American Nephrology Nurses Association

Weekly Capitol Hill Update – Monday, November 27, 2017

Congressional Schedule

Senate
• Senate meets at 4 pm; holds confirmation vote on Dabney Langhorne Friedrich to be a district judge for D.C. at 5:30 pm.

House
• House not in session; returns Tuesday

Legislative Update

• Week in Review

  o **Facing 'hard decisions,' health centers plead for restored funding.** “Community health centers are scrambling to make contingency plans as they anxiously wait to see if Congress will renew billions of dollars in federal funding that expired on Sept. 30. Often situated in medically underserved areas, the health centers provide care to some 26 million of the nation’s most vulnerable people. They’re required to take any patient who seeks care, regardless of whether they can pay. But the funding uncertainty is causing problems for health centers. Some are instituting hiring freezes and having trouble recruiting and retaining employees.”
    ▪ To read more: [http://thehill.com/policy/healthcare/361273-facing-hard-decisions-health-centers-plead-for-restored-funding](http://thehill.com/policy/healthcare/361273-facing-hard-decisions-health-centers-plead-for-restored-funding)

  o **Republican Sen. Lisa Murkowski announces support for repealing individual mandate, a potential boost to tax overhaul.** “Sen. Lisa Murkowski (R-Alaska) said she would support repealing the Affordable Care Act’s individual insurance mandate, giving a potential boost to the Republican effort to pass a massive tax cut package next week. “I believe that the federal government should not force anyone to buy something they do not wish to buy, in order to avoid being taxed,” Murkowski wrote in an opinion piece published Tuesday by the Fairbanks Daily News-Miner. Senate Republicans’ plan to rewrite the tax code includes a provision to repeal the individual mandate, a part of the 2010 health-
care law that requires almost all Americans to have some form of health insurance or pay a fine.”


- States prepare to shut down children’s health programs if Congress doesn’t act.
  “Officials in nearly a dozen states are preparing to notify families that a crucial health insurance program for low-income children is running out of money for the first time since its creation two decades ago, putting coverage for many at risk by the end of the year. Congress missed a Sept. 30 deadline to extend funding for CHIP, as the Children’s Health Insurance Program is known. Nearly 9 million youngsters and 370,000 pregnant women nationwide receive care because of it. Many states have enough money to keep their individual programs afloat for at least a few months, but five could run out in late December if lawmakers do not act. Others will start to exhaust resources the following month.”


- Week Ahead

  - Congress returns to nightmare December. “Lawmakers are bracing for chaos in December as they plunge into several high-stakes legislative fights. Both chambers are expected to be in session for roughly 15 days before leaving town until January, but the looming battles could push their exit date closer to Christmas. Republicans want to get a key agenda item, tax reform, to President Trump’s desk by the end of the year. That would be a daunting task even under the best of circumstances — but Republicans are also facing a Dec. 8 deadline to avoid a government shutdown, with fights over immigration and health care also crowding the agenda.”


  - Five health-care fights facing Congress in December. “Health-care issues are at the top of Congress’s hefty December to-do list. Republicans spent much of the year on a failed bid to repeal and replace ObamaCare. That’s left several programs and taxes hanging in the balance as the year draws to a close, in addition to the latest health-care drama thrust into the GOP tax-reform debate. Here are five of the biggest health-care issues Congress will face next month: Will Republicans repeal the individual mandate? Will Congress reauthorize
critical health programs it let lapse? Will Congress fund the opioid response? What does Congress do on ObamaCare taxes? Will Congress help Puerto Rico fund its Medicaid program?”  

- **Nomination of Alex Azar to serve as Secretary of Health and Human Services.**  
  On Wednesday, November 29th, the Senate Health, Education, Labor & Pensions Committee will hold a hearing on Mr. Azar’s nomination to serve as HHS Secretary.  

**Regulatory and Administration Update**

- **Lawmakers, advocates bicker over updated regulations for nursing homes.** “Federal regulations designed to protect residents in the nation’s nursing homes are facing mounting pressure from Congress. A group of 146 lawmakers has urged federal government officials to re-evaluate revised standards in care centers, claiming some of the measures are excessive and are financial burdens for facility owners. Advocates for residents have blasted the move. They said the regulations are needed, as the measures will expand care plans, offer greater freedom for residents, increase the amount of training for nurses and aides caring for residents with dementia and provide grievance officers to help handle complaints.”  

- **CMS releases proposed rule to increase choices and lower premiums for Medicare Advantage enrollees.** “Today, the Centers for Medicare & Medicaid Services (CMS) issued a proposed rule that will result in lower premiums and increased plan choices for Medicare beneficiaries. During this year’s Medicare Advantage Open Enrollment, which started October 15th and runs until December 7th, seniors enrolling in Medicare Advantage have seen average monthly premiums drop by 6%, and CMS is proposing changes to continue to drive affordable options for Medicare beneficiaries that meet their unique health needs.”  

- **CMS Agrees to Pay for Outpatient Dialysis for AKI Patients.** “In a surprise move last week, the Centers for Medicare & Medicaid Services (CMS) agreed to pay for outpatient dialysis for patients with acute kidney failure (AKI) who are being treated in skilled nursing facilities (SNFs). Case managers, physicians, and patients for years had been frustrated by the lack of CMS coverage of dialysis for AKI. While there was coverage for dialysis for patients with end-stage renal disease (ESRD), it was not until Jan. 1 of this
year that CMS agreed to pay for outpatient dialysis for patients with AKI, establishing HCPCS code G0491 for billing each dialysis session. But that policy change still left a gaping coverage hole: dialysis coverage for AKI patients who were receiving care in an SNF. But that all changes on Jan. 1, 2018, when CMS will start to pay outpatient dialysis centers for performing dialysis on AKI patients who are in a SNF under Part A.”

- **To read more:** [https://www.racmonitor.com/cms-agrees-to-pay-for-outpatient-dialysis-for-aki-patients](https://www.racmonitor.com/cms-agrees-to-pay-for-outpatient-dialysis-for-aki-patients)

### Articles of Interest

- **Massachusetts Grabs Spotlight By Proposing New Twist On Medicaid Drug Coverage.** “In the absence of new federal policies to tame break-the-bank drug prices, Massachusetts’ state Medicaid program hopes to road-test an idea both radical and market-driven. It wants the power to negotiate discounts for the drugs it purchases and to exclude drugs with limited treatment value… If the Department of Health and Human Services approves the Bay State’s plan, others will likely take similar action. According to the most recent federal data, Medicaid spending on prescription drugs increased about 25 percent in 2014 and nearly 14 percent in 2015.”


- **Some U.S. Hospitals Don’t Put Americans First for Liver Transplants.** “Earlier this fall, a leader of the busiest hospital for organ transplants in New York state — where livers are particularly scarce — pleaded for fairer treatment for ailing New Yorkers. “Patients in equal need of a liver transplant should not have to wait and suffer differently because of the U.S. state where they reside,” wrote Dr. Herbert Pardes, former chief executive and now executive vice president of the board at NewYork-Presbyterian Hospital. But Pardes left out his hospital’s own contribution to the shortage: From 2013 to 2016, it gave 20 livers to foreign nationals who came to the United States solely for a transplant — essentially exporting the organs and removing them from the pool available to New Yorkers.”

- **To read more:** [https://www.propublica.org/article/some-hospitals-do-not-put-americans-first-for-liver-transplants](https://www.propublica.org/article/some-hospitals-do-not-put-americans-first-for-liver-transplants)

- **Report claims sugar industry hid connection to heart disease for decades.** “In the 1960s, a debate began over the effect of sugar and fats on cardiovascular disease. Researchers say that the sugar industry, wanting to influence the discussion, funded research to look into sugar consumption. And when it found data suggesting that sugar was harmful, the powerful industry pointed a finger at fats. In an investigation published Tuesday in the journal PLOS Biology, researchers from the University of California at San Francisco claim that newly uncovered historical documents indicate the industry never disclosed the findings of its work and effectively misled the public to protect its economic interests.”