

American Nephrology Nurses Association

Weekly Capitol Hill Update – Monday, August 6, 2018

Congressional Schedule

Senate

- Senate in recess until August 15

House

- House in recess until September 4

Legislative Update

- **Week in Review**
 - *Sanders thanks Koch brothers for accidentally making argument for 'Medicare for all.'* "Sen. Bernie Sanders (I-Vt.) thanked the conservative mega-donors Charles and David Koch on Tuesday for "accidentally making the case for Medicare for All" in a new analysis on the cost of such a single-payer health-care plan. Sanders made the comments in a video he posted to Twitter in response to a study published by Charles Blahous at the Mercatus Center at George Mason University – a center subsidized by the Kochs. In the study, Blahous predicts Sanders's single-payer health-care plan would raise federal health-care spending by about \$32.6 trillion between 2022 and 2031. Other economists noted in the same study, however, that federal health-care spending would drop overall by just more than \$2 trillion."
 - Read more: <http://thehill.com/policy/healthcare/399625-sanders-thanks-koch-brothers-for-accidentally-making-argument-for-medicare>
 - *Senate clears \$154B 'minibus' spending measure.* "The Senate cleared a second appropriations measure funding four federal departments on Wednesday as it works to meet a September 30 deadline for keeping the government open. In a 92-6 vote, the Senate approved a 'minibus' funding the Agriculture, Transportation, Housing and Urban Development (HUD) and Interior Departments. The \$154.2 billion measure also provides funding for financial services and general government."
 - Read more: <http://thehill.com/policy/finance/399872-senate-clears-947b-minibus-spending-measure>

- ***GOP attempt to block funding for DC's individual mandate fails in Senate.*** "A Republican attempt to include a provision in a government funding bill that would block the District of Columbia from using money to implement its own individual health-care mandate failed in the Senate on Wednesday. Senators voted 54-44 to table the amendment, from GOP Sen. Ted Cruz (Texas). The vote effectively pigeonholes the proposal with the Senate poised to pass the larger funding bill on Wednesday."
 - Read more: <http://thehill.com/blogs/floor-action/senate/399899-gop-attempt-to-block-funding-for-dcs-individual-mandate-fails-in>
- ***Bipartisan leaders of House panel press drug companies on opioid crisis.*** "Bipartisan leaders of the House Energy and Commerce Committee are pressing three drug companies for answers about their role in the opioid crisis. The panel's leaders sent letters to three companies that make opioids, Insys Therapeutics, Mallinckrodt Pharmaceuticals and Purdue Pharma, requesting a briefing with the committee and answers to questions about how the companies marketed opioids and whether they looked the other way when they saw evidence of abuse of their products."
 - Read more: <http://thehill.com/policy/healthcare/400233-bipartisan-house-panel-presses-drug-companies-on-role-in-opioid-crisis>
- **Week Ahead**
 - Senate is in recess until August 15; House is in recess until September 4
 - ***House lawmakers want federal probe of drug middlemen mergers.*** "The House Energy and Commerce Committee wants the Trump administration to probe how mergers of drug middlemen called pharmacy benefit managers has affected drug prices for consumers. The committee sent a letter to the Federal Trade Commission on Friday calling for a retrospective review of mergers of pharmacy benefit managers, which oversee drug plans for employer and union-sponsored health plans. Lawmakers are worried about the large amount of consolidation of PBMs."
 - Read more: <https://www.washingtonexaminer.com/policy/healthcare/house-lawmakers-want-federal-probe-of-drug-middlemen-mergers>
 - ***Dems court conservative firebrand in Medicare drug fight.*** "Democrats pushing to lower drug prices for seniors have found an unusual proponent in the fight: Freedom Caucus Chairman Mark Meadows. The North Carolina Republican, a conservative firebrand and close ally of President Trump, has built a political career around efforts to shrink government and promote free markets. But he also supports the notion of empowering Medicare to negotiate pharmaceutical prices on behalf of seniors — an idea Republican leaders have devoutly rejected since they enacted the Part D drug benefit in 2003. The proposal has no chance of advancing in a GOP-controlled House, especially so close to the midterm elections. But Democrats — who have made drug costs a featured piece of their

midterm campaign message — want to lay the groundwork for passing a Medicare negotiation bill next year if they win back the Speaker's gavel."

- Read more: <http://thehill.com/policy/healthcare/399304-dems-court-conservative-firebrand-in-medicare-drug-fight>
- *Liberal Dems lay groundwork to push 'Medicare for all.'* "Democrats are laying the groundwork to make a push for 'Medicare for all' legislation if they win back the House in November. More than 60 House Democrats launched a Medicare for All Congressional Caucus this month, a sign of the popularity surrounding the concept of a government-run health insurance system for everyone that's supported by liberal firebrands like Alexandria Ocasio-Cortez. The caucus plans to hold briefings with experts as part of its efforts to revise a previous bill that will act as the framework for future legislation to establish single-payer national health insurance."
 - Read more: <http://thehill.com/policy/healthcare/399585-dems-lay-groundwork-to-push-medicare-for-all>

Regulatory and Administration Update

- *Medicare approves \$4.8 billion raise for hospitals.* "Medicare will pay hospitals \$4.8 billion more in 2019, according to a final rule published Thursday by the Centers for Medicare & Medicaid Services. That's up from the \$4 billion raise that was proposed in April. The big picture: There's a lot of jargon to unpack in the rule, but hospitals will be mostly happy with the overall pay raise."
 - Read more: <https://www.axios.com/medicare-approves-pay-raise-for-hospitals-2019-1533242296-953036d2-c154-4340-9424-23121c52d02d.html>
- *CMS finalizes rule requiring hospitals to post prices online.* "CMS on Thursday issued its final rule on the Inpatient Prospective Payment System, cementing the agency's April proposal to increase transparency by pushing hospitals to post standard charges online in a machine-readable format. The rule doesn't require posting any more information than hospitals are already mandated to provide to the public, but CMS has issued a request for information seeking input on furthering pricing transparency."
 - Read more: <https://www.healthcaredive.com/news/cms-finalizes-rule-requiring-hospitals-to-post-prices-online/529261/>
- *Medicare Part D premiums continue to decline in 2019.* "Today, the Centers for Medicare & Medicaid Services (CMS) announced that, for the second year in a row, the average basic premium for a Medicare Part D prescription drug plan in 2019 is projected to decline. At a time when health insurance premiums are rising across-the-board, basic Part D premiums are expected to fall from \$33.59 this year to \$32.50 next year."
 - Read more: <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2018-Press-releases-items/2018-07-31.html>
- *1,400 Nursing homes get lower Medicare ratings because of staffing concerns.* "Medicare has lowered its star ratings for staffing levels in 1 in 11 of the nation's nursing homes — almost 1,400 of them — because they either had inadequate numbers of registered

nurses or failed to provide payroll data that proved they had the required nursing coverage, federal records released last week show. The payroll records revealed lower overall staffing levels than homes had disclosed, particularly among registered nurses. Those are the highest-trained caregivers required to be in a nursing home, and they supervise other nurses and aides. Medicare mandates that every facility have a registered nurse working at least eight hours every day.”

- Read more: <https://khn.org/news/1400-nursing-homes-get-lower-medicare-ratings-because-of-staffing-concerns/>
- ***HHS Inspector General's report finds flaws and fraud in U.S. hospice care.*** “[A] federal report published Tuesday synthesized patient and Medicare payment data going back to 2005 and found that, while patients generally can count on hospice to relieve their suffering, some hospice providers are bilking Medicare and neglecting patients. The report calls for the Centers for Medicare and Medicaid Services, which is a key player in the funding of hospice services, to increase its level of scrutiny to improve the detection of these problems.”
 - Read more: <https://www.npr.org/sections/health-shots/2018/07/31/634075540/hhs-inspector-generals-report-finds-flaws-and-fraud-in-u-s-hospice-care>
- ***Trump administration approves Maine's request to shore up Obamacare exchange.*** “The Trump administration on Monday approved a request from Maine to set up a program to help prop up Obamacare insurers. Maine is the second state in two days to get approval to set up a reinsurance program to help buttress losses from insurers. The Centers for Medicare and Medicaid Services approved a similar request from Wisconsin on Sunday.”
 - Read more: <https://www.washingtonexaminer.com/policy/healthcare/trump-administration-approves-maines-request-to-shore-up-obamacare-exchange>
- ***Series of ethical stumbles tests NIH's reliance on private sector for research funding.*** “The vast majority of FNIH projects remain universally popular, including a recent collaboration in which the NIH put up \$160 million, and 11 pharmaceutical companies another \$5 million each, to aggressively research cancer immunotherapies. Another ongoing project, the Accelerating Medicines Partnership, funds research into Alzheimer's, type 2 diabetes, rheumatoid arthritis, and lupus. Some, however, are skeptical that the nonprofit can facilitate any partnerships without the potential for controversy.”
 - Read more: <https://www.statnews.com/2018/08/01/nih-ethical-stumbles-industry-funding/>
- ***Trump whacks Obamacare by boosting short-term health plans.*** “The Trump administration has finalized rules making it easier to enroll in short-term insurance plans, another blow to Obamacare that increases access to cheaper, skinnier coverage that doesn't adhere to the health care law's standards. The Trump administration has prioritized expanding coverage options, arguing that the Affordable Care Act severely eroded choice for individuals buying their own insurance. Critics deride short-term plans as 'junk' insurance that won't protect people with pre-existing conditions, and

they argue the plans will undermine Obamacare's fragile exchanges by siphoning off healthy customers."

- Read more: <https://www.politico.com/story/2018/08/01/trump-obamacare-short-term-plans-689126>

- ***Trump's undermining of Obamacare violates the constitution, new lawsuit charges.*** "After congressional Republicans repeatedly failed last year to repeal the Affordable Care Act, President Donald Trump promised to 'let Obamacare implode' on its own. A new lawsuit being filed Thursday argues that Trump's efforts to make good on that promise violate the U.S. Constitution. Since Trump's first executive order directing federal agencies to claw back as much of the Affordable Care Act as possible, his directives have increased health coverage costs and depressed enrollment, the complainants say. Specifically, the suit argues that Trump is violating Article II of the Constitution, requiring the president to 'take care that the laws be faithfully executed.'"
 - Read more: <https://www.nbcnews.com/politics/donald-trump/trump-s-undermining-obamacare-violates-constitution-new-lawsuit-charges-n896626>

Articles of Interest

- ***Doctors increasingly turn to pancreas transplants to treat diabetes.*** "Doctors have used transplants of the pancreas to treat diabetes on a limited basis for decades, but advancements and a better understanding of the procedure have resulted in more people turning to them as an option to control their blood sugar – mostly in severe cases. Nearly four out of five pancreas transplants used to fail within five years, according to the American Diabetes Association. As surgery techniques have improved, there are now fewer complications, the association said. Pancreas transplants have one of the highest survival rate of any transplant procedure."
 - Read more: <http://www.baltimoresun.com/health/bs-hs-pancreas-transplant-diabetes-20180724-story.html#nt=oft01a-1la1>
- ***Curtailing Medicaid's transportation benefit is 'penny-wise and pound-foolish.'*** "Free or low-cost transport to medical appointments for those who need it has been a mandatory Medicaid benefit since the program's inception in 1966. It's specified in federal regulation. Scattered cases of fraud have marred the administration of Medicaid transportation and the desire to rein in Medicaid spending has led some policy-makers to consider ways to limit this benefit, formally called non-emergency medical transportation (NEMT). Our new research examines the value of non-emergency medical transportation for people with three relatively common and expensive diseases. We demonstrate that such transportation provides a healthy return on investment (ROI) for two of the three conditions [dialysis for kidney disease and diabetes wound care]. Trimming non-emergency medical transportation in Medicaid runs contrary to trends in other health insurance markets and is likely penny-wise and pound-foolish for Medicaid's coffers."
 - Read more: <https://www.statnews.com/2018/07/30/curtailing-medicaid-transportation-benefit-pennywise-pound-foolish/>

- ***Health care industry branches into fresh meals, rides to gym.*** “Health care is shifting in a fundamental way for millions of Americans. Some insurers are paying for rides to fitness centers and checking in with customers to help ward off loneliness. Hospital networks are hiring more workers to visit people at home and learn about their lives, not just their illness. The health care system is becoming more focused on keeping patients healthy instead of waiting to treat them once they become sick or wind up in the hospital. This isn’t a new concept, but it’s growing. Insurers are expanding what they pay for to confront rising costs, realizing that a person’s health depends on what happens outside a doctor’s visit.”

 - Read more: <https://apnews.com/b694e37ea86c4a8c923e18343129d113/Health-care-industry-branches-into-fresh-meals,-rides-to-gym>
- ***Poison control calls spike for unapproved drug that produces opioid-like highs.*** “Calls to U.S. poison control centers about an unapproved antidepressant that has opioid-like effects have climbed dramatically since 2015, according to a new analysis published by the Centers for Disease Control and Prevention. Tianeptine is used as an antidepressant in Europe, Asia, and Latin America. It hasn’t been approved by the Food and Drug Administration. But it’s easy to buy the drug online as a diet supplement or research chemical and is sometimes abused, because it can give users an opioid-like high. Now, as the opioid crisis continues to flare, health officials are worried it could pose a possible public health threat. In April, Michigan Gov. Rick Snyder passed a measure to reclassify tianeptine as a Schedule II controlled substance after a series of overdoses linked to the drug in 2017.”

 - Read more: <https://www.statnews.com/2018/08/02/tianeptine-poison-control-centers-opioid-highs/>
- ***FDA declines to approve Insys Therapeutic’s opioid painkiller.*** “Insys Therapeutics Inc said on Friday the U.S. Food and Drug Administration declined to approve its opioid painkiller, citing potential safety concerns. Insys shares slid nearly 9 percent to \$6.62 on Friday, hitting their lowest level in more than two months.”

 - Read more: <https://www.reuters.com/article/us-insys-fda/fda-declines-to-approve-insys-therapeutics-opioid-painkiller-idUSKBN1KH27D>
- ***Individual market enrollment dropping amid premium increases.*** “Enrollment in the individual health insurance market – the market for people who don't get coverage through work – has declined 12 percent in the first quarter of 2018, compared to the same period last year, according to a new analysis released Tuesday. The analysis from the Kaiser Family Foundation showed enrollment in the individual market grew substantially after the implementation of the Affordable Care Act (ACA) and remained steady in 2016, before dropping by 12 percent in 2017.”

 - Read more: <http://thehill.com/policy/healthcare/399674-individual-market-enrollment-dropping-amid-premium-increases>