American Nephrology Nurses Association

Weekly Capitol Hill Update – Tuesday, May 30, 2017

Congressional Schedule

House and Senate

• “Not in session. The Senate will return June 5 and the House resumes work on June 6.” (CQ)

Legislative Updates

• Week in Review:
  
  o Trump's budget by the numbers: What gets cut and why. “President Donald Trump's team released its first full budget proposal on Tuesday, and while lawmakers are likely to dismiss most of it -- as they traditionally do with most White House wishlists -- the document provides fresh insight into the administration's priorities. While the overall proposed spending is about on par with last year, at $4.1 trillion for 2018, the budget is notable for the knife it takes to domestic programs focused on science and research, the arts and, most notably, social welfare programs.”
    • To read more: http://www.cnn.com/2017/05/23/politics/trump-budget-cuts-programs/?utm_source=nl-politics-daily-052317/

  o Divided Republicans May Find It Hard to Pass Any Budget. “Congressional Republicans greeted President Trump’s first full budget on Tuesday with open hesitation or outright hostility. But it was not clear that they could come up with an alternative that could win over conservatives and moderates while clearing a path for the tax cuts and policies they have promised for years. The budget battle ahead mirrors the continuing health care fight, in which concessions to Republican moderates alienate conservatives, while overtures to conservatives lose moderate votes. But with Republicans in full charge of the government, the onus is on their leaders to reach a budget agreement in a matter of weeks that would ease passage of the president’s promised tax cuts as well as a new spending plan that would reshape the government in a Republican mold.”
    • To read more: https://www.nytimes.com/2017/05/23/us/politics/congress-budget-republicans.html/
- **New CBO score triggers backlash.** “The Republican healthcare bill would result in 23 million fewer people with insurance over a decade, steep premium increases for older people and price hikes for many people with pre-existing conditions, the nonpartisan Congressional Budget Office (CBO) said Wednesday. The long-awaited analysis of the ObamaCare repeal bill found that a controversial amendment from Rep. Tom MacArthur (R-N.J.) — added at the last minute to secure conservative votes — would have a significant effect despite Republican assurances to the contrary.”

- **GOP turns gloomy over Obamacare repeal.** “A feeling of pessimism is settling over Senate Republicans as they head into a weeklong Memorial Day recess with deeply uncertain prospects for their push to repeal Obamacare. Senators reported that they’ve made little progress on the party’s most intractable problems this week, such as how to scale back Obamacare’s Medicaid expansion and overall Medicaid spending. Republicans are near agreement on making tax credits for low-income, elderly Americans more generous, but that might be the simplest matter at hand.”

- **Week Ahead:**

  - **Senate Staff Beginning to Draft Health Bill Over This Week’s Recess.** “Senate leadership staff will huddle this week with their colleagues on three key committees to begin drafting the chamber’s legislation to repeal and replace the 2010 health care law. “The drafting process is going to get underway,” said John Thune of South Dakota, the third-ranking Senate Republican. “Now we have enough direction, we’ve had enough meetings, we’ve got enough input from our members to know sort of what the main issues are, and kind of where the moving points are and how we can dial things. We’ll start putting stuff together and get it out there and let people react to it.”

  - **Dems plot recess offensive on ObamaCare.** “Democrats are using the new Congressional Budget Office analysis of legislation repealing and replacing ObamaCare to go on the attack against Republicans over a critical one-week recess. A recess packet sent to House Democrats encourages lawmakers to hold events highlighting the “terrible consequences” of the House Republican bill to repeal and replace ObamaCare. Meanwhile, advocates are coordinating events to hold House Republicans accountable for the bill they supported, and to pressure the Senate against doing the same.”
Regulatory Updates

- **FDA to Wade Into Drug Pricing Issues Under New Commissioner.** “The Food and Drug Administration is looking at ways to speed up the approval of generic medicines, part of a Trump administration effort to lower drug prices. Newly installed FDA Commissioner Scott Gottlieb told a congressional panel on Thursday that the agency is crafting a “drug competition action plan” aimed at expediting approval of generic versions of brand-name medications that lack competition.”
  
  o To read more: https://morningconsult.com/2017/05/25/fda-wade-drug-pricing-issues-new-commissioner/

- **Premiums have doubled since before Obamacare, says HHS report.** “Obamacare’s insurance regulations contributed to premiums doubling over the course of four years, finds a new federal report. The findings, assembled by the Health and Human Services Office of the Assistant Secretary for Planning and Evaluation, show that since 2013, one year before the Obamacare regulations were fully implemented, premiums have risen from an average of $2,784 in 2013 to $5,712 in 2017 on the federal exchange, healthcare.gov. This represents an increase of $2,928, or 105 percent.”
  
  o To read more: http://www.washingtonexaminer.com/premiums-have-doubled-since-before-obamacare-says-hhs-report/article/2623993/

- **NC health insurer cites lack of certainty for 23 percent rate increase request.** “North Carolina's largest health insurer is requesting a nearly 23 percent rate increase for its ObamaCare exchange plans for 2018, citing uncertainty over the future of the law. BlueCross BlueShield of North Carolina requested an average rate increase of 22.9 percent for coverage purchased on and off the exchanges. The company said in a statement that while it felt the increase was too steep, it was necessary due to the assumption that federal cost sharing reduction (CSR) subsidies won’t be made next year.”
  
  o To read more: http://thehill.com/policy/healthcare/335125-nc-health-insurer-cites-lack-of-certainty-for-massive-rate-increase-request/

Articles of Interest

- **Patients wait as hospital hits pause on some kidney transplants.** “One of the state's busiest kidney transplant programs using live donors is temporarily on hold while the hospital searches for a new surgeon to fill the slot left by a departing doctor. Pancreas transplants will also be on hold at Robert Wood Johnson University Hospital, according to RWJ Barnabas Health spokeswoman Ellen Greene. The transplant program that uses kidneys from living donors was “voluntarily inactivated” May 17. The pancreas transplant program will become inactive July 9, following the expected departure of a surgeon.”
  
  o To read more: http://www.nj.com/healthfit/index.ssf/2017/05/patients_wait_as_hospital_hits_pause_on_kidney_tra.html/
• **Cricket Health CEO talks about helping patients with CKD make more informed choices for care.** “Many of the technology entrepreneurs and investors that move into healthcare get criticized for not appreciating the long sales cycle, the need for clinical validation or putting forward a realistic business model. Arvind Rajan, who previously was an executive at LinkedIn, is determined not to fall into that trap. The CEO and cofounder of Cricket Health landed on kidney disease and setting up a patient and clinician facing tool to help patients with end-stage renal disease make more informed choices about their care.”
  o To read more: [http://medcitynews.com/2017/05/give-more-informed-choices-to-ckd-patients/](http://medcitynews.com/2017/05/give-more-informed-choices-to-ckd-patients/)

• **Home Dialyzors United Announces Partnership with The Kidney Project.** “HDU is proud to announce a partnership with The Kidney Project. This international research and development effort is led by Shuvo Roy, PhD, and William H. Fissell, MD, from University of California San Francisco (UCSF) and Vanderbilt University, respectively. Dr. Roy serves as the Technical Director of The Kidney Project and is a faculty member in the Department of Bioengineering and Therapeutic Sciences, Schools of Pharmacy and Medicine at UCSF. Dr. Fissell serves as the Medical Director and is an Associate Professor of Medicine in Nephrology and Hypertension at Vanderbilt University Medical Center. Their combined expertise embodies all that HDU believes is possible for the future treatment of end stage renal disease (ESRD).”

• **Diabetic Kidney Better than Wait List in ESRD Patients — Recipients had 9% lower risk of dying from any cause.** “Using donor kidneys from people with diabetes may save the lives of patients with end-stage renal disease (ESRD) waiting for a transplant and help address the growing organ shortage, researchers said. Diabetic kidneys are considered low quality, and transplant centers are reluctant to use them, but patients who received them had a 9% lower risk of dying from any cause compared with those who remained on the transplant wait list (hazard ratio 0.91, 95% CI 0.84-0.98), according to Jordana Cohen, MD, of the Hospital of the University of Pennsylvania in Philadelphia, and colleagues.”
  o To read more: [https://www.medpagetoday.com/Nephrology/KidneyTransplantation/65568?xid=nl_mpt_DHE_2017-05-26&eun=g1089877d0r&pos=1/](https://www.medpagetoday.com/Nephrology/KidneyTransplantation/65568?xid=nl_mpt_DHE_2017-05-26&eun=g1089877d0r&pos=1/)

• **White Sox announcer Ed Farmer doesn’t let kidney disease slow him down.** “Ed Farmer's backpack is filled with pills — just in case. There was a time when Farmer swallowed 56 per day — and he can name every one. "I had to," Farmer said. "My life depended on it." The White Sox's radio play-by-play man has polycystic kidney disease and has been living with his brother's kidney inside him for 26 years. These days he is down to one medicine — cyclosporine — which he takes every night at 10.”