American Nephrology Nurses Association

Weekly Capitol Hill Update – Monday, November 7, 2016

Congressional Schedule

House and Senate

• Not in session. The House will return on November 14th; the Senate will return on November 15th.

   o “After the November 8 election, Members will return to Capitol Hill the week of Nov. 14 and hold orientation for their new members and elect caucus leaders. Committee assignments will be sorted out in December, according to leadership staff. Once the new Congress begins in January, organizing resolutions will need to be adopted that establish the specific number of members on each committee and who will run them.” (CQ)

Legislative Updates

• Chatter Grows That Ryan Could Step Down. “Chatter is growing louder on Capitol Hill that Paul Ryan’s days as Speaker are numbered. Four House Republicans, including a senior lawmaker close to leadership, told The Hill they expect Ryan to step down after Tuesday’s elections, arguing that he faces a daunting path to the 218 votes he needs to win a full two-year term leading the House GOP. Aides to the Wisconsin Republican insist he isn’t going anywhere and that he’s completely focused right now on protecting the GOP’s majority in the lower chamber.”

   o Read more: http://thehill.com/homenews/house/304245-chatter-grows-that-ryan-could-step-down

• Health Professionals on the Ballot in Many States. “While much of America will be consumed on Tuesday night with who wins the White House, at least 39 doctors, nurses, and dentists will be focused on their own races for statewide and federal offices. According to the US Elections website, there are 28 physicians, eight nurses, and one dentist running for Congress, and two physicians who are running for governor. Other candidates include a physician assistant, pharmacist, and hospice care provider seeking House seats from Alaska, California, and Texas, respectively. Also, a physical therapist is challenging Florida’s Sen. Marco Rubio (R) for his seat. In all, healthcare professional candidates are running in 20 states: Arizona, California, Florida, Georgia, Illinois,
Freedom Caucus Eyes Spot in Ryan's Leadership Circle. “The House Freedom Caucus discussed in a private meeting Wednesday making a play for a slot in GOP leadership in return for backing Paul Ryan for another term as speaker, according to sources familiar with the plan. Though the position would likely be low in the leadership pecking order, it would be the first time a member of the group of hardliners became part of official party governance. The House Republican Conference is set to hold secret-ballot internal leadership elections on Nov. 15, so the Freedom Caucus will have to organize quickly. The full House will hold a floor vote in January to elect the next speaker. Caucus members discussed the plan Wednesday at a rare election-season meeting at Rep. Mark Meadows' (R-N.C.) apartment in Washington.”


Regulatory Updates

- Upcoming CMS Conference Call on Medicare Part D. “The Centers for Medicare and Medicaid Services holds a listening session regarding the implementation of certain Medicare Part D provisions in the Comprehensive Addiction and Recovery Act of 2016, Nov. 14, 1:00 p.m., via teleconference.”
  - To read more and register: https://www.cms.gov/Outreach-and-Education/training/CTEO/Upcoming_Current_events.html

- CMS promulgates CY 2017 Physician Fee Schedule Final Rule. CMS has promulgated the attached CY 2017 Physician Fee Schedule Final Rule.

- CMS Proposed Rule Would Update Fire Safety Standards for Certain Dialysis Facilities. “The Centers for Medicare & Medicaid Services today released a proposed rule that would update fire safety standards for certain end-stage renal disease facilities that participate in the Medicare and Medicaid programs. The rule would adopt applicable provisions of the National Fire Protection Association’s 2012 Life Safety Code and 2012 Health Care Facilities Code (with some exceptions), regardless of the number of patients served, for ESRD facilities that do not provide at least one grade-level exit from the treatment-area level, CMS said. Among other provisions, the rule would require doors to hazardous areas to be self-closing or close automatically, and a fire watch or building evacuation if the sprinkler system is out of service for more than 10 hours. It also would allow alcohol-based hand rub dispensers to be placed in corridors for easier access. The rule also clarifies that dialysis facilities may not operate in a building that is adjacent to an industrial high-hazard area.”
To read the CMS press release:

To read the proposed rule: https://s3.amazonaws.com/public-inspection.federalregister.gov/2016-26583.pdf

Articles of Interest

• **DaVita Announces Change for Medicaid Patients Seeking Affordable Care Act Plan Coverage.** “DaVita Kidney Care ("DaVita"), a division of DaVita Inc. (DVA), a leading provider in kidney care services, today announced information concerning its patients enrolled in plans governed by the Affordable Care Act ("ACA"). With open enrollment starting tomorrow, and in light of recent statements from the Centers for Medicare & Medicaid Services ("CMS"), DaVita announced that, effective immediately, it will suspend support for applications to the American Kidney Fund ("AKF") for charitable premium assistance by patients enrolled in minimum essential Medicaid coverage who are seeking additional coverage on a 2017 ACA Plan.”

• **Kidney Transplantation Rejection Remains High With HIV.** “Kidney transplantation in patients with HIV is associated with higher allograft rejection compared with patients without HIV, according to a presentation at IDWeek 2016. Clinical and fiscal outcomes, however, were the same between both groups. Senu Apewokin, MD, medical director of transplant infectious diseases at the University of Cincinnati, Ohio, and colleagues identified candidates for kidney transplantation and patients with HIV between 2008 and 2013 using the Inpatient Databases of the Healthcare Cost and Utilization Project. Kidney transplantation patients were identified by procedural codes while ICD-9 codes were used to identify patients with HIV. Of the 104,137 patient data reviewed, 605 patients were HIV positive. Most of these patients were younger (between 35 to 49 years of age), were of African American descent, and had Medicare as a primary payer. Income was not a factor between the two groups.”
  o To read more: http://www.renalandurologynews.com/transplantation/kidney-transplantation-rejection-remains-high-with-hiv/article/569154/

• **Uninsured In Coal Country: Desperate Americans Still Turn To Volunteer Clinics.** “Sandra Cook got in line midday on a recent Friday for dental care that she wouldn’t receive until the next morning. Hundreds more like her showed up at Riverview Elementary and Middle School here, many planning to spend the night, just as buses brought kids home and volunteers arrived by the hundreds to turn the school into a makeshift dental, eye and medical clinic run by Remote Area Medical, a nonprofit charity program. Many people in this southwestern corner of Virginia struggle to pay for everyday needs and that includes basic health care. Six years after the passage of the Affordable Care Act, and despite 20 million more Americans gaining health insurance, considerable gaps in health care remain. The decision by states like Virginia not to expand Medicaid and the lack of dental and vision coverage even for those with insurance have meant that the demand for RAM’s free mobile clinics has stayed strong.”
• **Medical Interns Could Work Longer Without A Break Under New Rule.** “For years, medical interns have been limited to working no more than 16 hours without a break to minimize the chances they would make mistakes while fatigued. But that restriction could soon be eased. The group that sets the rules for medical residents proposed scrapping the 16-hour limit for interns, doctors in their first year of on-the-job training after finishing medical school. The new rule would let these new doctors work for as many as 28 hours at a stretch. The Accreditation Council for Graduate Medical Education proposed the change based on research that found that the relaxed rule wouldn't increase risks for patients, officials say. In fact, the ACGME says, the longer work hours could make patient care safer and would also improve medical training by giving young doctors more realistic experience.”