Congressional Schedule

Senate
- Senate meets at 3 pm

House
- House meets at noon for morning hour, 2 pm for legislative business; first votes at 6:30 pm

Legislative Update

• Week in Review
  o What’s in the House’s bills to address the opioid crisis – and what’s not. “The House spent much of the last two weeks passing dozens of bills aimed at addressing the opioid crisis, an effort top lawmakers from both parties have long identified as a priority. Many are consensus proposals, though a few have generated controversy. Some are substantial in their scope, though many fund pilot programs or studies, or enact grants for which funding will expire within years. The House is expected to finish its opioids work this week. Here’s a look at some of the most impactful bills, and which proposals or policy ideas didn’t make the cut.”
  o Trump’s $15B cutbacks bill fails first Senate test. “The Senate narrowly rejected an attempt to call up the Trump administration’s proposal to cancel billions of dollars from programs like the Children’s Health Insurance Program, dealing a potentially fatal blow to the White House’s first major cost-cutting effort. The procedural vote to tee up President Donald Trump’s $15 billion cutbacks package for floor consideration failed 48-50 Wednesday afternoon.”
    ▪ Read more: https://www.politico.com/story/2018/06/20/trumps-cutbacks-bill-fails-first-senate-test-639213
Dems, health groups demand immigrant children be quickly reunited with families. “Democrats and medical professionals on Thursday called for children separated from their families at the border to be immediately reunited to minimize any long-term harm to their mental and physical health. Trump’s executive order mandates that families crossing the border be detained together, but does not address the 2,300 children who have already been separated from their families.”


House overwhelmingly passes final opioid package. “The House on Friday overwhelmingly passed sweeping bipartisan opioid legislation, concluding the chamber’s two-week voteathon on dozens of bills to address the drug abuse epidemic. The measure combines more than 50 bills approved individually by the House focusing on expanding access to treatment, encouraging the development of alternative pain treatments and curbing the flow of illicit drugs into the U.S. It was passed 396-14, with 13 Republicans and one Democrat voting against the package.”

- Read more: https://www.politico.com/story/2018/06/22/house-passes-opioid-package-646274

Week Ahead

- House GOP 2019 budget calls for deep Medicare, Medicaid spending cuts. “House Republicans offered a budget proposal on Tuesday that would cut mandatory spending by $5.4 trillion over a decade, including $537 billion in cuts to Medicare and $1.5 trillion in cuts to Medicaid and other health programs. On Medicare, the budget would move towards a system of private health insurance plans competing with one other, rather than the current open-ended, government-provided Medicare system. On Medicaid, the budget would impose new caps that could lead to cuts in payments over time.”


- Congress’ move to leave Obamacare mostly intact may save law. “Congress killed off a key penalty in the 2010 health care law last year but left the rest of the law intact — and that might prove pivotal to a lawsuit in which the Justice Department and 20 Republican-led states argue that the law’s other major provisions must now be struck down. That’s because the federal courts will look at what Congress intended to accomplish regardless of what individual lawmakers wanted to do, according to a group of five law professors with deep experience in litigation over the health care law. Congress used the 2017 tax overhaul to nix the penalty for most Americans who don’t get health coverage starting next year while allowing other provisions to continue, such as those preventing insurance companies from denying coverage or charging more because of a consumer’s pre-existing condition.”

- **Senate panel schedules hearing on Trump VA pick.** “President Trump’s nominee to lead the Department of Veterans Affairs (VA) will get a Senate confirmation hearing next week. The Senate Veterans Affairs Committee will take up the nomination of Robert Wilkie on June 27, the committee announced Wednesday. Wilkie, who served as acting VA secretary until he stepped down after being nominated for secretary, is a Washington insider with years of administrative experience who has previously worked on Capitol Hill as well as in the Pentagon for two presidents.”

- **Appropriators postpone Labor markup.** “House appropriators on Tuesday delayed action on the Labor-HHS-Education funding bill amid a growing backlash over the Trump administration’s family separation policy (in which detained children are placed temporarily in HHS custody). The hearing was postponed due to ‘multiple scheduling conflicts,’ POLITICO’s Sarah Ferris reports. But the State-Foreign Operations bill was still on for a markup Tuesday night, raising questions about whether the excuse was a legitimate one. The Labor-HHS-Education markup was rescheduled for June 26 at 10 a.m.”

- **Azar to face Senate next week.** “Secretary of Health and Human Services Alex Azar will face the Senate Finance Committee on Tuesday. The hearing is supposed to be about drug prices, but Azar is sure to also be pressed on the fate of over 2,000 migrant children in his department's care who the government separated from their parents. President Trump drug pricing plan, the scheduled topic of the hearing, could also provide some fireworks. Democrats have consistently said that the plan is far too soft on drug companies. Azar has been trying to defend the plan, arguing that he is serious about bringing down prices.”

### Regulatory and Administration Update

- **Trump administration rule could stop public reporting of hospital infections despite death toll.** “Federal health regulators will have to stop releasing data on hospital infections – which affect one in 25 hospital patients every day – under a proposal set to take effect in November, according to an analysis by patient safety advocates. The Centers for Medicare and Medicaid Services’ (CMS) plan, part of a complex 500-page proposed rule, could halt the public disclosure of the ‘super bug’ MRSA, post-operative sepsis and surgical site infections, as well as accidents and injuries ranging from bedsores to respiratory failure after surgery.”
• **Trump administration finalizes rule on health plans.** “The Trump administration on Tuesday finalized a rule expanding the availability of alternative insurance plans that do not meet the 2010 health care law’s requirements despite objections from consumer advocates and the industry. The rule will extend so-called association health plans, which allow insurance companies to skirt benefit requirements and other parts of the 2010 law. President Donald Trump heralded the new rule in a speech Tuesday to the National Federation of Independent Business trade group, or NFIB.”

• **Bipartisan group of governors denounces Trump move on preexisting conditions.** “A bipartisan group of governors on Monday called on the Trump administration to reverse its decision to argue in court that ObamaCare’s pre-existing condition protections should be overturned. Congressional Democrats have been attacking Republicans for the Trump administration’s filing in court earlier this month calling for ObamaCare’s pre-existing condition protections to be overturned, seeking to leverage the issue for the midterm elections.”

• **White House releases sweeping proposal to reorganize government.** “The White House on Thursday unveiled a sweeping plan to reorganize how the federal government is structured, including controversial proposals to impose work requirements on assistance programs. The plan touches a wide range of agencies, but one of its main proposals is to move the food stamp program, officially known as SNAP, out of the Department of Agriculture and into the Department of Health and Human Services. That department would then be renamed the Department of Health and Public Welfare.”

### Articles of Interest

• **Nurse staffing ratios to hit the ballot in Massachusetts.** “The Patient Safety Act, which seeks to impose limits on the number of patients assigned to a nurse at one time, will go before voters in the fall. Will Massachusetts follow in California’s footsteps and establish limits on the number of patients a nurse can care for at one time? Bay State voters will have the chance to make that decision in November, when the Patient Safety Act appears as a ballot measure. On Monday, the Supreme Judicial Court rejected the challenge brought by the Coalition to Protect Patient Safety, a hospital-backed group that opposed the ballot measure.”
• **Controversial researcher’s diabetes vaccine causes improvement in small study.** “An experimental therapy for type 1 diabetes, widely derided by mainstream diabetes researchers, lowered blood sugar levels to near normal, a small, ongoing trial found. Patients in the trial, whose blood sugar levels have remained near normal for five to eight years, take about one-third less insulin than they did before, reducing their risk of hypoglycemia, in which insulin lowers blood sugar to dangerously low levels. The experimental treatment, a decades-old generic vaccine for tuberculosis called bacillus Calmette-Guérin (BCG), seems to alter both cellular metabolism and the immune system, said Dr. Denise Faustman of Massachusetts General Hospital, senior author of the study published Thursday in npj Vaccines. ‘This cheap, old vaccine is lowering blood sugar to levels never achieved before,’ she said.”
  

• **Rural America needs help solving its growing obesity crisis.** “People living in rural America are more likely to suffer from obesity than those living in and near cities. And while there are a number of reasons for this, public health experts in the world’s largest economy say there aren’t enough programs being deployed to help people overcome the problem. The finding, presented in a pair of newly published studies carried out by researchers at the US Centers for Disease Control and Prevention, raises more questions than it does offer answers. To be sure, these are not the first studies to identify a disparity in obesity rates between people living in cities with more than a million people and more sparsely populated rural areas. They add to a growing body of evidence showing as much, increasing pressure on the public health community to figure out why the disparity exists and how to best go about solving the problem.”
  

• **Study: Almost half of diabetics skip care because of high cost.** “Almost half of people with diabetes have temporarily gone without treatment because they couldn’t afford it. According to a new survey by UpWell Health, True Cost of Diabetes, 45 percent of diabetics have skipped care because of affordability issues. A similar number, 43 percent, paid up to $1,000 out of pocket in the past year for treating complications related to the condition. Sixteen percent paid $1,000 to $5,000. The American Diabetes Association recently reported that the average diabetic incurs about $9,601 in diabetes-related medical expenses per year. Recently, insulin prices have skyrocketed. According to CBS News, the cost of insulin from two manufacturers rose almost 8 percent last year, to more than $275, and some patients’ costs have jumped from $300 to almost $1,000 in the last year.”
  

• **Medicaid expansion helps low-income patients get on transplant waitlist before dialysis.** “In states that expanded Medicaid under the Affordable Care Act to cover more low-income individuals, there was an increase in the number of Medicaid beneficiaries who were preemptively waitlisted to receive a kidney transplant. Medicaid
expansion was associated with greater gains racial and ethnic minorities in being listed pre-emptively on the transplant waitlist compared with whites.”
  ○ Read more: https://www.eurekalert.org/pub_releases/2018-06/asomeh061418.php

- **Diabetes defeated by diet: How new fresh-food prescriptions are beating pricey drugs.** “Spending on diabetes drugs in the U.S. reached $53.7 billion last year, more than double what it was in 2013. Roughly 100 million Americans have diabetes or prediabetes. The Fresh Food Farmacy program, being tested by Geisinger Health System in Pennsylvania, which includes education and free nutritious meals, can lower diabetes treatment costs by 80 percent. The high-fat, low-carbohydrate ketogenic diet is being used by new health-care start-up Virta Health, which aims to treat 100 million patients by 2025.”

- **CVS Health will now deliver your prescriptions to your home.** “CVS Health will make prescription deliveries nationwide to accommodate the heightened expectations of convenience from consumers. The nation's second-largest drugstore chain says it also will make home deliveries of other items, like allergy medicines, vitamins or household products. The service will cost $4.99 for deliveries made in one or two days. The drugstore chain said Tuesday that it's expanding same-day deliveries, for a higher fee, to Boston, Miami, Philadelphia, San Francisco and Washington, DC. It began those deliveries in New York late last year.”
  ○ Read more: https://abcnews.go.com/Business/wireStory/cvs-health-now-deliver-prescriptions-home-55998401

- **Head of new U.S. corporate health plan cites surgery as biggest cost.** “Dr. Atul Gawande, a surgeon who was named this week to head the company being formed by Amazon, Berkshire Hathaway and JPMorgan Chase to trim employee healthcare costs, on Thursday cited surgery as the single biggest U.S. healthcare cost and said there are ways to both cut costs and improve patient care. Speaking in San Diego at the annual meeting of America’s Health Insurance Plans, a health insurance trade association, Gawande also said that end-of-life care needs to take into account the wishes of patients, something which he said is now sorely lacking.”