American Nephrology Nurses Association

Weekly Capitol Hill Update – Tuesday, May 1, 2018

Consenessional Schedule

Senate

• Senate is out of session. Will reconvene next week.

House

• House is out of session. Will reconvene next week.

Legislative Update

• Week in Review
  o **Democrats, public health experts highlight lack of funds as opioid bills advance.**
    “Over the past two days, members of the Senate Health, Education, Labor and Pensions and the House Energy and Commerce committees advanced legislation that would make wide-ranging changes to fight the opioid crisis, including encouraging research into nonaddictive painkillers, imposing new prescription limits on opioids and expanding medication-assisted treatment. The legislative efforts have mostly bipartisan support, but some Democrats and public health experts argue that the measures won’t have a significant effect on preventing or treating opioid addiction, because they exclude a key component: a continuous stream of funding dedicated to the opioid crisis.”

  o **Top Dems on Energy and Commerce panel concerned House opioid push moving too quickly.** “Top Democrats on the House Energy and Commerce Committee voiced concerns over the speed at which the Republican chairman is aiming to put opioid legislation on the House floor. Chairman Greg Walden (R-Ore.) has repeatedly said he hopes the House can take up the committee’s legislation to combat the opioid epidemic by Memorial Day weekend.”
- Experimental drugs bill runs aground despite Trump, Pence support. “Advocates for White House–backed legislation intended to make it easier for sick patients to get access to experimental drugs are frustrated, believing that congressional momentum behind ‘right to try’ has ground to a halt. Despite vocal support from President Trump and Vice President Pence, the House and Senate have made little if any progress on bridging differences with each other over separate bills that have passed each chamber.”
  - House bill would add reporting requirements for 340B hospitals. “A House Republican on Tuesday unveiled a proposal that would require hospitals participating in the 340B drug discount program to disclose how much care they provide to low-income patients. But healthcare stakeholders warn the bill could place unfair reporting burdens on providers in medically vulnerable communities. Rep. Earl ‘Buddy’ Carter (R-Ga.) said the 340B Optimization Act would fix reporting issues with the program, claiming the current system does not provide an accurate measurement of how many low-income patients receive care at a health system's hospitals, outpatient facilities and pediatric clinics.”
  - Senate Health panel approves opioid bill. “The Senate Health Committee unanimously voted Tuesday to send the panel’s bipartisan opioid bill to the chamber’s floor. The panel held seven hearings on the opioid crisis, including one on the discussion draft of the bill introduced by Health Committee Chairman Lamar Alexander (R-Tenn.) and ranking member Patty Murray (D-Wash.). Lawmakers touted the bipartisan process used to craft the Opioid Crisis Response Act of 2018 aimed at combating the opioid crisis, which has shown no signs of slowing down.”
  - Dem proposes testing automatic ObamaCare enrollment. “Rep. Ami Bera (D-Calif.) is proposing to test automatically enrolling people in ObamaCare plans as a way to cut the uninsured rate. Bera unveiled a bill that would give grants to states to set up pilot programs to automatically enroll eligible people in ObamaCare plans or Medicaid. People would still have 60 days to opt-out if they wanted to, so they would not be forced to buy coverage, but Bera says the idea is
that people are more likely to sign up if the default is to be signed up and they need to actively opt-out of coverage.”


**Week Ahead**

- Trump delays drug pricing speech, no set date yet. “U.S. President Donald Trump has postponed a speech on lowering prescription drug prices previously scheduled for Thursday to a date in the near future, the White House said on Sunday. The White House did not provide a date or time frame for when the speech would take place, and did not say why it had been pushed back.”

**Regulatory and Administration Update**

- FDA moves to encourage AI in medicine, drug development. “The Food and Drug Administration is making moves to encourage the use of artificial intelligence and other digital tools in medicine and drug development, expanding a program it announced last year around digital health and establishing a new incubator focused on health technology. The agency established its pre-certification program for digital health companies last year, enabling certain firms that obtain that status to bring digital health products to market through a more streamlined regulatory process. Gottlieb said the regulatory agency will look to apply that program to tools based on AI as well.”

- Trump VA pick withdraws nomination. “Navy Adm. Ronny Jackson on Thursday withdrew as President Trump’s nominee to lead the Department of Veterans Affairs (VA) amid mounting accusations of misconduct that raised new questions about the president’s personnel decisions. In a lengthy statement, Jackson called the allegations ‘false and fabricated,’ but said he pulled out to allow Trump to move forward with a new nominee.”

- Medicare may require hospitals to share electronic records. “Medicare is considering requiring hospitals to share patients’ digital health records with other hospitals and doctors, and to provide patients with their records electronically if they ask for them. Why it matters: Even though electronic health records have become ubiquitous, hospitals and doctors still have not been able to easily share medical information with
each other or with patients. Tying Medicare payments to an open exchange of medical records could force the industry to solve the practice known as information blocking.”

- **Hospitals primed for $4 billion Medicare pay raise.** “The Centers for Medicare and Medicaid Services unveiled its annual regulation that will, among other things, raise Medicare payments to the nation’s hospitals by $4 billion in 2019. Why it matters: The 4$ billion increase is a sizable proposed raise from the $2.4 billion hospitals got for this year. The 1,883-page rule also proposes several policies, including requiring hospitals to publish inpatient charges online and reimbursing cancer hospitals for new breakthrough treatments.”


- **KidneyX: HHS announces innovation accelerator for kidney disease treatment.** “The public-private partnership will include prize competitions and other efforts to ‘accelerate the commercialization’ of therapies. Health and Human Services announced an initiative Thursday, in partnership with the American Society of Nephrology, with the goal of helping the more than 40 million Americans living with kidney disease. The project, dubbed the Kidney Innovation Accelerator, or KidneyX, will encourage public-private coordination and a series of prize competitions ‘to enable and accelerate the commercialization’ of therapies, HHS said in its announcement.”


- **Trump administration extends opioid public health emergency.** “The Trump administration has extended its opioid public health emergency, according to a Department of Health and Human Services spokesperson, as lawmakers and White House officials grapple with how to combat a crisis killing more people per year than car accidents. This is the second extension of the national public health emergency, which President Trump first announced in a declaration in late October. The initial order lasted 90 days, as does each extension by the Health and Human Services secretary.”


**Articles of Interest**

- **4 New exemptions to the tax penalty for lacking health insurance.** “There already have been more than a dozen reasons U.S. consumers can use to avoid paying the penalty for not having health insurance. Now the federal government has added four more. These ‘hardship exemptions’ let people off the hook if they can't find a marketplace plan that
meets not only their coverage needs but also reflects their view if they are opposed to abortion.”


- **Hospitals lure diabetes patients with self-care courses, but costs can weigh heavily.** “Diabetes is among the costliest of medical conditions. The American Diabetes Association estimates that average medical expenditures for those diagnosed with diabetes are 2.3 times higher than those without. The classes, say experts, are a chance to rein in some of that spending. When Harvard Law School researchers ran the numbers in 2015, they found an estimated savings of $1,309 over three years for every Medicare Advantage patient who completed an education program. But for many patients, the cost of the classes can either become a barrier to actually attending, or leave them with unanticipated bills.”


- **A new startup wants to use CRISPR to diagnose disease.** “In 2011, biologists Jennifer Doudna and Emmanuelle Charpentier published a landmark paper introducing the world to Crispr. The arcane family of bacterial proteins had a talent for precisely snipping DNA, and one of them—Cas9—has since inspired a billion-dollar boom in biotech investment. Clinical trials using Cas9 clippers to fix genetic defects are just beginning, so it will be years before Crispr-based cures could potentially reach the world. But Crispr tech could actually be showing up in your doctor’s office way sooner. Not to treat what ails you, but to diagnose it.”

  - Read more: [https://www.wired.com/story/a-new-startup-wants-to-use-crispr-to-diagnose-disease/](https://www.wired.com/story/a-new-startup-wants-to-use-crispr-to-diagnose-disease/)

- **Paxton-led coalition in pursuit of Obamacare repeal seeks injunction by year’s end.** “Attorney General Ken Paxton is urging a federal court to eliminate Affordable Care Act regulations in Texas before the end of the year. Paxton and Wisconsin Attorney General Brad Schimel are leading a 20-state coalition that sued in February, challenging the constitutionality of the law. On Thursday, the coalition asked the U.S. District Court for the Northern District of Texas to grant a preliminary injunction by Jan. 1, 2019. Rolling back the health care law’s requirements ‘will prevent unlawful federal regulation of healthcare markets and re-establish state sovereignty,’ the coalition wrote.”


- **A new way to ease the organ shortage: ‘Regifting’ kidneys used in previous transplants.** “Like many transplant surgeons, Dr. Jeffrey Veale got frustrated seeing so many of his
patients die while waiting for a donor kidney. So he decided to do something about it: recycle. Since last year, the UCLA surgeon has transplanted three ‘regifted’ kidneys from previous transplant recipients who died with their donated kidneys still healthy — breaking an unspoken taboo against using kidneys for a third time. Veale said some 25 percent of people who receive kidney transplants die with organs that are perfectly acceptable for transplant into another recipient, and he is pushing hard for other transplant centers around the nation to do the same to help ease the crushing shortage of donor kidneys.”

- **Shoebox-sized lab can diagnose infectious diseases from a drop of blood.** “Researchers from the University of Toronto have created a shoebox-sized laboratory that can do blood testing in remote, low-resource settings, quickly determining from a drop of blood whether a person has antibodies to specific infectious diseases. The device, which they called the MR Box — short for measles and rubella, the first diseases for which they tested — is still being fine-tuned. But their hope is that eventually it could be used to test for a variety of diseases, for both outbreak control and research purposes, in parts of the world where conventional lab support is hours — or farther — away, the scientists reported Wednesday.”

- **‘Rapid autopsy’ programs seek clues to cancer within hours of death.** “Rapid-autopsy technology has been available for decades. Researchers at the University of Washington in Seattle have been using the technique to study prostate cancer since 1991. Scientists at the University of Nebraska Medical Center launched a now-robust program in 2000. But only in recent years have more hospitals been launching and expanding programs, said Dr. Jody Hooper, director of the Legacy Gift Rapid Autopsy Program at Johns Hopkins Medicine in Baltimore. At last count, there were 14 similar programs in the U.S. Most programs focus on cancer, but efforts are underway to expand the practice, possibly to shed light on virus reservoirs in HIV patients, for instance.”

- **AHIP sees SCOTUS ruling as a win for generic drugs.** “The high court upholds the constitutionality of a patent appeals process that the health insurance industry says will help to negate stall tactics used by brand name drug makers. America’s Health Insurance Plans says the high court’s 7-2 decision in Oil States v. Greene’s Energy Group upheld the inter partes review process as a way to prevent drug manufacturers from inappropriately prolonging patent monopolies past the time intended by Congress.”
  - Read more: http://www.healthleadersmedia.com/health-plans/ahip-sees-scotus-ruling-win-generic-drugs
• **Consumers for Quality Care survey finds Americans acutely worried about health care costs.** “The first-ever CQC health care survey finds that Americans fear health care costs even more than they worry about costs associated with retirement, college, housing or child care, despite the fact that more people in this country have health coverage than ever before.”
  o Read more: [https://consumers4qualitycare.org/research/](https://consumers4qualitycare.org/research/)

• **Response to daily stress affects long-term health.** “New research published in the journal Psychological Science, suggests a person’s ability to recover from stress is important to long-term physical health outcomes. Scientists from University of California, Irvine, found that people whose negative emotional responses to stress carry over to the next day are more likely to report health problems and physical limitations later in life compared with peers who can, ‘let it go.’”

• **Time to get screened: Medicare begins covering prevention of Type 2 diabetes in April.** “Nearly half of Americans 65 and older have prediabetes, putting them at risk for heart disease, stroke and type 2 diabetes. Starting in April, millions of Medicare beneficiaries who meet criteria will have access to the Medicare Diabetes Prevention Program (MDPP), which will go a long way to helping prevent or delay the condition, notes the American Association of Diabetes Educators (AADE).”

• **ASN, along with 36 kidney organizations, signed letter to Senate Appropriations for additional kidney research funding at NIH.** “On Monday, April 23, the American Society of Nephrology and a record-setting coalition of 36 other organizations in the kidney community, authored a letter to the leadership of the House and Senate Appropriations Subcommittees that appropriate funds for the National Institutes of Health (NIH). ASN and others urged Appropriations leadership to support a $2.2 billion increase for the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) in Fiscal Year (FY) 2019, as well as a $150 million appropriation for a Special Kidney Program.”