

American Nephrology Nurses Association

Weekly Capitol Hill Update - Tuesday, September 20, 2016

Congressional Schedule

House

- “Convenes at 2 p.m. for legislative business and will consider 35 bills under suspension of the rules, including a measure (H.R. 5320) that would require the Social Security Administration to discontinue including complete Social Security numbers on most documents it mails to beneficiaries and a bill (H.R. 5523) that would limit the IRS civil forfeiture process.” (CQ)
- “**Week Ahead:** Later in the week, the chamber will take up bills on executive branch rules (HR 3438), Iran (HR 5461, HR 5931) and employee stockholder taxes (HR 5719), along with 14 more suspensions.” (CQ)

Senate

- “Convenes at 10 a.m. and will recess for weekly caucus lunches at 12:30 p.m. When it reconvenes at 2:15, the Senate is scheduled to take a procedural vote on the expected vehicle for the continuing resolution (HR 5235). The vote was at one point scheduled for 5:30 p.m. Monday.” (CQ)

Legislative Updates

- ***ESRD Choice Act (H.R. 5659) Being Voted on Today in the House.*** The House will vote on the ESRD Choice Act (H.R. 5659) today. The bill is sponsored by Representatives Jason Smith (R-MO), John Lewis (D-GA), Gus Bilirakis (R-FL), Kurt Schrader (D-OR), and Tom Marino (R-PA). The bill would expand Medicare Advantage to cover individuals with end-stage renal disease. As you may recall, the House Ways and Means Committee passed the bill out of Committee in July.
- ***Update on Title VIII Nursing Workforce Reauthorization Act of 2015 (H.R. 2713).*** On Tuesday, Sept. 20th and Wednesday, Sept. 21st, the full House Energy and Commerce Committee will hold a markup of several bills, including the *Title VIII Nursing Workforce Reauthorization Act of 2015* (H.R. 2713), introduced by Rep. Lois Capps (D-CA).
 - For more information, please visit:
<https://energycommerce.house.gov/hearings-and-votes/markups/markup-hr-2566-hr-2669-hr-1192-hr-1209-hr-1877-hr-2713-hr-3537-and-hr>

- ***Nurses Lobby for More Authority at VA Hospitals.*** “Congress wants to help the beleaguered Veterans Affairs (VA) Administration treat more patients more quickly. But the American Society of Anesthesiologists and other physician groups don’t like the idea of expanding nurses’ role because it would allow them to treat patients without a doctor’s supervision. The American Hospital Association, AARP and some veterans’ organizations support the proposal as a way to help meet the increasing demands for care, as lawmakers have attacked the VA for excessive wait times. That’s Park’s message too: ‘The current system makes veterans wait too long for the care they deserve and have earned.’” (CQ)
- ***GOP Reps. Call For NIH Review After NFL Grant Controversy.*** “A group of Republicans from the U.S. House Energy and Commerce Committee on Thursday called for an investigation into the National Institutes of Health’s grant process after the NFL was accused of improperly attempting to influence the funding of a scientific study on the degenerative brain condition known as CTE. U.S. Representatives Fred Upton, R-Mich., Tim Murphy, R-Pa., Joseph Pitts, R-Pa., and Michael C. Burgess, R-Texas, sent a letter making the request to the inspector general of the U.S. Department of Health and Human Services. The lawmakers pointed to a report issued by the committee’s Democratic staff members in May that outlined the league’s supposed influence over the NIH’s decision to fund a particular study of chronic traumatic encephalopathy, or CTE. They said the incident raised serious questions about the integrity of the NIH grant processes, and asked the HHS watchdog to weigh in and ensure that decision-making at the agency remains independent.”
 - To read the full article, please see the following link:
http://www.law360.com/publicpolicy/articles/841127/gop-reps-call-for-nih-review-after-nfl-grant-controversy?nl_pk=97e0dd47-c87c-43ef-be60-18cb20c26402&utm_source=newsletter&utm_medium=email&utm_campaign=publicpolicy
- ***Congress Struggles to Finish Zika Aid, Prevent Shutdown.*** “Congressional negotiators on Monday pressed to wrap up a must-do spending bill to prevent an election-season government shutdown and finally provide money to battle the threat of the Zika virus, but numerous sticking points remain. The stopgap measure would keep the government running past the end of the budget year this month. It’s the only measure that has to pass before Congress adjourns for Election Day. As such, the talks have been tricky, with Republicans controlling Congress battling Democrats and the Obama administration. A controversy involving whether Planned Parenthood should be eligible for anti-Zika funding in Puerto Rico – which sparked a Democratic blockade of an earlier measure – appears to have been defused, lawmakers and aides say. But unrelated controversies over pesticide regulations, spending cuts and limitations on how many hours long-haul truckers can drive remain unresolved. Top Senate leaders had hoped to seal an agreement Monday in time for a procedural vote slated for early evening, but talks over the weekend failed to produce progress, aides briefed on the talks said. The procedural vote has already been postponed once and it’s not clear whether Monday’s vote will occur as scheduled.”

- To read the full article, please see the following link:
<http://bit.ly/2cprvAF>

Regulatory Updates

- ***Long-Term Care Workforce: Better Information Needed on Nursing Assistants, Home Health Aides, and Other Direct Care Workers.*** “Millions of elderly individuals and persons with disabling conditions rely on LTSS to help them perform routine daily activities, such as eating and bathing. Direct care workers are among the primary providers of LTSS. Reported difficulties recruiting and retaining direct care workers and the anticipated growth in the elderly population have fueled concerns about the capacity of the paid direct care workforce to meet the demand for LTSS. Despite these concerns, policymakers lack data to help assess the size of the problem. GAO was asked to provide information on direct care workers who deliver LTSS. This report examines (1) federal and state data available on the paid direct care workforce and (2) actions HRSA has taken to develop information and projections on this workforce.”
 - To see the full report, please see the following link:
http://www.gao.gov/products/GAO-16-718?utm_medium=email&utm_source=govdelivery
- ***Update on the National Quality Forum (NQF) Measure Influenza Immunization in the ESRD Population.*** KCQA’s Measure, NQF #0226: *Influenza Immunization in the ESRD Population*, was reviewed for endorsement maintenance by the NQF’s Health and Well-Being Project Standing Committee on September 12. The Committee recommended the measure for endorsement (93% Yes, 7% No). Details on when the project draft report with the Committee’s recommendations will be released for public comment are pending; we will provide additional information when available.
 - Project details can be accessed at: https://www.qualityforum.org/Health_and_Well-Being_2015-2017.aspx
 - 2016-2017 Influenza Resources for Health Care Professionals.
<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1622.pdf>
 - Annual Update for 2016-2017 Season: Influenza Vaccine Payment Allowances.
<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM9758.pdf>
- ***GAO Finds that Prices for More than 300 Part D Generics Surge Over Five Years.*** “Generic drug prices declined overall under Medicare Part D—the voluntary outpatient prescription drug program administered by the Centers for Medicare & Medicaid Services within the Department of Health and Human Services (HHS)—since 2010. Specifically, generic drug prices fell 59 percent from the first quarter of 2010 through the second quarter of 2015. This decline reflects a changing basket of 2,378 unique generic drugs, including those that came into or exited the market during this period. GAO also analyzed an established basket of 1,441 generic drugs that were present during the entire period of analysis. Unlike the larger changing basket of drugs, prices of established generics decreased moderately and then increased slightly (see figure). The steeper price decrease for the changing basket of generic drugs is at least partially

attributable to more rapid price declines among new generic drugs as they enter the market.”

- To view the report: <http://www.gao.gov/products/GAO-16-706>

- ***New Data Shows that 49 States and D.C. Reduce Avoidable Hospital Readmissions.*** “The unfortunate experience of having to return to the hospital after recently being treated—or watching the same thing happen to a friend or family member—is all too common. Potentially avoidable hospital readmissions that occur within 30 days of a patient’s initial discharge are estimated to account for more than \$17 billion in Medicare expenditures annually. Not only are readmissions costly, but they are often a sign of poor quality care. Many readmissions can be avoided through improvements in care, such as making sure that patients leave the hospital with appropriate medications, instructions for follow-up care, and follow-up appointments scheduled to make sure their recovery stays on track... The data show that these efforts are working. As described below, between 2010 and 2015, readmission rates fell by 8 percent nationally. Today, CMS is releasing new data showing how these improvements are helping Medicare patients across all 50 states and the District of Columbia. The data show that since 2010:
 - All states but one have seen Medicare 30-day readmission rates fall.
 - In 43 states, readmission rates fell by more than 5 percent.
 - In 11 states, readmission rates fell by more than 10 percent.”

- To read more: <https://blog.cms.gov/2016/09/13/new-data-49-states-plus-dc-reduce-avoidable-hospital-readmissions/>

Articles of Interest

- ***How CMS Plans To Steady An Unstable ACA Marketplace.*** “As of the end of 2016, the Patient Protection and Affordable Care Act will have been implemented for a full three years. Data available for the first two reporting years (2014 and 2015) for which health insurers and managed care companies have reported pertinent data, such as premiums earned, cost-sharing reductions received, medical loss ratio and risk adjustment data, is discouraging. Perhaps the area with the greatest shortcomings has been the ACA’s risk adjustment program (as authorized by 42 U.S.C. § 18063). Though the Centers for Medicare and Medicaid Services has previously reported that the risk adjustment program is generally working as intended, arguably, it has complicated financial difficulties underlying the ACA-created consumer operated and oriented plans (CO-OPs). Of the approximately 35 CO-OPs, 25 have failed and are in some form of insurance delinquency proceedings (conservation, rehabilitation or liquidation). Those CO-OP failures have contributed to an unstable marketplace. Marketplace instability has caused many insurance carriers to exit individual and small employer markets both on and off the state exchanges and the federally facilitated marketplace which only enhances volatility. In the wake of this instability, CMS has proposed as a rule, benefit and payment parameters for 2018 (the proposal) to improve the risk pools and make the exchanges more attractive to carriers which still provide marketplace coverage. The proposal is linked here. The proposal addresses factors initially designed to ease the financial burden on issuers of health plans on the marketplace during the so-called transition years.”

- To view the article, please visit:
http://www.law360.com/publicpolicy/articles/840653/how-cms-plans-to-steady-an-unstable-aca-marketplace?nl_pk=97e0dd47-c87c-43ef-be60-18cb20c26402&utm_source=newsletter&utm_medium=email&utm_campaign=publicpolicy
- ***Pharma Lobbying Held Deep Influence Over Opioid Policies.*** “The Associated Press and the Center for Public Integrity teamed up to investigate the influence of pharmaceutical companies on state and federal policies regarding opioids, the powerful painkillers that have claimed the lives of 165,000 people in the U.S. since 2000. The news agencies tracked proposed laws on the subject and analyzed data on how the companies and their allies deployed lobbyists and contributed to political campaigns.”
 - To read the report, please see the following link: <http://bit.ly/2cX2f3X>
- ***In Interview, Biden Outlines A Lifelong Role In Cancer Research, But Not In A Clinton White House.*** “Vice President Joe Biden says he plans to dedicate his career after politics to cancer research — and to do so for “as long as I’m alive” — but ruled out serving in Hillary Clinton’s administration should she win the White House this fall. In a wide-ranging interview with STAT, Biden said he would want to work closely with a Clinton administration to build on the “cancer moonshot” he launched earlier this year and to help “coordinate” the initiative. But he dismissed the possibility that Clinton’s recent appeal for him to continue working on the effort meant he would serve in government. “I’m not going to stay on in the administration,” Biden said in a 25-minute interview here at Rice University, where he delivered a speech on Friday. “What Hillary talked about is, as I understood it, me being able to have the same authority over elements of her administration from the outside that I have now from the inside, to be able to coordinate those efforts.””
 - To read the full article, please see the following link: <http://bit.ly/2d2Gezx>
- ***Global Leaders Are Set To Put Superbugs On The World Stage.*** “Heads of state from around the globe will gather this week to try to address a long-neglected issue that poses perhaps the biggest health threat the world faces: the growing resistance of bacteria to antibiotics. Antimicrobial resistance is not traditionally the domain of world leaders, and health-related issues — outside of crises such as the Ebola outbreak — are rarely discussed at venues like the United Nations General Assembly. But a high-level meeting scheduled for Wednesday at this year’s UN gathering is a testament to fast-rising concern over the rate at which bacteria are learning to evade science’s last remaining tools against them. “I’ve worked on this issue for almost 20 years. And I think even five years ago I couldn’t have guessed that this would reach the height of the UN General Assembly,” said Ramanan Laxminarayan, director of the Washington-based Center for Disease Dynamics, Economics & Policy. Antimicrobial resistance is driven by a host of factors. Pathogens — bacteria, viruses, and fungi — can develop resistance to the drugs used to treat them when people take them incorrectly or stop taking them too soon, for instance. Resistance is also fueled by the massive and often inappropriate use of antibiotics in agriculture and aquaculture; for decades these precious drugs have been used to promote growth and fend off costly infections that can result from the cramped conditions of industrial-scale food animal production.”

- To read the full article, please see the following link: <http://bit.ly/2ci8fS3>
- ***Finally, Some Good News for Obamacare.*** “It has been a summer of bad news for the Affordable Care Act, but last week brought some numbers that should put worries about the law into perspective. The Census Bureau announced Tuesday that the proportion of people in the United States who lack health-care coverage continued to plunge last year – to only 9.1 percent. This figure is even better than it looks for Obamacare, because it factors in uninsured undocumented immigrants, of which there are perhaps several million, who are not eligible for the law’s programs. But the overall number could be cut much lower, and quickly, if Obamacare were working as it was meant to. We are not referring to the recent, much-discussed exit of some major health insurers from the marketplaces the law created. We are talking about Obamacare’s expansion of Medicaid, the state-federal health plan for the poor and near-poor. The Supreme Court in 2012 made the expansion optional for states, and a large chunk, including Virginia, have refused. The Census Bureau found that the uninsured rate was 7.2 percent in expansion states last year and 12.3 percent in non-expansion states. Five states have expanded since, but that still leaves 19, representing 4 million to 5 million people who would otherwise get coverage, irrationally holding out.”
 - To read the full article, please see the following link: <http://wapo.st/2d69udj>

Hearings

Tuesday, September 20

- Senate Health, Education, Labor & Pensions Hearing - *Laboratory Testing in the Era of Precision Medicine.*
 - 10:00 am @ 430 Dirksen Senate Office Building

Wednesday, September 21

- Senate Health, Education, Labor & Pensions Markup - *S. Career and Technical Education Act of 2016; S. 2873, ECHO Act; S. 2932, Protecting Patient Access to Emergency Medications Act of 2016; and Nominations*
 - 9:30 am @ 430 Dirksen Senate Office Building
- Senate Homeland Security & Governmental Affairs Subcommittee on Investigations Hearing - *Combatting the Opioid Epidemic: A Review of Anti-Abuse Efforts by Federal Authorities and Private Insurers*
 - 10:00 am @ 342 Dirksen Senate Office Building
- House Committee on Oversight and Government Reform Hearing - *Reviewing the Rising Price of EpiPens*
 - 2:00 pm @ 2154 Rayburn House Office Building
- Senate Appropriations FDA Subcommittee - *Prioritizing Public Health: The FDA’s Role in the Generic Drug Marketplace*
 - 2:30 pm @ 192 Dirksen Senate Office Building

Thursday, September 22nd

- Senate Health, Education, Labor and Pensions Hearing - *Exploring Current Practices in Cosmetic Development and Safety*
 - 10:00 am @ 430 Dirksen Senate Office Building
- House Judiciary Subcommittee on Regulatory Reform Hearing - *Treating the Opioid Epidemic: The State of Competition in the Markets for Addiction Medicine*
 - 2:00 pm @ 2237 Rayburn House Office Building

Friday, September 23rd

- House Energy and Commerce Oversight Subcommittee Hearing - *Bioresearch Labs and Inactivation of Dangerous Pathogens*
 - 9:00 am @ 2332 Rayburn House Office Building
- House Judiciary Subcommittee on the Constitution Hearing - *The Ultimate Civil Right: Examining the Hyde Amendment and the Born Alive Infants Protection Act*
 - 9:00 am @ 2237 Rayburn House Office Building

Meetings/Events

Tuesday, September 20th

- The Hill and USC's Schaeffer Center briefing: *Access to Care - A Discussion on Health Disparities & Innovation.*
 - 8:00 am @ the Newseum.
- Meeting of the National Advisory Mental Health Council Open Policy Session.
 - 9:00 am @ 6001 Executive Boulevard. Rockville, MD.
- Bipartisan Policy Center: *Delivery System Reform: Caring for Individuals Dually Eligible for Medicare and Medicaid*
 - 2:00 pm @ Bipartisan Policy Center