American Nephrology Nurses Association

Weekly Capitol Hill Update – Monday, August 28, 2017

Congressional Schedule

Senate
• Senate out until after August recess.

House
• House out until after August recess.

Legislative Update

• Week in Review

  o Kasich: Bipartisan healthcare plan could come in a week. “Ohio Gov. John Kasich (R) and Colorado Gov. John Hickenlooper (D) are working on a bipartisan proposal to stabilize ObamaCare that they say could be unveiled as soon as a week from now. “We’re getting very close,” Kasich said in a joint interview with Hickenlooper on Colorado Public Radio. “I just talked to my guys today, and men and women who are working on this with John’s people, and we think we’ll have some specifics here. John, I actually think we could have it within a week.” Kasich and Hickenlooper, members of opposing parties, have been doing a series of interviews calling for a bipartisan approach on healthcare to stabilize insurance markets.”

  o Health Insurers Enter Fray in Drug Price Fight. “Health insurers are pushing back against a recent report that accuses them of denying some patients coverage for medical products and procedures, alleging it is part of a campaign by the pharmaceutical industry to distract the public from rising drug prices. America’s Health Insurance Plans, the nation’s largest trade group for medical insurers, reacted quickly to a study released last week that stated that as many as 24 percent of insured patients with chronic illnesses have been denied coverage for prescribed treatments.”
    ▪ To read more: https://morningconsult.com/2017/08/24/health-insurers-enter-fray-drug-price-fight/
• **Week Ahead**

  o **What could happen next on ACA taxes.** “Although the GOP’s plan to repeal the Affordable Care Act industry taxes died with the party's health care bill, it's conventional wisdom that some of the taxes will still be delayed. But there's no plan to do so yet. Lobbying campaigns to repeal or delay the health insurance tax and the medical device tax are ramping up, yet there's no clear vehicle for Congress to take action. Well-wired lobbyists and Hill aides say the appetite for doing anything major on health care isn't really there. "It is a have-to-get-done that's really hard to get done," said one lobbyist.”
    - To read more: [https://www.axios.com/what-could-happen-next-on-aca-taxes-2477023149.html](https://www.axios.com/what-could-happen-next-on-aca-taxes-2477023149.html)

  o **Five governors to testify at hearing on bipartisan healthcare bill.** “Five governors will testify in front of the Senate Health Committee next month on ways to fix ObamaCare. Govs. Charlie Baker (R-Mass.), Steve Bullock (D-Mont.), Bill Haslam (R-Tenn.), Gary Herbert (R-Utah) and John Hickenlooper (D-Colo.) will testify at a hearing on Sept. 7. State insurance commissioners will testify Sept. 6.”

  o **Senate panel plans 2 hearings on girding health insurance.** “The Senate health committee will hold two hearings early next month on how the nation's individual health insurance marketplaces can be stabilized, as party leaders grasp for a fresh path following the collapse of the Republican effort to repeal and replace much of former President Barack Obama's health care law. GOP and Democratic leaders are exploring whether they can craft a bipartisan but limited bill aimed at curbing rising premiums for people who buy their own insurance. In many markets, consumers are seeing steeply rising premiums and fewer insurers willing to sell policies. A Sept. 6 hearing will feature state insurance commissioners. The next day's witnesses will be governors. Both groups will be bipartisan, but aides said the names will be released later.”

  o **Congress facing deadline to renew healthcare for children.** “Congress is approaching a healthcare deadline with enormous stakes for millions of people — and this time it isn't about ObamaCare. Federal funding for 9 million low- and middle-income children is set to expire at the end of September, setting up a crucial deadline for a Congress already grappling with other high-stakes battle. The looming deadline for the Children's Health Insurance Program has been overshadowed by the GOP effort to repeal ObamaCare, and lawmakers left town for the summer without addressing the issue.”
Regulatory and Administration Update

- **Medicare and Medicaid Programs: End Stage Renal Disease Prospective Payment System.** “This rule proposes to update and make revisions to the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) for calendar year (CY) 2018, as well as to update the payment rate for renal dialysis services furnished by an ESRD facility to individuals with acute kidney injury (AKI). This rule also proposes to set forth requirements for the ESRD Quality Incentive Program (QIP), including for payment years (PYs) 2019 through 2021.”
  - ANNA will be submitting comments on the proposed updates and revisions.

Articles of Interest

- **How many nurses does it take to change a patient's blood?** “One in seven Americans suffers from chronic kidney disease, usually as a toxic byproduct of diabetes or high blood pressure. Almost half a million people across the country, including more than 60,000 in California, have conditions so severe that they require dialysis three times a week or a new kidney to stay alive. Caring for each of those patients costs a whopping $89,000 a year on average, most of which is paid by taxpayers through Medicare and Medicaid. The rising demand for dialysis has led to a boom in outpatient clinics that specialize in it. Two companies in particular — DaVita, which operates 286 dialysis centers in California, and Fresenius Medical Care, which operates 127 — have captured 70% of the market nationally, turning the decline in kidney health into billions of dollars in annual profits. Those centers and their profits are now the subject of a pitched battle in Sacramento over proposals to supplement federal regulations on the centers with new state requirements. Unfortunately, the proposals would raise the cost of dialysis without necessarily improving it.”

- **Missed nursing care due to low nurse staffing increases patient mortality.** “Failure to deliver complete nursing care explains why hospitals with lower registered nursing (RN) staff levels have a higher risk of patient death, a new University of Southampton study has shown. Jane Ball, Principal Research Fellow at the University of Southampton, who led the study, says the results published in the International Journal of Nursing Studies reveal that care left undone due to lack of time is the "missing link" in understanding variation in mortality rates in hospitals.”
  - To read more: [https://www.eurekalert.org/pub_releases/2017-08/uos-mnc082417.php](https://www.eurekalert.org/pub_releases/2017-08/uos-mnc082417.php)

- **Nurses Face More Violence Than Most.** “Nurses have to deal with physical violence and emotional abuse on a daily basis, and their advocates are becoming more vocal about this pressing issue, the Chicago Tribune reports. The Tribune cites research from the U.S.
Bureau of Labor Statistics showing that hospital employees are the target of violence at work at a much higher rate than workers in all other private fields. And the nurses interviewed for the story say the issue is worsening. Nurses are often in high-stress, emotional situations and are on the front lines during times of crisis, which puts them at risk. Nursing representatives say that increased staffing and training would help, the Tribune says.”


- **Insurer fills last hole in health law marketplaces for 2018.** “The lone U.S. county still at risk of leaving shoppers with no choices next year on the federal health law’s insurance marketplace has landed an insurer. Ohio-based insurer CareSource will step up to provide coverage in Paulding County, Ohio, in 2018, the company and the state Department of Insurance announced Thursday. The most recent national analysis by the Kaiser Family Foundation identified Paulding, just south of Toledo, as the final county still at risk of lacking an insurer when 2018 signups begin Nov. 1. About 10 million people, including 11,000 Ohio residents, currently are served through HealthCare.gov and its state counterparts, a system created under the Affordable Care Act.”

- To read more: [http://abcnews.go.com/Health/wireStory/apnewsbreak-us-county-insurer-health-exchange-49398391](http://abcnews.go.com/Health/wireStory/apnewsbreak-us-county-insurer-health-exchange-49398391)