.com/policy/healthcare/279848-gop-leaders-prepare-to-send-opioids-bills-to-obamas-desk>
- ***Justice Department Will Appeal Decision in Affordable Care Act Case.*** "The Department of Justice will appeal a judge's ruling that the Obama administration is unconstitutionally funding part of the *Affordable Care Act* (ACA), a department spokesman confirmed Friday. The announcement was expected. It follows a federal judge's decision Thursday to side with House Republicans in their lawsuit against the administration. House Republicans alleged in that lawsuit that the administration illegally spent money that Congress never appropriated for the ACA's cost-sharing provisions. Those provisions include reduced deductibles, copayments and coinsurance many Americans receive, depending on income, for plans purchased through the ACA's insurance exchanges."
  - For the full article, please see the following link:  
<http://www.businessinsurance.com/article/20160516/NEWS03/160519858/justice-department-will-appeal-decision-in-affordable-care-act-case>
- ***GOP Chairman Sees Funding Deal Soon on Medical Cures Bill.*** "The leader of the House's landmark medical cures legislation expressed hope on Wednesday that the bill is moving ahead in the Senate after nearly a year of delay. House Energy and Commerce Committee Chairman Fred Upton (R-MI) said Wednesday his Senate counterparts are inching toward a deal on how to pay for the bill, something he said could be reached 'in the next couple of weeks. We're already at second base,' Upton said at an event on rare diseases hosted by The Hill and sponsored by the Pharmaceutical Research and

Manufacturers of America (PhRMA). ‘We’ve got to find the offsets. We’re in the midst of doing it. We’ve had some very positive discussions.’ Upton was chief sponsor of the *21st Century Cures Act*, which passed the House near-unanimously last July. Since then, however, the bill has stalled in the Senate, where lawmakers have struggled to find offsets for a key part of the bill – new mandatory spending on medical research. The Michigan Republican wouldn’t give a timeline for when the bill could reach the floor, though, he has said he hopes to complete the task before his term as chairman expires this year. Upton said paying for the bill remains the last hurdle before it can reach the Senate floor.”

- For the full article, please see the following link:

<http://thehill.com/policy/healthcare/279577-gop-chairman-sees-funding-deal-soon-on-medical-cures-bill>

### **Regulatory Updates**

- ***Medicare Advantage: Action Needed to Ensure Appropriate Payments for Veterans and Nonveteran.*** The Government Accountability Office (GAO) found that “in fiscal year 2010, the Department of Veterans Affairs (VA) health care system provided \$2.4 billion in inpatient and outpatient services to the 833,684 veterans enrolled in Medicare Advantage (MA), a private plan alternative to Medicare fee-for-service (FFS). While the Centers for Medicare & Medicaid Services (CMS), an agency within the HHS, generally pays Medicare fee-for-service (FFS) providers separately for each service provided, MA plans receive a monthly payment from CMS to provide all services covered under Medicare FFS. These monthly payments are based in part on a bidding target, known as a benchmark, and risk scores, which are used to adjust the payment amount to account for beneficiary demographic characteristics and health conditions. Both the benchmark and risk scores are calibrated based on Medicare FFS spending. Therefore, VA’s provision of Medicare-covered services to veterans enrolled in Medicare FFS likely resulted in lower Medicare FFS spending and, in turn, lower overall payments to MA plans.”
  - For the full GAO summary and report, please see the following link:  
<http://www.gao.gov/products/GAO-16-137>
- ***Medicaid Program Integrity: Improved Guidance Needed to Better Support Efforts to Screen Managed Care Provider.*** The GAO “found that the selected states and Medicaid managed care plans face significant challenges in screening providers for eligibility to participate in the Medicaid program. Based on information we received from two selected states and 16 selected plans, GAO found that the states and plans used information that was fragmented across 22 databases managed by 15 different federal agencies to screen providers. These databases included databases that CMS had not identified for use in screening providers. Officials from some states noted that these additional databases provided better assurance they would not enroll ineligible providers—i.e., providers who have been barred from participating in federal health care programs. Federal internal control standards stress the importance of collecting quality information to achieve objectives and assess risks. However, the variety of databases used for screening purposes beyond those identified by CMS, along with the current rate of improper payments to Medicaid providers, suggests that CMS might not

have identified all reliable sources of information about ineligible providers that could help states and plans achieve program objectives. State officials and plan representatives also said that accessing and using fragmented information from multiple and disparate federal databases challenged their screening efforts.”

- For the full GAO summary and report, please see the following link:  
<http://www.gao.gov/products/GAO-16-402>
- ***HHS Releases Final Rule, Nondiscrimination in Health Programs and Activities (Section 1557 of the ACA).*** Section 1557 of the ACA has been in effect since the enactment of the ACA in 2010 and the HHS Office for Civil Rights (OCR) has been enforcing the provision since it was enacted. The rule implementing Section 1557 covers any health program or activity, any part of which receives funding from HHS (such as hospitals that accept Medicare or doctors who accept Medicaid); any health program that HHS itself administers; and the Health Insurance Marketplaces and issuers that participate in those Marketplaces. It requires covered entities with 15 or more employees to have a grievance procedure and a compliance coordinator. The final rule also requires that covered entities post notices of nondiscrimination and taglines that alert individuals with limited English proficiency to the availability of language assistance services. Additionally, the final rule requires each covered entity to post taglines in at least the top 15 non-English languages spoken in the State in which the entity is located or does business. Its implications include banning discrimination due to pregnancy and gender identity or sex stereotyping; prohibiting insurance companies from excluding or limiting coverage of gender transition; providing access to facilities that correspond to a person’s gender identity; and the provision of language assistance services, including oral interpreters.
  - To view the final rule, please see the following link:  
<https://s3.amazonaws.com/public-inspection.federalregister.gov/2016-11458.pdf>
- ***U.S. Equal Employment Opportunity Commission Issues Final Rules On Employer Wellness Programs.*** “The U.S. Equal Employment Opportunity Commission (EEOC) on Monday finalized rules outlining the extent to which employer-sponsored wellness plans can comply with the Americans with Disabilities Act by offering incentives while still protecting employees against discrimination. The commission published two rules in Monday’s federal register, the first of which amended agency regulations implementing Title II of the Genetic Information Nondiscrimination Act, which protects workers from certain employment actions based on their genetic information, including the health status of their family. The GINA rule changed regulations to allow employers offering certain wellness programs to provide some financial and other incentives in exchange for an employee’s spouse providing health information, as long as that information isn’t used to discriminate against an employee. The second rule amended the agency’s regulations for implementing Title I of the ADA to allow employers to offer incentives for wellness programs that are part of a group health plan and that ask questions about employees’ health or include medical examinations.”
  - For the full rule, please see the following link:  
[http://www.law360.com/publicpolicy/articles/796611?nl\\_pk=97e0dd47-c87c-43ef-be60-](http://www.law360.com/publicpolicy/articles/796611?nl_pk=97e0dd47-c87c-43ef-be60-)

[18cb20c26402&utm\\_source=newsletter&utm\\_medium=email&utm\\_campaign=publicpolicy](https://www.whitehouse.gov/blog/2016/05/14/weekly-address-conversation-addiction)

- ***Weekly Address: A Conversation about Addiction.*** “In this week's address, Grammy Award-winning artist Macklemore joined President Obama to discuss a disease that affects far too many Americans: addiction. Macklemore opened up about his own experience, his life in recovery, and the loss of a friend who overdosed on prescription drugs at a young age – emphasizing that substance use disorder affects people from all walks of life. To underscore the importance of Macklemore's story, the President noted that we can help those suffering in private by making the conversation public, and we should do everything we can to make treatment available to everyone who needs it. While the House of Representatives passed several bills on opioids this week, without more funding to expand treatment, these bills will not be enough to provide Americans the help they need. President Obama said there is hope, and that when we treat substance use disorder as the public health problem it is, more people will get the help they need.”
  - For the full article, please see the following link:  
<https://www.whitehouse.gov/blog/2016/05/14/weekly-address-conversation-addiction>

#### **Articles of Interest**

- ***Communication Key for Nurses in the Dialysis Patient Handoff.*** “...While NFL teams may practice the handoff incessantly to spare themselves of their own “butt fumble,” dialysis staff don’t do as well when it comes to handing off patients from an outpatient to an acute care setting or skilled nursing facility, said Tamara Kear, PhD, RN, CNS, CNN, in her talk, ‘At the starting gate of patient handoff’ during the American Nephrology Nurses Association national Symposium here this past week. A patient handoff is the transfer of and acceptance of responsibility for patient care, achieved through effective communication, Kear said. ‘It is a real-time process of passing relevant patient information from one caregiver to another to ensure continuity and safety of patient care. The exchange of information,’ is key, she said, but relevance is equally important. It doesn’t need to be a ‘25-year health history’ of the patient, she told ANNA attendees, just what is important for continuity of care. Kear, who has helped to direct review of other important topics, like patient safety, build her study on handoff procedures with research funding from ANNA and the Barbara Prowant Research Fund.”
  - For the full article, please see the following link:  
<http://www.nephrologynews.com/communication-key-nurses-dialysis-patient-handoff/>
- ***NYT: Obamacare Plans Are Not Comprehensive.*** “That's according to a cover story in the Sunday Review, which suggests that the ACA exchanges' strong reliance on narrow-network plans has created access problems and resentments among customers. ‘Many say they feel as if they have become second-class patients,’ Elizabeth Rosenthal writes. And ‘compared with the insurance that companies offer their employees, [ACA] plans

provide less coverage away from patients' home states, require higher patient outlays for medicines and include a more limited number of doctors and hospitals.'"

- For the full article, please see the following link: <http://nyti.ms/23TkcSd>
- Is it as bad as the New York Times says? Stephen Zuckerman doesn't think so. The Urban Institute scholar points to his research that says access to care under ACA exchange plans and traditional employer-sponsored plans are similar. Please see the link for the rebuttal article: <http://urbn.is/1rNISzU>

### Hearings

#### **Tuesday, May 17th:**

- **House Ways and Means Health Subcommittee Member Day Hearing - *Tax-Related Proposals to Improve Health Care***
  - 10:00 a.m. @ 1100 Longworth House Office Building
- **House Energy and Commerce Health Subcommittee Hearing - *The Obama Administration's Medicare Drug Experiment: The Patient and Doctor Perspective***
  - 10:00 am @ 2123 Rayburn House Office Building
- **Senate Appropriations Agriculture, Rural Development, Food and Drug Administration Subcommittee Hearing - *Markup of the Fiscal Year (FY) 2017 Agriculture Appropriations Bill***
  - 4:00 pm @ 124 Dirksen Senate Office Building

#### **Wednesday, May 18th:**

- **House Ways and Means Social Security Subcommittee Hearing - *Protecting Social Security from Waste, Fraud, and Abuse***
  - 10:00 am @ B-318 Rayburn House Office Building
- **House Ways and Means Human Resources Subcommittee Hearing - *The Heroin Epidemic and Parental Substance Abuse: Using Evidence and Data to Protect Kids from Harm***
  - 10:00 am @ 1100 Longworth House Office Building

#### **Thursday, May 19th:**

- **Senate Appropriations Committee Hearing - *Markup of the FY17 Agriculture Appropriations Bill and the FY17 Legislative Branch Appropriations Bill***
  - 10:30 am @ 106 Dirksen Senate Office Building
- **House Energy and Commerce Health Subcommittee Hearing - *Examining H.R. 3299, Strengthening Public Health Emergency Response Act***
  - 10:00 am @ 2123 Rayburn House Office Building

## Briefings

### Tuesday, May 17th:

- The Alliance for Integrity and Reform of 340b will hold a National Leadership Summit, *Preserving the True Safety Net*
  - 9:00 am @ The Ronald Reagan Building
  - For more information, please see the following link:  
<http://www.340bleaderships summit.org/page.asp?ID=76>

### Wednesday, May 18th:

- Representatives Eric Paulsen (D-MN) and Peter Welch (D-VT) will be hosting a briefing on *Comprehensive Medication Management*
  - 3:00 pm @ B-318 Rayburn House Office Building
- The Rare Disease Congressional Caucus will host a briefing titled *The NIH and FDA: Vital Agencies in the Fight Against Rare Diseases*
  - 2:00 pm @ 201 Senate Capitol Visitor Center
  - To register, please see the following link:  
[http://salsa4.salsalabs.com/o/51556/p/salsa/event/common/public/?event\\_KEY=6492](http://salsa4.salsalabs.com/o/51556/p/salsa/event/common/public/?event_KEY=6492)

### Friday, May 20th:

- ***FY 2016 Regulatory Science Initiatives Part 15 Public Meeting.*** “The Food and Drug Administration (FDA or the Agency) will hold a public meeting that will provide an overview of the current status of the regulatory science initiatives for generic drugs and will provide an opportunity for public input on research priorities in these topic areas. FDA is seeking input from a variety of stakeholders--industry, academia, patient advocates, professional societies, and other interested parties--as it fulfills its commitment under the Generic Drug User Fee Amendments of 2012 (GDUFA) to develop an annual list of regulatory science initiatives specific to generic drugs. FDA will take the information it obtains from the public meeting into account in developing the fiscal year (FY) 2017 Regulatory Science Plan.”
  - For more information, please see the following link:  
<http://www.fda.gov/ForIndustry/UserFees/GenericDrugUserFees/ucm489572.htm>