

American Nephrology Nurses Association

Weekly Capitol Hill Update – Tuesday, August 28, 2018

Congressional Schedule

Senate

- Senate convenes at 10 am; set to hold votes this week on various Trump nominees. After 10:40 am, the chamber is expected to vote on the nomination of Richard Clarida to be vice chairman of the Federal Reserve for a term of four years.

House

- House is in recess until September 4

Legislative Update

- **Week in Review**
 - *Senate passes giant spending package in hopes of averting shutdown.* “The Senate on Thursday overwhelmingly passed an \$857 billion spending package that Republican leaders are counting on to convince President Donald Trump to back down from threats of a government shutdown in September. The package, an uncommon bipartisan truce to fund two-thirds of government operations, was strategically crafted to ward off a presidential veto. But the odds remain long that the legislation will even make it to the White House, with just 11 working days left for House and Senate lawmakers to merge opposing versions of the bills – and get Trump’s approval – before funding runs out on Sept. 30.”
 - Read more: <https://www.politico.com/story/2018/08/23/senate-spending-package-shutdown-750805>
 - *Senate passes measure to require disclosure of drug prices in TV ads.* “The Senate on Thursday passed a measure to provide funding to require drug advertisements to disclose the price of the drug after a last-minute push. The passage came as part of the massive health-care spending bill that the Senate passed on Thursday, which included the amendment from Sens. Chuck Grassley (R-Iowa) and Dick Durbin (D-Ill.). The move marks a rare moment where Congress took some action aimed at high drug prices, a contentious issue that has been a recent target of Democrats and the Trump administration.”

- Read more: <http://thehill.com/policy/healthcare/403357-senate-passes-measure-to-require-disclosure-of-drug-prices-in-tv-ads>
 - *House committee pledges to roll back more Medicare regulations.* “The House Ways and Means Committee said it would continue exploring ways to reduce regulations in Medicare, after issuing a report last week on its conversations with health care providers. While light on specifics, the committee said it is engaging in ‘ongoing dialogue’ with the Trump administration over where legislative solutions are needed to reduce what it deems unnecessary regulations. The report highlighted areas where providers indicated they need more flexibility, including in anti-kickback laws, conditions of participation for hospitals and administrative tasks such as billing and data reporting.”
 - Read more: <http://www.rollcall.com/news/policy/house-committee-pledges-roll-back-medicare-regulations>
 - *McCaskill presses Trump official on lawsuit against pre-existing condition protections.* “Sen. Claire McCaskill (D-Mo.) pressed a top Trump administration official on Tuesday about a lawsuit challenging ObamaCare’s pre-existing condition protections. McCaskill, who is facing a tough reelection race this year, used a Senate Homeland Security and Governmental Affairs Committee hearing to press the head of the Centers for Medicare and Medicaid Services (CMS) about the lawsuit. Verma responded that she supports protections for people with pre-existing conditions and that if the lawsuit backed by the administration against ObamaCare is successful she would work with Congress to try to reinstate them.”
 - Read more: <http://thehill.com/policy/healthcare/402850-mccaskill-presses-trump-health-official-on-lawsuit-against-pre-existing>
- **Week Ahead**
 - House returns to session on September 4.
 - *Kavanaugh confirmation hearings set for Sept. 4.* “Supreme Court nominee Brett Kavanaugh's Senate confirmation hearings will start on Sept. 4 and last between three and four days, Judiciary Chairman Chuck Grassley (R-Iowa) announced on Friday. That scheduling tees up the GOP to meet its goal of getting President Donald Trump's pick seated on the high court by the time its term begins in early October, barring unforeseen obstacles or a breakthrough by Democrats who are pushing to derail Kavanaugh's confirmation.”
 - Read more: <https://www.politico.com/story/2018/08/10/kavanaugh-confirmation-hearings-set-for-sept-4-773344>
 - *Senate inches forward on opioid package after trump tweet.* “President Trump’s tweet pressing for action on opioid legislation in the Senate has some senators hoping for movement on a massive legislative package within the next few weeks. A handful of committees are involved in putting together a package to reduce addiction and deaths from opioids, including Commerce, Justice, Finance, and Health, Education, Labor and Pensions. Each have passed opioid legislation

aimed at addiction treatment, drug abuse prevention, law enforcement, and medical research. The Senate is putting together its own bill to tackle the opioid crisis rather than take up the House- passed bill from June 22, known as H.R. 6. This means that once the Senate passes its legislation, it will need to be hashed out with the House in conference.”

- Read more:

<https://www.washingtonexaminer.com/policy/healthcare/senate-inches-forward-on-opioid-package-after-trump-tweet>

Regulatory and Administration Update

- ***Trump administration gives \$8.6 million to states to help with Obamacare.*** “The Trump administration is making \$8.6 million in leftover funds available to states to help develop their Obamacare markets. The Centers for Medicare and Medicaid Services awarded the grants to 30 states and the District of Columbia so they can meet the requirements set under Obamacare to make sure that plans cover a range of services. The funds are used for hiring, reviewing policies, developing studies, or expanding the number of health plans residents have available to them.”
 - Read more: <https://www.washingtonexaminer.com/policy/healthcare/trump-administration-gives-8-6-million-to-states-to-help-with-obamacare?>
- ***Trump presses Senate on opioid crisis: ‘No more delay!’*** “President Trump on Monday urged the Senate to pass a bill aimed at stopping the flow of synthetic opioids into the U.S. Trump called it ‘outrageous’ that fentanyl – a synthetic opioid 50 times stronger than heroin – is ‘pouring into the U.S. postal system from China.’ The bipartisan bill passed the House in June, but has not been taken up in the Senate. The Senate hoped to vote on a package aimed at addressing the opioid crisis by Labor Day, but that is becoming unlikely as it deals with a Supreme Court nominee and other priorities.”
 - Read more: <http://thehill.com/policy/healthcare/402676-trump-tells-senate-no-more-delay-on-addressing-opioid-crisis>
- ***100 days in, Azar says drug blueprint has helped curb prices.*** “HHS Secretary Alex Azar and his top lieutenants marked the first 100 days of their drug pricing blueprint with a report they said showed the plan has curbed pharmaceutical costs. Compared with the same time period last year, the report said there have been 60% fewer brand drug price increases and 54% more generic and brand drug price decreases since the Trump administration's drug pricing strategy was laid out in May.”
 - Read more: <http://www.modernhealthcare.com/article/20180820/NEWS/180829985>

Articles of Interest

- ***Proposed 2019 Medicare reimbursement changes may negatively impact many nephrologists and dialysis vascular access providers.*** “The Centers for Medicare and Medicaid Services (CMS) released the Calendar Year (CY) 2019 Proposed Rule for the Medicare Physician Fee Schedule (MPFS) on July 12, 2018 (the Proposed Rule), and the CY 2019 proposed rule to update the Medicare Hospital Outpatient Prospective

Payment System (OPPS) and Ambulatory Surgical Center (ASC) Payment System on July 25, 2018. As evidence of the shift to 'site-neutral' payment policies, proposed reimbursement changes continue to place significant financial pressure on physicians and organizations that provide dialysis vascular access services in an office-based (POS-11) setting, while at the same time significantly decreasing the differences in reimbursement for providing such services in a Medicare-certified ASC."

- Read more: <https://www.jdsupra.com/legalnews/proposed-2019-medicare-reimbursement-71545/>
- ***The Dual role of the nephrologist in patient care.*** "Nephrologists face many daily challenges in their role managing chronic kidney disease (CKD). Adding to this list of challenges is the fact that nephrologists often assume the role of primary care physician to patients with end-stage kidney disease (ESKD) who require chronic dialysis. In one study, 90% of surveyed nephrologists responded that they provide primary care to their patients receiving chronic dialysis. According to a Canadian study conducted in 2005, 80% of nephrologists and 85% of family physicians think that dialysis patients should receive primary care from primary care providers (PCPs) and not from nephrologists. In addition, the study showed that there was rampant miscommunication between members of these two fields, leading to 'duplication or omission of services.' Indeed, it remains unclear whether there is evidence for benefit for increased access to nephrologists."
 - Read more: <http://renalfellow.blogspot.com/2018/08/the-dual-role-of-nephrologist-in.html>
- ***Top lobbying groups urge Senate to oppose parts of House-passed opioids bill.*** "Powerful lobbying groups are pushing back against a House-passed bill intended to address the growing opioid epidemic. America's Health Insurance Plans led eight industry groups in a letter to Senate leadership Monday, asking that they oppose a provision in the House measure. The provision, passed as part of the House opioids package in June, would require private insurance plans pay more to cover kidney disease before Medicare becomes the primary payer. The proposed change is meant to offset the costs of the bill, which includes a wide range of measures intended to fight the epidemic."
 - Read more: <http://thehill.com/policy/healthcare/402691-top-lobbying-groups-urge-senate-to-oppose-parts-of-house-passed-opioids>
- ***Kidney disease is a killer. More precise classification can help tame it.*** "Kidney disease is currently identified mainly by how the tissue looks under a microscope without subclassification by molecular or genetic signatures. Fortunately, many research facilities have begun untangling the molecular and genetic variations of chronic kidney disease. This process allows us to think of it not only by designations such as 'minimal change disease,' 'focal segmental glomerulosclerosis,' and 'diabetic nephropathy,' but also by incorporating molecular or genetic tags. This will allow for the identification of distinct target pathways of the disease to treat."
 - Read more: <https://www.statnews.com/2018/08/20/more-precise-classification-can-help-tame-kidney-disease/>

- **Release: Blood test may identify gestational diabetes risk in first trimester, NIH analysis suggests.** “A blood test conducted as early as the 10th week of pregnancy may help identify women at risk for gestational diabetes, a pregnancy-related condition that poses potentially serious health risks for mothers and infants, according to researchers at the National Institutes of Health and other institutions. The study appears in *Scientific Reports*. Gestational diabetes occurs only in pregnancy and results when the level of blood sugar, or glucose, rises too high. Gestational diabetes increases the mother’s chances for high blood pressure disorders of pregnancy and the need for cesarean delivery, and the risk for cardiovascular disease and type 2 diabetes later in life. For infants, gestational diabetes increases the risk for large birth size. Unless they have a known risk factor, such as obesity, women typically are screened for gestational diabetes between 24 and 28 weeks of pregnancy.”

 - Read more: <https://www.nichd.nih.gov/news/releases/081618-gestational-diabetes>

- **Nurses rally for ballot initiative on staffing, target hospital execs.** “The battle for Question 1 is officially on. The Massachusetts Nurses Association, the labor union behind the statewide ballot question to increase nurse staffing in hospitals, slammed hospital executives Tuesday for opposing the measure. The ballot question would set strict limits on the numbers of patients assigned to hospital nurses. Union officials say it’s necessary to ensure that patients receive safe care. Hospital executives say the policy is ill-conceived and enormously costly, and they have been paying for television ads that make that argument.”

 - Read more: <https://www.bostonglobe.com/metro/2018/08/21/nurses-rally-for-ballot-initiatives-staffing-target-hospital-exec/6gKji4h5f0zNLjCKTp2J4I/story.html>

- **Effects of n-3 fatty acid supplements in diabetes mellitus.** “Increased intake of n-3 fatty acids has been associated with a reduced risk of cardiovascular disease in observational studies, but this finding has not been confirmed in randomized trials. It remains unclear whether n-3 (also called omega-3) fatty acid supplementation has cardiovascular benefit in patients with diabetes mellitus.”

 - Read more: https://www.nejm.org/doi/full/10.1056/NEJMoa1804989?query=featured_home

- **Alcohol use and burden for 195 countries and territories, 1990-2016: a systematic analysis for the Global Burden of Disease Study 2016.** “Alcohol use is a leading risk factor for global disease burden and causes substantial health loss. We found that the risk of all-cause mortality, and of cancers specifically, rises with increasing levels of consumption, and the level of consumption that minimises health loss is zero. These results suggest that alcohol control policies might need to be revised worldwide, refocusing on efforts to lower overall population-level consumption.”

 - Read more: [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)31310-2/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)31310-2/fulltext)

- CVS launches program targeting expensive new drugs.** “CVS Caremark will allow its clients to exclude coverage of drugs with extremely high launch prices under a new program the company said is aimed at pressuring manufacturers to lower drug costs. According to CVS, launch prices have been steadily rising for years, and are completely up to the discretion of the manufacturer. The high prices put an unsustainable burden on the country’s health system, CVS said. The new program will use specific methods of comparing the cost and effectiveness of certain medications. CVS said such analyses for the effectiveness of drugs are common in Europe, but don’t exist in America.”

 - Read more: <http://thehill.com/policy/healthcare/401814-cvs-program-will-target-expensive-new-drugs>
- It’s not just the uninsured – it’s also the cost of health care.** “We still have an uninsured problem in the U.S., but we have a far broader health care affordability problem that hits sick people especially hard. Why it matters: It’s time to think more broadly about who’s having trouble paying for the health care they need. The combination of lack of insurance and affordability affects about a quarter of the non-elderly population at any one time, but almost half of people who are sick. Now that the Affordable Care Act has expanded health coverage, the percentage of the non-elderly population that is uninsured is now just under 11%, the lowest level ever recorded. But as the chart shows: Another 15.5% who have insurance either skipped or delayed care because of the cost or reported that they or someone in their family faced problems paying their bills in 2017. That brings the total percentage of non-elderly people with insurance and affordability problems to 26.2%.”

 - Read more: <https://www.axios.com/not-just-uninsured-cost-of-health-care-cdcb4c02-0864-4e64-b745-efbe5b4b7efc.html>
- Anthem, Walmart partner on senior access to OTC medicines.** “Anthem and Walmart are collaborating to increase access to over-the-counter medications to seniors in the insurer’s Medicare Advantage plans. Anthem, which operates Blue Cross and Blue Shield plans in 14 states, said the program will allow seniors in Anthem’s Medicare Advantage plans to use ‘OTC plan allowances to purchase OTC medications and health-related items, such as first aid supplies, support braces, and pain relievers.’ The purchases can be made at Walmart’s 4,700 stores and via the retailer’s web site when the program begins in January 2019.”

 - Read more: <https://www.forbes.com/sites/brucejapsen/2018/08/20/anthem-walmart-partner-to-boost-senior-access-to-otc-medicine/#446b04b736fe>
- Life expectancy declines seen in U.S. and other high-income countries.** “Life expectancy is declining in high-income countries worldwide, driven in part by the effects of the opioid epidemic on younger adults in the U.S. and the impact of a severe flu season on older adults in other nations, two new studies suggest. Life expectancy is a measure of the health and wellbeing of a population. Widespread or sustained declines in life expectancy may signal problems in a nation’s social and economic conditions or in the provision or quality of its healthcare services, researchers write in The BMJ.”

 - Read more: <https://www.reuters.com/article/us-health-lifeexpectancy/life-expectancy-declines-seen-in-u-s-and-other-high-income-countries-idUSKCN1L723R>

- **Report: Trump administration needs to step up on 'Obamacare.'** "A congressional watchdog said Thursday the Trump administration needs to step up its management of sign-up seasons under former President Barack Obama's health care law after mixed results last year in the throes of a failed GOP effort to repeal it. The report from the Government Accountability Office is likely to add to Democrats' election-year narrative that the administration actively undermined 'Obamacare' without regard for the consequences to consumers."
 - Read more: <https://apnews.com/77347f8c0f374885b20cbc73b9d6134a>
- **Seventy percent of Americans support 'Medicare for all' in new poll.** "A vast majority – 70 percent – of Americans in a new poll supports 'Medicare for all,' also known as a single-payer health-care system. The Reuters-Ipsos survey found 85 percent of Democrats said they support the policy along with 52 percent of Republicans. Medicare for all has been in the headlines after a study by the libertarian-leaning Mercatus Center at George Mason University found it would lead to \$32.6 trillion increase in federal spending over a 10-year period. The study's author, Charles Blahous, wrote in The Wall Street Journal earlier this month that even doubling taxes would not cover the bill for a single-payer health-care system. The policy's proponents, however, point to a note in the study showing that health-care costs would also decrease by \$2 trillion by 2031 if it became law."
 - Read more: <http://thehill.com/policy/healthcare/403248-poll-seventy-percent-of-americans-support-medicare-for-all>