Congressional Schedule

Senate
- Senate meets at 10 am; resumes consideration of judicial nominees.

House
- House meets at noon; set to consider 8 bills.

Legislative Update

- **Week in Review**
  - **House panel grills wholesale drug distributors on West Virginia opioid ‘pill dumping’**. “Republican and Democratic House members on Tuesday grilled wholesale drug distributors during a House panel hearing investigating opioid ‘pill dumping’ in West Virginia. House Energy and Commerce’s Oversight and Investigation Subcommittee chairman, Gregg Harper, a Mississippi Republican, asked the heads of McKesson Corp., Cardinal Health, AmerisourceBergen, Miami-Luken and Smith Wholesale whether they or their companies contributed to the opioid crisis.”
  - **GOP Chairman in talks with Trump officials on more ObamaCare actions.** “Sen. Lamar Alexander (R-Tenn.) wrote in a recent letter that bipartisan efforts to fix ObamaCare have failed and he is now turning to focus on additional actions the Trump administration can take on its own regarding the health-care law. He said he is talking to Trump administration officials about ‘other administrative actions they can take to give states more flexibility to help lower health insurance premiums, especially for the 9 million working Americans in the individual market who do not receive a federal subsidy.’”
  - **House panel advances major VA reform bill.** “A House panel on Tuesday advanced a massive reform package for the Department of Veterans Affairs (VA)
that would overhaul access to private sector care outside the VA health system. The legislation, called the VA Mission Act, advanced through the House Veterans' Affairs Committee by a 20-2 vote, a key first step to get the bill to President Trump for a signature before the end of the month. The bill would expand the number of veterans who are eligible to see private sector health specialists, as well as entitle veterans enrolled in the VA system to see a private doctor twice a year without a copay.”

- Read more: http://thehill.com/policy/healthcare/health-insurance/386761-house-panel-advances-veterans-health-reform-bill

- **GOP Senator calls for mandatory Medicaid work requirements.** “Republican Sen. John Kennedy (La.) on Thursday said Medicaid work requirements should be mandatory for states, and the Department of Health and Human Services (HHS) should take the lead to make it happen. During a hearing on the HHS budget, Kennedy said many Medicaid beneficiaries who aren’t working ‘would like to know the dignity of work’ noting he would like to see HHS work with Congress to put together a program that would institute a mandatory requirement that Medicaid beneficiaries work 20 hours a week.”

- Read more: http://thehill.com/policy/healthcare/medicaid/387128-gop-senator-calls-for-mandatory-medicaid-work-requirements

- **Rescission package threatening the health of children.** “There are thousands of programs across over 430 departments, agencies, and sub-agencies in the federal government, but when the Trump administration proposed a rescission package of $15 billion to Congress, $7 billion or nearly half of the entire package came from just the Children’s Health Insurance Program (CHIP). CHIP funding allotments to states in fiscal year 2017 were $15.8 billion, so a rescission of $7 billion to CHIP is nearly equivalent to half the program’s funding in a year. That is unacceptable. These are dollars that were dedicated by Congress for children’s health and should be used to improve the health and well-being of children.”


- **Week Ahead**

  - **Walden panel advances 25 bills to fight opioid crisis.** “Continuing his efforts to put forth concrete solutions to combat the opioid crisis in Oregon and throughout the country, a House panel chaired by Rep. Greg Walden, R-Ore., advanced more than two-dozen pieces of legislation Wednesday to address the nationwide scourge. Walden’s Energy and Commerce Committee will hold a second legislative markup on additional bills to combat the opioid crisis on Thursday, May 17.”


  - **Democratic senator opens probe into Novartis over its dealings with Trump’s attorney.** “A lawmaker is opening an investigation into Novartis for paying $1.2 million to President Trump’s personal attorney, Michael Cohen, in an attempt to
gain access to the White House, a disclosure that has prompted widespread criticism of the drug maker. The company has said it agreed to a one-year contract, beginning in February 2017, with Cohen’s firm, Essential Consultants, in order to create a direct channel to the Trump administration about ‘health care policy matters.’ The arrangement, however, has been widely derided because Cohen is not a lobbyist or an expert in health care matters. And Novartis said it let the contract lapse when it expired.”

- Read more: https://www.statnews.com/pharmalot/2018/05/11/wyden-trump-cohen-novartis/

- **Trump health secretary pushes back against Medicare drug negotiation.**
  “President Trump’s health secretary pushed back Monday at critics who said Trump’s drug pricing plan moved away from his campaign pledge of having Medicare negotiate drug prices. Health and Human Services (HHS) Secretary Alex Azar dismissed the idea — backed by many Democrats — that Medicare can save money by negotiating directly with drug companies.”


**Regulatory and Administration Update**

- **CMS safeguards patient access to certain medical equipment and services in rural and other non-contiguous communities.** “Today’s action aims to protect access to needed durable medical equipment in rural and non-contiguous areas that are not subject to the DMEPOS CBP, helping beneficiaries to maintain their health, mobility, and overall quality of life. Stakeholders have raised concerns about significant financial challenges the current adjusted DME fee schedule rates pose for suppliers, including many small businesses, and that the number of suppliers in certain areas continues to decline.”


- **FDA seeking to stop procedures at two unregulated stem cell clinics.** “Federal officials moved on Wednesday to stop two clinics from continuing to offer unproven stem cell therapies to patients, the most aggressive action taken in years by regulators against the burgeoning — and what critics call dangerous — field of unapproved, direct-to-consumer stem cell treatments. In seeking permanent injunctions against the clinics, the Justice Department and the Food and Drug Administration accused the clinics of endangering patient safety and failing to meet manufacturing standards for cell therapies. The action opens a new front in the conflict between authorities and the clinics, which have sprung up by the hundreds around the country and have typically steered clear of regulations by insisting their treatments do not fall under the category of drugs.”

  - Read more: https://www.statnews.com/2018/05/09/fda-stem-cell-clinics-injunctions/
• **CMMI poised to weather White House’s $800 million cut if approved, experts say.** “The White House’s call for Congress to slash $800 million in funding for a federal office that tests value-based payment models has raised concerns among some Democrats, who say it casts doubt on the Trump administration’s commitment to reining in health care costs and improving patient care. Despite the proposed cuts to the Center for Medicare and Medicaid Innovation, which was established under the Affordable Care Act, health care experts say they see the Trump administration planning a new direction for CMMI, as evidenced by federal health officials’ outreach to stakeholders seeking feedback on ways to change the office. In addition, since President Donald Trump took office, most Obama-era models have continued, and the Trump administration has moved forward with a new bundled-payment initiative.”
  o Read more: [https://morningconsult.com/2018/05/10/cmmi-poised-weather-white-houses-800-million-cut-approved-experts-say/](https://morningconsult.com/2018/05/10/cmmi-poised-weather-white-houses-800-million-cut-approved-experts-say/)

• **Trump health chief defends short-term insurance plans.** “President Trump’s goal of expanding short-term health plans will not harm the insurance marketplace, Health and Human Services (HHS) Secretary Alex Azar said Thursday. Under questioning from Senate Democrats during a hearing on the HHS budget, Azar repeatedly defended a proposed rule from the administration that would allow the sale of short-term health plans for up to an entire year.”

• **Trump vows (again) to lower drug prices but skeptics doubt much will change.** “President Donald Trump, armed with the expertise of staff seasoned in the ways of the drug industry, unveiled his blueprint to address sky-high drug prices Friday afternoon, promising that increasing industry competition will help Americans save at the pharmacy counter. Many of the proposals Trump’s team can accomplish administratively — and some are already in motion — but for others, Trump said, he plans to work with Congress. The administration’s blueprint proposes 50 actions to reduce what Americans pay for drugs, including giving Medicare more power to negotiate drug prices, Azar said.”

**Articles of Interest**

• **NIH clinical trial to track outcomes of kidney transplantation from HIV-positive donors to HIV-positive recipients.** “The first large-scale clinical trial to study kidney transplantations between people with HIV has begun at clinical centers across the United States. The HOPE in Action Multicenter Kidney Study will determine the safety of this practice by evaluating kidney recipients for potential transplant-related and HIV-related complications following surgery. The HOPE Act permits U.S. transplant teams with an approved research protocol to transplant organs from donors with HIV into qualified recipients with end-stage organ failure who are also living with HIV, a practice that may shorten the time people living with HIV wait to receive a transplant. The
transplantation of organs from donors who have HIV to individuals uninfected with HIV remains illegal in the United States.”

- **Today’s nurses: Poised to fill needs in primary care.** “Everything about the way health care is delivered is changing. And the recognition is growing that our Nation’s demand for primary care cannot be met solely by our partner physicians and physician assistants. About 8,000 primary care physicians enter the workforce each year, but the number of primary care physicians who retire each year is projected to reach 8,500 by 2020. Clearly, these trends represent an important opportunity for nurse practitioners (NPs), registered nurses (RNs), and physician assistants (PAs) - not as replacements for physicians, but as partners in a team-based approach to care delivery. NPs and PAs, who comprise approximately 30 percent of the primary care workforce, already play a central role in the delivery of a broad range of primary care services, while leading practice improvement efforts focused on quality and safety. The time for RNs to join them is here.”
  ○ Read more: https://www.ahrq.gov/news/blog/ahrqviews/nurses-week.html

- **Effect of coaching to increase water intake on kidney function decline in adults with chronic kidney disease.** “Does drinking more water protect against declining kidney function in patients with chronic kidney disease? Among adults with chronic kidney disease, coaching to increase water intake compared with coaching to maintain the same water intake did not significantly slow the decline in kidney function after 1 year. However, the study may have been underpowered to detect a clinically important difference.”
  ○ Read more: https://jamanetwork.com/journals/jama/fullarticle/2680548?utm_source=STAT+Newsletters

- **How have healthcare prices grown in the U.S. over time?** “In this analysis, we explore trends in prices for health services over time in the U.S. (A related chart collection shows trends in prices and utilization in the U.S. and comparable countries). We find that prices have increased for a variety of health services more rapidly than general economic inflation, particularly for the privately insured. Additionally, there is wide geographic variation in the prices paid for the same services across major metropolitan areas in the U.S.”
  ○ Read more: https://www.healthsystemtracker.org/chart-collection/how-have-healthcare-prices-grown-in-the-u-s-over-time/#item-start

- **Americans’ confidence in their ability to pay for health care is falling.** “New findings from the Commonwealth Fund Affordable Care Act Tracking Survey show that consumers’ confidence in their ability to afford all their needed health care continues to decline. In 2018, 62.4 percent of adults said they were very or somewhat confident they could afford their health care, down from a high of nearly 70 percent in 2015 (Table 1). Only about half of people with incomes less than 250 percent of poverty ($30,150 for an
individual) were confident they could afford care if they were to become very sick, down from 60 percent in 2015 and about 20 percentage points lower than the rate for adults with higher incomes. There were also significant declines in confidence among young adults, those ages 50 to 64, women, and people with health problems. Declines were significant among both Democrats and Republicans.”

- Read more: [http://www.commonwealthfund.org/Publications/Blog/2018/May/Americans-Confidence-Paying-Health-Care-Falling](http://www.commonwealthfund.org/Publications/Blog/2018/May/Americans-Confidence-Paying-Health-Care-Falling)

- **Medicare advantage provider Clover Health adds in-home primary care program.** “San Francisco-based Clover Health, a health care technology company and Medicare Advantage insurer, has launched an in-home primary care program that will include gene testing for medication management. The program, which already has approximately 500 members in New Jersey, uses genomic testing integration capabilities from YouScript, a clinical decision support tool for medication management. Clover serves members in Georgia, Texas, Pennsylvania and New Jersey.”


- **Different insurers are paying hospitals widely varying prices for the same procedures.** “Different insurers pay widely varying prices for the same procedures at the same hospitals, indicating that insurers' bargaining leverage influences healthcare prices, according to an updated healthcare economics paper. That was one of the new takeaways from a Commonwealth Fund-backed paper that used actual claims data from three national insurers to explain how hospitals get paid. Spending on U.S. hospital care represents about 6% of the entire economy and providers continue to consolidate throughout the country, which underlines the importance of understanding healthcare pricing dynamics.”

  - Read more: [https://khn.org/morning-breakout/different-insurers-are-paying-hospitals-widely-varying-prices-for-the-same-procedures/](https://khn.org/morning-breakout/different-insurers-are-paying-hospitals-widely-varying-prices-for-the-same-procedures/)

- **National Kidney Foundation and TMF Health Quality Insitute team up to prevent kidney disease through screening and education.** “The National Kidney Foundation (NKF) is partnering with TMF Health Quality Institute to improve chronic kidney disease (CKD) treatment through increased screening and education. The special innovative project, administered through the Centers for Medicare & Medicaid Services (CMS), will promote and increase timely screening, early diagnosis and treatment of chronic kidney disease (CKD).”


- **Home health, nursing face job shortages, report finds.** “A new analysis from Mercer's Workforce Strategy and Analytics practice highlights six occupations in healthcare that will face shortages by 2025: home health aides, nursing assistants, lab technologists, lab technicians, nurse practitioners and physicians. The healthcare industry is poised to add about 2.4 million new jobs by 2026, according to the Bureau of Labor Statistics. According to Mercer, most of those jobs will be in home health. While Mercer predicts
the industry will be short 11,000 physicians and surgeons by 2025, the Association of American Medical Colleges has estimated a shortage of as many as 121,000 doctors by 2030.”

- **DaVita endorses international initiative aimed at helping give patients a voice in kidney care trials and research.** “DaVita Kidney Care, a division of DaVita Inc. (NYSE: DVA) and a leading provider of kidney care services in the United States, today announced its endorsement of the Standardised Outcomes in Nephrology (SONG) initiative, which aims to standardize outcomes in kidney care trials and research while formally incorporating the patient perspective. The goal is to help ensure research is reporting outcomes that are not only meaningful to clinicians but also to patients with kidney disease and their families.”

- **Women are more likely to die waiting for an organ due to a mix of biology and bias.** “Gender disparities in organ transplantation abound. According to 30 years of data from the United Network for Organ Sharing (UNOS), the government-backed organization that facilitates the transplant system, women are less often listed for transplants and receive far fewer transplants than men each year. Women often wait longer for a transplant once listed and are more likely to die awaiting transplant. Even as organ transplants become more common — driven in part by opioid overdose deaths — this gender imbalance remains. While women make up nearly 60 percent of the waitlist for lungs, UNOS data indicates that men have received over 60 percent of lung transplants thus far in 2018. Data shows that women were found to face significantly increased mortality awaiting kidneys, livers and hearts as well.”
  * Read more: [https://www.huffingtonpost.com/entry/women-organ-transplants-disparity_us_5aec8975e4b0c4f193223b87](https://www.huffingtonpost.com/entry/women-organ-transplants-disparity_us_5aec8975e4b0c4f193223b87)

- **Despite widespread incidence of kidney disease and kidney failure, government investment remains inadequate.** “The Global Burden of Disease Study, published last month by the *Journal of the American Medical Association*, evaluated the state of U.S. health between 1990 and 2016 – and makes frighteningly clear that Chronic Kidney Disease (CKD) is exacting a greater and increasing toll on American lives. CKD ranks 7th as a risk factor for death and ‘disability adjusted life years.’ And since 1990, CKD due to diabetes has climbed from 35th to now the 16th leading cause of death and ‘years of life lost due to premature mortality.’ It’s a silent epidemic that’s exploded in 25 years, second only to opioid use disorders.”