American Nephrology Nurses Association

Weekly Capitol Hill Update – Monday, December 18th, 2017

Congressional Schedule

Senate
• Senate meets at 3 pm; has scheduled confirmation vote on J. Paul Compton to be HUD general counsel and Owen West to be assistant secretary of defense.

House
• House meets at 12 pm with first votes expected 6:30 pm; set to vote on 8 bills including a number relating to education.
• House Rules Committee meets at 5 pm on tax overhaul conference report to H.R.1.
• Rules Committee also meeting on H.R. 3312, which would no longer designate bank holding companies with assets of $50b or more as systemically important financial institutions.
• To keep the federal government open after Dec. 22, House appropriators are bundling a fiscal 2018 defense spending bill with a continuing resolution that would fund other agencies at fiscal 2017 levels through Jan. 19.

Legislative Update

• Week in Review
  o 3 winners and 2 losers in the Alabama Senate race. “For the first time since 1992, a Democrat has won a US Senate election in Alabama. It’s a stunning reversal in one of the reddest states in the union, made possible not so much by the strength of the Democratic candidate but by the astonishing weakness of the Republican nominee.”
  o GOP chairman: CHIP must be attached to next funding bill. “House Energy and Commerce Committee Chairman Greg Walden (R-Ore.) said Tuesday that funding for a major children’s health insurance program needs to be included in a short-term funding bill later this month. The comments from Walden, whose panel oversees the Children’s Health Insurance Program (CHIP), add urgency to the push to renew authorization for the program covering 9 million children,
which expired at the end of September and has been caught up in partisan fighting over how to pay for an extension.”


- **House GOP unveils package to delay ObamaCare taxes.** “House Republicans on Tuesday unveiled a package of bills to delay a range of ObamaCare taxes, which could be acted on later this month. House Ways and Means Chairman Kevin Brady (R-Texas) led the announcement for the bills to delay ObamaCare’s tax on medical devices for five years, on health insurance for two years, and the "Cadillac tax" on high-cost health plans for one year. The package would also eliminate penalties for employers who do not offer health insurance to their workers, under the employer mandate, through 2018.”

- **Experts Tell Congress How To Cut Drug Prices. We Give You Some Odds.** “The nation’s most influential science advisory group was set to tell Congress on Tuesday that the U.S. pharmaceutical market is not sustainable and needs to change. “Drugs that are not affordable are of little value and drugs that do not exist are of no value,” said Norman Augustine, chair of the National Academies of Sciences, Engineering and Medicine’s committee on drug pricing and former CEO of Lockheed Martin Corp.”

- **CDC gets list of forbidden words: Fetus, transgender, diversity.** “The Trump administration is prohibiting officials at the nation’s top public health agency from using a list of seven words or phrases — including “fetus” and “transgender” — in official documents being prepared for next year’s budget. Policy analysts at the Centers for Disease Control and Prevention in Atlanta were told of the list of forbidden terms at a meeting Thursday with senior CDC officials who oversee the budget, according to an analyst who took part in the 90-minute briefing. The forbidden terms are “vulnerable,” “entitlement,” “diversity,” “transgender,” “fetus,” “evidence-based” and “science-based.””

- **White House tamps down expectations of additional opioid funding this year.** “White House press secretary Sarah Sanders on Thursday told reporters she was unsure when Congress would fund new initiatives specific to addressing the opioid crisis. Sanders declined to guarantee that additional spending would be included in either a stopgap spending bill Congress is expected to approve in the coming week or a longer-term budget agreement many expect lawmakers to reach in January.”
• **Week Ahead**

  o **GOP faces 5-day scramble to pass tax bill, avoid government shutdown.**
    “Republicans return to Congress on Monday facing a packed agenda with little
time to enact it, as party leaders aim to quickly pass their massive tax plan and
then cut a budget deal with Democrats before the end of Friday to avert a
government shutdown. Republicans’ tight timing on taxes is self-imposed. GOP
lawmakers have for months been racing to meet President Trump’s demand that
they send him tax legislation before Christmas — a timeline that gained new
urgency when Alabama Democrat Doug Jones won the Senate seat currently
occupied by Sen. Luther Strange (R).”

    To read more: [https://www.washingtonpost.com/business/economy/gop-faces-5-
day-scramble-to-pass-tax-bill-avoid-government-shutdown/2017/12/17/e3292264-e363-11e7-833f-
155031558ff4_story.html](https://www.washingtonpost.com/business/economy/gop-faces-5-
day-scramble-to-pass-tax-bill-avoid-government-shutdown/2017/12/17/e3292264-e363-11e7-833f-
155031558ff4_story.html)

  o **WSJ Updates on the Tax Bill.** The Wall Street Journal is doing a continuous
update on the latest rumors, stories, and quotes regarding the status and
provisions currently within the tax bill.


  o **Tax Bill Set to Move at Warp Speed to Trump’s Desk.** “Don’t blink, because you
might miss Congress passing a historic overhaul of the U.S. tax code. House and
Senate Republicans say they are nearing completion on a sweeping bill that
would dramatically reduce the corporate tax rate, lower the top individual tax
rate, nearly double the standard deduction, bolster the child tax credit and
remove some breaks enjoyed by many Americans. Members on Wednesday said
a broad agreement has been reached between the two chambers that would
address differences between their respective bills. Some issues, like small pay-
fors, still need to be worked out, aides said. Senate Majority Whip John Cornyn
said his chamber would act first on a conference measure, with work to begin on
Monday and a final vote possibly slipping to Tuesday.”


  o **GOP Tax Compromise Would Repeal Obamacare’s Individual Mandate.**
    “Republican lawmakers will overturn a key piece of the Affordable Care Act in
their tax overhaul, a victory in a long GOP campaign against the health law.
Senate Majority Leader Mitch McConnell said the compromise tax bill from
House and Senate negotiators will end the health law’s requirement that all
individuals buy insurance or pay a fine. Doing so could jeopardize Obamacare’s
already-shaky marketplaces, by reducing the number of healthier people who sign up for insurance.”

- To read more: https://www.bloomberg.com/news/articles/2017-12-13/obamacare-coverage-requirement-undone-in-gop-tax-compromise

- **Collins confident health subsidies will be in spending bill.** “Funding for key ObamaCare insurer subsidies is likely to be included in the upcoming government funding bill, Sen. Susan Collins (R-Maine) said Wednesday. Collins said she had received reassurances Tuesday from Vice President Pence that the subsidies, opposed by House conservatives, would be in the funding bill.”

- **McCain, in Treatment for Cancer, Is Likely to Miss Senate Tax Vote.** “Senator John McCain, who is battling brain cancer, has returned home to Arizona and is likely to miss the Senate’s vote this week to approve a sweeping tax overhaul, though President Trump said on Sunday that the senator would return if his vote was needed. Mr. McCain’s office said in a statement on Sunday night that the senator, who had been hospitalized recently in the Washington area, would undergo physical therapy and rehabilitation at the Mayo Clinic in Arizona and “looks forward to returning to Washington in January.””

- **How the Republican Tax Bill Could Affect You.** “The $1.5 trillion Republican tax bill would make major changes to the tax code. But what do they mean for you? This is how the plan’s changes to some common deductions and taxes could affect Americans.”

**Regulatory and Administration Update**

- **Medicare to scrutinize prescription drug plans.** “The Centers for Medicare & Medicaid Services may hire a contractor to track whether the companies that sell Medicare prescription drug plans are doing a good enough job, according to a document that outlines potential contractor tasks. Many Medicare drug plans have been reprimanded for some serious violations, and CMS wants to figure out what's going on. Seniors and disabled people who buy the plans often complain about bad service and inappropriate denials of drug coverage. There's no guarantee CMS will hire a contractor, but the agency is testing the waters to see if an outside company can help determine "whether the Part D formulary and benefit offerings are being administered as approved" by law.”
  - To read more: https://www.axios.com/medicare-to-scrutinize-prescription-drug-plans-2517373881.html
• **Five Simple Charts Show That Risk-Based ACOs Are Working.** “While much has been written, both skeptical and positive, in the days since the Center for Medicare and Medicaid Services (CMS) released performance data for its Medicare Accountable Care Organization (ACO) participants in 2016, one thing mysteriously remains unclear: How should we define success for ACO models? If ACOs were a clinical trial, we would have pre-specified the endpoints to measure, the duration of the trial, and the inclusion criteria for participants—but we haven’t done any of these things for ACOs. How can we even interpret their performance without a shared definition of success?”
  o To read more: [https://www.healthaffairs.org/do/10.1377/hblog20171212.585293/full/](https://www.healthaffairs.org/do/10.1377/hblog20171212.585293/full/)

• **Medical lab trade group sues over U.S. reimbursement cuts.** “A U.S. trade association representing medical laboratories filed a lawsuit on Monday challenging a new reimbursement system used by the federal government that it said would reduce how much Medicare pays for labs by about $670 million in 2018. The American Clinical Laboratory Association (ACLA) in a lawsuit in federal court in Washington, D.C., said the U.S. Centers for Medicare & Medicaid Services (CMS) ignored Congressional intent by implementing the new system following the passage of a 2014 law.”
  o To read more:

• **FDA Grants Orphan Drug Designation to Zytoprotec’s Novel Dialysis Fluid.** “Zytoprotec, a biopharmaceutical company developing innovative dialysis fluids, announced today that the United States Food and Drug Administration (FDA) has granted orphan drug designation to PD-protec®, the Company’s peritoneal dialysis fluid for the treatment of patients with end-stage renal disease (kidney failure). Zytoprotec is currently preparing a pivotal Phase III clinical trial with PD-protec® in 300 patients suffering from end-stage renal disease in Europe and the United States. Orphan drug designation is a special status granted by the FDA to treatments for rare diseases that affect fewer than 200,000 people in the United States. The orphan designation will provide Zytoprotec with several development incentives including market exclusivity for up to seven years upon FDA approval.”

• **FDA proposes new fast path to market for certain medical devices.** “The U.S. Food and Drug Administration on Monday proposed creating a new fast track to market for certain medical devices and a potential reduction in the amount of safety data required for approval. Commissioner Scott Gottlieb announced the proposal in a blog posted on the FDA’s website. If implemented, it could save device companies millions of dollars in product testing and shave years off development times.”

• **Assessing payment adequacy and updating payments: outpatient dialysis services.** During the recent Medicare Payment Advisory Commission (MedPAC) meeting, a panel was held on assessing payment adequacy and updates to outpatient dialysis services.
The slides from the presentation can be found at the following link: http://www.medpac.gov/docs/default-source/default-document-library/dialysis-1217-public.pdf

Articles of Interest

- **DaVita Kidney Care Issues Statement about DaVita Rx Settlement.** “We take full ownership and continue to embrace transparency and rigorous compliance. DaVita is proud that its team discovered and self-disclosed these issues to the federal government in 2015 and 2016 and cooperated with the government in resolving them. As the DOJ said in its announcement, this settlement reflects the government’s "willingness to work with providers who review their own practices and make appropriate self-disclosures." These amounts have been paid or previously accrued. DaVita launched the country's first kidney care focused pharmacy over ten years ago and this innovative approach successfully addressed important unmet clinical needs of tens of thousands of kidney care patients at DaVita and elsewhere.”
  - To read more: https://www.justice.gov/opa/pr/davita-rx-agrees-pay-637-million-resolve-false-claims-act-allegations

- **2017 Ranking of Healthiest U.S. States.** “America’s Health Rankings® was built upon the World Health Organization definition of health: “Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.” The model reflects that determinants of health directly influence health outcomes. A health outcomes category and four categories of health determinants are included in the model: behaviors, community & environment, policy and clinical care.”
  - To read more: https://www.americashealthrankings.org/learn/reports/2017-annual-report

- **Your smartphone as medicine: Digital therapy is here to stay.** “The next blockbuster therapy is probably already in your pocket or purse. The FDA recently approved the first prescription digital therapy, Pear’s Reset app and program, which is focused on substance abuse. Others are likely to follow. That means your next trip to the doctor could include a prescription for a mobile app in addition to, or instead of, medicine. Digital therapy represents a powerful yet provocative new idea in health care. Software brings a precision to therapy and with it an ability to personalize treatment. This gives digital therapy a big role to play as we transition to value-based care.”
  - To read more: https://www.statnews.com/2017/12/11/your-smartphone-as-medicine-digital-therapy-is-here-to-stay/

- **Prescription Drugs May Cost More With Insurance Than Without It.** “Having health insurance is supposed to save you money on your prescriptions. But increasingly, consumers are finding that isn’t the case. Patrik Swanljung found this out when he went to fill a prescription for a generic cholesterol drug. In May, Mr. Swanljung handed his Medicare prescription card to the pharmacist at his local Walgreens and was told that he owed $83.94 for a three-month supply. Alarmed at that price, Mr. Swanljung went online and found Blink Health, a start-up, offering the same drug — generic Crestor —
for $45.89. It had struck a better deal than did his insurer, UnitedHealthcare. “It’s completely ridiculous,” said Mr. Swanljung, 72, who lives in Anacortes, Wash.”


- **To Cut Drug Prices, Academy of Sciences Tells the Government to Negotiate With Manufacturers.** “The National Academy of Sciences called Thursday for sweeping changes in the pricing, sale and promotion of prescription drugs to make lifesaving treatments more affordable without discouraging the development of new medicines. The federal government should negotiate drug prices with manufacturers, the academy said, an idea pushed by Democrats for years, embraced by President Trump during the 2016 campaign, but opposed by congressional Republicans. The government, it said, should also deny tax deductions for drug advertising aimed at consumers and set annual limits on out-of-pocket drug costs for Medicare beneficiaries.”


- **How blue states might save Obamacare's markets.** “The looming demise of Obamacare’s individual mandate is spurring talks in a handful of blue states about enacting their own coverage requirements, as state officials and health care advocates fear repeal will roil their insurance markets. Republicans in Congress are poised to kill off the individual mandate in their sweeping tax overhaul, knocking out one of Obamacare's most unpopular features — but one that health experts have said is essential to making the law's insurance marketplaces function.”

- To read more: https://www.politico.com/story/2017/12/17/obamacare-markets-blue-states-298912