American Nephrology Nurses Association

Weekly Capitol Hill Update – Tuesday, November 27, 2018

Congressional Schedule

Senate

• Senate meets at 10am

House

• House meets at noon; legislative business to begin at 2pm; votes postponed until 6:30pm

Legislative Update

• Week in Review
  o House Democrats introduce a bill to protect millions of health care workers. “A group of House Democrats introduced a bill on Friday to help protect millions of nurses and other health care workers from the high rates of violence they experience on the job. The new bill, called the Workplace Violence Prevention for Health Care and Social Service Workers Act, would require hospitals, nursing homes, rehab centers, mental health providers, and jails to develop a workplace safety plan to protect their workers from violence they experience at the hands of patients – a surprisingly common phenomenon.”
  o Sanders unveils aggressive new bill targeting drug prices. “Sen. Bernie Sanders (I-Vt.) and Rep. Ro Khanna (D-Calif.) on Tuesday unveiled a bill aimed at aggressively lowering drug prices by stripping monopolies from drug companies if their prices are deemed excessive. Sanders has long railed against drug companies for their prices, and this bill is one of the most far-reaching proposals aimed at lowering them. The bill would strip the monopoly from a company, regardless of any patents, and allow other companies to create cheaper generic versions of a drug if the price for that drug is higher than the median price in Canada, the United Kingdom, Germany, France and Japan.”
• **Week Ahead**
  o *Can House Democrats really protect Obamacare?* “House Democrats who swept back into power on the promise to protect people with pre-existing conditions face tough legal and political choices as they try to make good on that vow. Those promises galvanized millions of voters. But now, like the Republicans previously elected on promises to repeal and replace Obamacare, they face the formidable challenge of turning campaign rhetoric into reality.”
  o *Aligning House and Senate single-payer bills: removing Medicare’s profiteering incentives is key.* “Single-payer reform is in the news—and in the U.S. House and Senate. One hundred twenty-three Congresspeople have signed on as co-sponsors of H.R. 676, the single-payer legislation in House of Representatives, and 16 Senators have formally endorsed S.1804, the Senate version. While both bills would cover all Americans under a single, tax-funded insurance program, they prescribe different provider payment strategies. The Senate version largely adopts Medicare’s current payment mechanisms; the House bill’s is modeled on Canada’s single-payer program, also called ‘Medicare,’ which pays hospitals global budgets (much as a fire department is paid in the U.S.) and sharply constrains opportunities for investor-owned care.”
    ▪ Read more: [https://www.healthaffairs.org/do/10.1377/hblog20181116.732860/full/](https://www.healthaffairs.org/do/10.1377/hblog20181116.732860/full/)
  o *House Democrats target DOJ decision not to defend Obamacare.* “Democrats will scrutinize the Trump administration’s decision not to defend Obamacare in federal court, when Democrats take control of the U.S. House of Representatives next year, a leading Democrat said on Monday. In June, the Department of Justice declared the healthcare law’s individual mandate unconstitutional in federal court, which threatened to undermine insurance protections for people with preexisting conditions, and helped make healthcare a winning issue for Democrats in House elections on Nov. 6.”

**Regulatory and Administration Update**

• *Trump administration proposal would allow Part D plans to negotiate prices of drugs in ‘protected’ classes.* “The Trump administration’s latest proposed rule aimed at curbing prescription drug prices would allow Medicare Part D plans to negotiate better prices in ‘protected’ classes. Verma said the proposals would create certain exceptions to current constraints on protected drugs, allowing Part D sponsors broader use of prior authorization and step therapy – a flashpoint between insurers and providers. It would also allow plans to exclude from their formularies protected class drugs that have price increases that are greater than the rate of inflation or certain drug formulations that are not a significant innovation over the original product.”
• **FDA to overhaul more than 40-year-old process for approving medical devices that some say puts consumers at risk.** “The Food and Drug Administration is overhauling the most common way medical device manufacturers bring their products to market in an attempt to advance new technologies. The announcement comes after a consortium of news outlets over the weekend published scathing investigations into medical device failures and how the FDA’s accelerated review process may have missed problems and put consumers at risk. However, the FDA had planned the changes ahead of the news stories, it said.”

• **Supreme Court sets high bar for medical device lawsuits.** “The tiny balloon was supposed to stretch open a blocked artery on Charles Riegel’s diseased heart. Instead, when the doctor inflated the balloon, it burst. The patient went on life support but survived. His lawsuit against the manufacturer of that arterial balloon did not. The U.S. Supreme Court ruled in favor of Medtronic, among the world’s largest makers of medical devices, setting a precedent that has killed lawsuits involving some of the most sophisticated devices on the market.”
  o Read more: https://apnews.com/098bb4bbb8f14270a78acd2e81c9d4b7

• **Trump pushes forward with Medicaid work requirements in Kentucky.** “The Trump administration on Tuesday reapproved controversial Medicaid work requirements in Kentucky after the initial effort was blocked by a federal judge. The move is a sign of the Trump administration’s determination to impose the conservative change on the health insurance program for the poor, despite criticism from Democrats who warn of people losing coverage.”
  o Read more: https://thehill.com/policy/healthcare/417766-trump-officials-reapprove-medicaid-work-requirements-after-judge-blocked

• **Panel recommends everyone at high risk of getting HIV be offered prevention pill.** “In a long-awaited move, a federal advisory panel is recommending that doctors be encouraged to offer an HIV prevention pill, a step that would quickly expand insurance coverage for a medicine that has been difficult for some people to access due to its cost. In explaining its decision, the U.S. Preventive Services Task Force determined there is ‘high certainty’ that using the pill would provide a ‘substantial’ benefit for people at a high risk of becoming infected with HIV, the virus that leads to AIDS. The independent panel of experts noted that it found ‘adequate epidemiologic data’ on risk factors that can be used to identify people who are at a high risk of acquiring HIV.”
Articles of Interest

- **Diabetics cared for by NPs, PAs do as well as those in physicians’ care.** “Medium-term outcomes in diabetes remain the same under nurse practitioners (NPs) and physician assistants (PAs) as with physicians, suggests a study in the *Annals of Internal Medicine*. Researchers compared clinical changes among some 370,000 Veterans Affairs patients with diabetes in almost 600 VA primary care facilities. All were observed for 2 years. Changes in glycated hemoglobin, systolic blood pressure, and low-density lipoprotein among those under the principal care of an NP or PA did not differ when compared to those under physician care.”

- **Study finds 45 minutes of patient education improves chronic disease management.** “Just 45 minutes of patient education can improve outcomes for patients with chronic diseases, according to a study in the *Journal of the American Osteopathic Association*. The study, titled The Other 45, assigned 47 patients who were diagnosed with a chronic disease, like hypertension, COPD, or diabetes, to visit with a second-year medical student for 45 minutes after seeing their physician. That one-on-one session measurably improved patients' attitudes and abilities in self-managing their care. Patients also had subsequent follow-up appointments with the students at three weeks and three months after their initial session, and were assessed on a 40-point questionnaire. Results at both points demonstrated consistent improvement in patients' willingness and capacity to be able to self-manage their care.

- **Millions left behind as diabetes drives surge in insulin demand.** “A global diabetes epidemic is fueling record demand for insulin but tens of millions will not get the injections they need unless there is a dramatic improvement in access and affordability, a new study concluded on Wednesday. Researchers said the amount of insulin needed to effectively treat type 2 diabetes would rise by more than 20 percent over the next 12 years, but insulin would be beyond the reach of half the 79 million type 2 diabetics predicted to need it in 2030.”

- **Revealed: 35 kidney genes linked to chronic kidney disease risk.** “An international study lead by University of Manchester scientists has discovered the identity of genes that predispose people to chronic kidney disease. The discovery is a major advance in understanding of the significantly under-diagnosed disorder which, if left undetected, can lead to failing kidneys that need dialysis or kidney transplantation. The discovery of 35 kidney genes is an important step forward to the future development of new diagnostic tests and treatments for the disease that affects around one in ten adults.”
• **Americans are still struggling with drug costs.** “More than 2 out of 5 Americans say paying for their prescription drugs in the past year was difficult, even though most have health insurance, according to a new survey from GoodRx, a consumer site that compares drug costs. Why it matters: Drug prices are a top public concern because many people take medications every day and see the toll on their wallets. The survey shows people aren't really feeling any relief amid the political promises to address the issue.”

• **Many who buy ACA health plans for 2019 will find lower prices and more choices.** “In recent years, some cities, including Memphis and Phoenix, withered into health insurance wastelands, as insurers fled and premiums skyrocketed in the insurance marketplaces that were set up under the Affordable Care Act. But today, as in many parts of the U.S., these two cities are experiencing something unprecedented: Insurance premiums are sinking and choices are sprouting. In the newly competitive market in Memphis, for example, the cheapest midlevel ‘silver’ plan for 2019 health coverage will cost $498 a month for a 40-year-old — a 17 percent decrease compared to last year.”

• **Five controversial health actions on Trump’s agenda.** “The Trump administration is expected to push ahead with a range of controversial health policies next year despite Democrats retaking the House. Democrats captured the House majority in part on their health-care message. But despite that there are a slew of actions where the administration is moving ahead on its own agenda. Here are five controversial moves Trump officials are expected to make on health care: Roll back transgender protections; Limit abortion providers from getting federal money; Approve more Medicaid work requirements; Indefinitely detain migrant families; Loosen nursing home emergency preparedness rules.”
  - Read more: [https://thehill.com/policy/healthcare/417949-five-controversial-health-actions-on-trumps-agenda](https://thehill.com/policy/healthcare/417949-five-controversial-health-actions-on-trumps-agenda)

• **Medical devices for pain, other conditions have caused more than 80,000 deaths since 2008.** “For years, medical device companies and doctors have touted spinal-cord stimulators as a panacea for millions of patients suffering from a wide range of pain disorders, making them one of the fastest-growing products in the $400 billion medical device industry. Companies and doctors aggressively push them as a safe antidote to the deadly opioid crisis in the U.S. and as a treatment for an aging population in need of chronic pain relief. But the stimulators — devices that use electrical currents to block pain signals before they reach the brain — are more dangerous than many patients know, an Associated Press investigation found. They account for the third-highest number of medical device injury reports to the U.S. Food and Drug Administration, with more than 80,000 incidents flagged since 2008.”
• **Company hiked price for opioid overdose treatment 600 percent: Senate report.** “A drug company ‘exploited the opioid crisis’ by hiking the price of a drug to treat opioid overdoses by more than 600 percent between 2014 and 2017, according to a new Senate report. The report from the Senate’s Permanent Subcommittee on Investigations finds that the company Kaléo raised the price of its drug EVZIO from $575 in 2014 to $4,100 in 2017. EVZIO is an auto-injector form of the drug naloxone, which is used to treat people overdosing on opioids, an occurrence that has reached crisis levels in the United States. The report found that the price hikes have cost the government more than $142 million over the past four years through charges to Medicare and Medicaid.”

• **Hospitals’ national TV ads build brands for transplants and other high-priced services.** “Hospitals are using TV spots to attract lucrative patients into their hospitals as health care costs and industry competition escalate. Some institutions use them to build national and international brands on niche but high-priced health services. They’re often procedures involving expensive technology that benefit only a sliver of the population. But they could lure wealthy patients seeking high-end care and can also give hospitals leverage with insurers. Some analysts worry that these hospital advertisements are incomplete or misleading.”

• **Drug industry nervous about Grassley’s new role.** “The drug industry is gearing up for a new threat in January when Sen. Chuck Grassley (R-Iowa) takes over as head of the Senate Finance Committee. Drugmakers will soon lose a reliable ally in Sen. Orrin Hatch (R-Utah), the retiring committee chairman who has been viewed by industry lobbyists and drug pricing advocates alike as a major roadblock to reform efforts pushed by Democrats and even the Trump administration. Grassley, who wielded the Finance Committee gavel from 2003 to 2007, has taken a much more antagonistic approach to drug companies and is well known in Washington as a dogged investigator.”

• **US has highest rate of drug overdoses, study says.** “The United States has more than double the rate of premature overdose deaths of at least 12 other countries, according to a new study. The research, published in the Annals of Internal Medicine, says that there were an estimated 63,632 drug overdose deaths in 2016 in the US.”

• **Chinese researcher claims first gene-edited babies.** “A Chinese researcher claims that he helped make the world’s first genetically edited babies — twin girls born this month whose DNA he said he altered with a powerful new tool capable of rewriting the very blueprint of life. If true, it would be a profound leap of science and ethics. A U.S. scientist said he took part in the work in China, but this kind of gene editing is banned
in the United States because the DNA changes can pass to future generations and it risks harming other genes. Many mainstream scientists think it’s too unsafe to try, and some denounced the Chinese report as human experimentation.”

- Read more: https://apnews.com/4997bb7aa36c45449b488e19ac83e86d