American Nephrology Nurses Association

Weekly Capitol Hill Update – Wednesday, January 3, 2018

Congressional Schedule

Senate

- Senate meets at noon.
- Agenda includes the swearing in of Doug Jones of Ala., who won a special election to the complete rest of the unexpired term of Atty General Jeff Sessions, and Tina Smith of Minn., who was appointed by Gov. Mark Dayton to the seat vacated by Al Franken.
- NOTE: Balance of power will be 51-49 for Republicans, down from 52-48 margin currently; Pence breaks ties.

House

- House out until Jan. 8; meets in pro forma session at 11:00 am.

Legislative Update

- Week/Year in Review
  - After a Chaotic Start, Congress Has Made a Conservative Mark. “After a halting start, the Republican-controlled 115th Congress -- sometimes in collaboration with President Trump, often despite him -- has enacted surprisingly far-reaching conservative achievements in its first year, among them a long-promised rewrite of the tax code, oil drilling in the Arctic and a series of lifetime appointments to the judiciary.”
  - Top 10 health care surprises from Year One of Trump. “President Donald Trump stormed into office last January confident that he could knock off
Obamacare in a nanosecond. It didn't turn out that way — and from drug prices to the Tom Price travel scandal, a lot of health policy didn't go according to plan. Here's a look at 10 health care surprises from 2017.”

- To read more: https://www.politico.com/story/2017/12/30/trump-health-care-surprises-248996

**Week/Year Ahead**

- **Congress braves for a chaotic January.** “Lawmakers are bracing for a chaotic January as they prepare to plunge into several fights in the first weeks of 2018. The nightmare legislative storm comes after Congress headed home for the year without resolving spending battles or getting an agreement on contentious issues such as immigration and foreign surveillance. It all means Congress must reach another deal to prevent a government shutdown by Jan. 19. Lawmakers also likely have to solve the issue of whether to protect young immigrants losing the protection of an Obama-era program shielding them from deportation beginning in March.”
  - To read more: http://thehill.com/homenews/house/366240-congress-braces-for-a-chaotic-january

- **The congressional to-do list: everything.** “Congress left town after passing the GOP tax bill, but left much else unresolved — meaning its already long to-do list over the next couple of months is even worse than expected. The bottom line: The first items on the agenda will be immigration, a government spending bill and a budget caps deal, health care, and an expiring surveillance program.”
  - To read more: https://www.axios.com/congress-to-do-list-everything-2520327044.html

- **GOP set to shift tactics on ObamaCare in 2018.** “The politics surrounding ObamaCare will shift in 2018, with opponents and supporters of the health-care law expected to change tactics. With the GOP push to repeal ObamaCare possibly dead on arrival next year, conservative health-care experts say the White House and Republican Congress should focus instead on containing what they see as the law’s damage.”

- **Medicaid is GOP target in 2018.** “Medicaid could face crucial tests in 2018 at both the federal and state levels. Republicans in Congress failed in their attempts earlier this year to impose drastic cuts to the program as part of ObamaCare repeal, but GOP lawmakers could try again next year. The tax
bill that President Trump recently signed into law is projected to add $1 trillion to the federal deficit, making cuts to Medicaid an even more tempting target for some conservatives.”


- Five key decisions for the GOP on health care. “Republicans have repealed ObamaCare’s individual insurance mandate, but they still have a number of decisions to make on health care in the coming year. Even without the unpopular mandate, the health-care law is still largely in effect, with nearly 9 million people enrolled in private plans for 2018. And beyond ObamaCare, Republicans could seek action on entitlement reform and drug pricing in 2018. Here are five things to watch out for.”

- To read more: http://thehill.com/policy/healthcare/366528-five-key-decisions-for-the-gop-on-healthcare

- 3 legislative battles to watch in 2018. “Health care dominated the congressional agenda in 2017, as Republicans jumped straight from a failed effort to repeal and replace Obamacare into a tax code overhaul that included major changes to the law’s central policies. And though those fights sparked intense, near-constant partisan rancor, lawmakers are showing no signs of setting aside health care policy efforts in 2018.”

- To read more: https://www.statnews.com/2018/01/02/legislative-battles-2018/

Regulatory and Administration Update

- CMS floats Medicare Advantage payment tweaks that would boost insurers' risk scores. “Over the holidays, Medicare Advantage insurers got a gift from the federal government. That gift arrived on Dec. 27, when the Centers for Medicare & Medicaid Services released part one (PDF) of its 2019 advance notice of changes to MA capitation rates and Part D payment policies. The advance notice is split into two parts this year because of requirements related to the 21st Century Cures Act, per a CMS fact sheet. To comply with the Cures Act, CMS is proposing an MA risk adjustment model that includes additional mental health, substance use disorder and chronic kidney disease conditions. The agency uses risk adjustment models to adjust payments based on the characteristics and health conditions of each plan’s enrollees, with the goal of preventing insurers from enrolling only the healthiest patients.”

- To read more: https://www.fiercehealthcare.com/cms-chip/advance-notice-medicare-advantage-risk-adjustment
• **Drugmaker Ignored More Than 200 Bad Quality Tests, FDA Says.** “U.S. regulators warned Fresenius SE after the company’s Indian plant that makes cancer-drug ingredients for the U.S. market aborted hundreds of drug-quality tests because they seemed like they were going to fail due to impurities. When workers at the plant found potential tainted products, they halted the tests and said human or machine errors were to blame instead, according to a Food and Drug Administration warning letter dated Dec. 4 that cited 248 aborted checks at the West Bengal facility.”

• **Trump Administration Relaxes Financial Penalties Against Nursing Homes.** “The Trump administration — reversing guidelines put in place under President Barack Obama — is scaling back the use of fines against nursing homes that harm residents or place them in grave risk of injury. The shift in the Medicare program’s penalty protocols was requested by the nursing home industry. The American Health Care Association, the industry’s main trade group, has complained that under Obama inspectors focused excessively on catching wrongdoing rather than helping nursing homes improve.”

• **Medicare Payment Advisors OK Two New APM Models.** “Two new payment models, a capitated model for primary care and one for end-stage renal disease (ESRD), made their way to federal healthcare officials this week. The Physician-focused Payment Technical Advisory Committee (PTAC), a group of policy experts and physicians tasked with identifying new Medicare payment models that reward value rather than volume, recommended the two proposals to the U.S. Department of Health and Human Services (HHS). An episode payment model submitted by the Renal Physicians Association (RPA) targets the first 6 months of dialysis for ESRD patients, and was given a full recommendation. The global or capitated payment model from the American Academy of Family Physicians (AAFP) was recommended for limited-scale testing.”
  o To read more: [https://www.medpagetoday.com/publichealthpolicy/medicare/70036](https://www.medpagetoday.com/publichealthpolicy/medicare/70036)

• **Comprehensive End-Stage Renal Disease Care (CEC) Model: Performance Year 1 Annual Evaluation Report.** “This first annual report provides early findings on the impact of the CEC Model based on an evaluation of the first performance year (PY1) from October 1, 2015 through December 31, 2016. It summarizes findings from mixed quantitative and qualitative research to address several core questions. Qualitative research addresses the questions of which organizations chose to participate, why they entered the model, and how they implemented the model,
including perceived successes and challenges. Quantitative research complements the qualitative data by measuring the effects of participation in the CEC Model on costs, utilization and quality.”

- To read more: https://innovation.cms.gov/Files/reports/cec-anrpt-py1.pdf

- **Five ways Trump can undermine ObamaCare in 2018.** “President Trump faces a slew of critical decisions in 2018 about how far he wants to go to undermine ObamaCare. There are increasing doubts about the ability of Congress to repeal the law, which will put even more focus on administrative actions to chip away at the Affordable Care Act. It is unlikely, though, that Trump can deal a death blow to the law.”

  - To read more: http://thehill.com/policy/healthcare/366828-five-ways-trump-can-undermine-obamacare-in-2018

**Articles of Interest**

- **Nurses Top Gallup Poll as Most Trusted Profession 16 Years Running.** “Nurses once again topped the Gallup Poll’s annual ranking of how Americans view 22 major professions with 82% of the public rating their honesty and ethical standards as "high" or "very high." Nurses have ranked first for 16 consecutive years and every year except for one in the 19 years that Gallup has surveyed public opinion on what profession is most trusted.”

  - To read more: http://www.nationalnursesunited.org/press/nurses-top-gallup-poll-most-trusted-profession-16-years-running

- **3 political issues for hospitals to watch in 2018.** “Hospitals and health providers suffered minimal damage in this year’s political collision over Obamacare. But 2018 will bring a series of equally high-stakes debates that will affect the financial viability of hospitals and the future of how care is measured and delivered. And by the way, the war over Obamacare is hardly over — it’ll start up again next year with proposals to stabilize insurance markets and renewed GOP repeal efforts. Here are some additional issues to watch.”

  - To read more: https://www.statnews.com/2017/12/28/hospitals-value-medicaid-fda/

- **2018 Outlook on Politics and Policy: Insurers will come out ahead.** “Despite a year of policy delays, glitches and uncertainty, insurers may be the ones to come out ahead of other segments of the industry in 2018. Uncertainty and policy confusion will no doubt continue this year since House and Senate Republicans are already on different pages when it comes to healthcare reform. Now that the GOP’s $1.5 trillion tax overhaul is done, House Speaker Paul Ryan (R-Wis.) is setting his sights on entitlement reform as a way to rein in costs. This could mean trimming welfare, Social Security and Medicaid, but he has signaled Medicare provider cuts are also on the table.”
• **GOP Obamacare quandary — easy to hate, hard to kill.** “Republicans start the year divided over whether to tear down or prop up Obamacare, a split that could derail their legislative agenda leading up to the 2018 midterm elections. GOP leaders on Capitol Hill don’t want a repeat of last year’s Obamacare fumble: They spent precious time on a failed attempt to repeal the health care law every member of the GOP was presumed to hate. But they also don’t want to take repeal off the table, which would provoke conservatives who are still determined to undo Obamacare.”
  - To read more: [https://www.politico.com/story/2018/01/02/obamacare-gop-quandary-319619](https://www.politico.com/story/2018/01/02/obamacare-gop-quandary-319619)

• **Association of Race and Ethnicity With Live Donor Kidney Transplantation in the United States From 1995 to 2014.** “In this study of 453,162 adult first-time kidney transplantation candidates, the cumulative incidence of LDKT receipt at 2 years after appearing on the waiting list increased from 7.0% in 1995 to 11.4% in 2014 among white patients, decreased from 3.4% to 2.9% among black patients, decreased from 6.8% to 5.9% among Hispanic patients, and increased from 5.1% to 5.6% among Asian patients, which represent a significant increase in racial/ethnic disparities over time.”
  - To read more: [https://jamanetwork.com/journals/jama/article-abstract/2667722](https://jamanetwork.com/journals/jama/article-abstract/2667722)