American Nephrology Nurses Association

Weekly Capitol Hill Update – Monday, August 7, 2017

Congressional Schedule

Senate
• Senate out until after August recess.

House
• House out until after August recess.

Legislative Updates

• Week in Review:
  o *Kidney Community Applauds Senate Introduction of Bipartisan Legislation to Improve and Expand Access to Kidney Care.* “Kidney Care Partners (KCP) – the nation’s leading coalition of patient advocates, kidney disease professionals, dialysis care providers, researchers and manufacturers – today applauded U.S. Senators Pat Roberts (R-KS), Mark Warner (D-VA), Mike Crapo (R-ID), Ben Cardin (D-MD) and Todd Young (R-IN) for introducing S. 1729, legislation that would ease barriers to care for dialysis patients.”
  o *GOP states move to cut Medicaid.* “Republican governors are working with the Trump administration to do something Congress couldn’t accomplish: fundamentally alter their state Medicaid programs. At least six states with GOP governors – Arkansas, Kentucky, Arizona, Maine, Wisconsin and Indiana – have already drafted plans meant to introduce new rules people would have to meet to be eligible for Medicaid, which provides healthcare to low-income Americans and those with certain disabilities. Some want to add work requirements or introduce drug testing for recipients. Others want to raise premium prices. The Trump administration has to approve the plans. Some approvals could come in weeks.”
- **Finance Committee announces healthcare hearing in September.** “Senate Finance Committee Chairman Orrin Hatch (R-Utah) announced Thursday that the panel will hold a healthcare hearing in September, in the wake of a failed vote on repeal of ObamaCare. The hearing will be a chance for members of both parties to discuss the healthcare law, and it comes amid calls for a return to regular order and the committee process. The Health Committee is expected to take the lead role in crafting a bipartisan bill aimed at stabilizing the ObamaCare marketplaces, but the announcement indicates that the Finance Committee, which shares jurisdiction on healthcare, will also discuss the issue.”

- **New bipartisan Obamacare push faces steep climb.** “There’s never been a major bipartisan Obamacare bill, and the path to passing one now — after the death of Senate Republicans' repeal effort — is steep. Lamar Alexander (R-Tenn.), chairman of the Senate Committee on Health, Education, Labor and Pensions, and ranking Democrat Patty Murray of Washington are up against both time and history in their race to stabilize the shaky Obamacare markets and solidify their status as the chamber’s top deal-makers. The pair has just a few weeks before a self-imposed deadline to bridge deep partisan divisions over the health care law and pass a bill by the end of September, when insurance companies make their final decisions on 2018 Obamacare plans. And that’s assuming they can first unite their own committee — a patchwork of political interests that includes iconoclastic conservative Rand Paul (R-Ky.), moderate Republicans Susan Collins of Maine and Lisa Murkowski of Alaska and liberal firebrands Bernie Sanders (I-Vt.) and Elizabeth Warren (D-Mass.).”

- **Senate Passes ‘Right-to-Try’ Bill, Reauthorizes FDA User Fees.** “The Senate on Thursday voted unanimously to pass a bill that would make it easier for terminally ill patients to access drugs that have not been approved by the federal government. The “right-to-try” legislation would prohibit the government from denying such patients access to experimental drugs that are still being reviewed by the Food and Drug Administration and have completed a preliminary trial. The FDA would be barred from overruling the 37 states that have “right-to-try” laws on the books.”
  - To read more: [https://morningconsult.com/2017/08/03/senate-passes-right-try-bill-reauthorizes-fda-user-fees/](https://morningconsult.com/2017/08/03/senate-passes-right-try-bill-reauthorizes-fda-user-fees/)

- **Week Ahead:**

  - **Republicans leave town with no clear path on Obamacare.** “Republicans are leaving Washington Thursday for a month of recess with no clear direction on what they’ll do next on Obamacare. Senate leaders want to just drop the issue altogether. Conservatives say they’re still fighting for repeal. Moderates want to launch a bipartisan effort to fix the shaky Obamacare system. The reality is that, after seven years of unity on repealing Obamacare, Republicans are rudderless on how to talk about or address the defining domestic policy issue of nearly the past decade for
their party, and they have no clear plans despite holding all the levers of power in Washington. Now, they face a month away from the Capitol, answering to their home-state voters about their lack of progress.”


**Regulatory and Administration Updates**

- *The Medicare Access and CHIP Reauthorization Act: Implications for Nephrology.* “In response to rising Medicare costs, Congress passed the Medicare Access and Children’s Health Insurance Program Reauthorization Act in 2015. The law fundamentally changes the way that health care providers are reimbursed by implementing a pay for performance system that rewards providers for high-value health care. As of the beginning of 2017, providers will be evaluated on quality and in later years, cost as well. High-quality, cost-efficient providers will receive bonuses in reimbursement, and low-quality, expensive providers will be penalized financially. The Centers for Medicare and Medicaid Services will evaluate provider costs through episodes of care, which are currently in development, and alternative payment models. Although dialysis-specific alternative payment models have already been implemented, current models do not address the transition of patients from CKD to ESRD, a particularly vulnerable time for patients. Nephrology providers have an opportunity to develop cost-efficient ways to care for patients during these transitions. Efforts like these, if successful, will help ensure that Medicare remains solvent in coming years.”
  
  - To read more: [http://jasn.asnjournals.org/content/early/2017/07/27/ASN.2017040407.abstract](http://jasn.asnjournals.org/content/early/2017/07/27/ASN.2017040407.abstract)

- **CMS releases FY 2018 inpatient PPS final rule.** “The Centers for Medicare & Medicaid Services (CMS) issued the fiscal year 2018 Medicare Inpatient Prospective Payment System and Long-Term Care Hospital Prospective Payment System final rule, which updates 2018 Medicare payment and policies when patients are discharged from hospitals. The final rule relieves regulatory burdens for providers, supports the patient-doctor relationship in healthcare, and promotes transparency, flexibility, and innovation in the delivery of care for Medicare patients.”
  
  - To read more: [https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2017-Press-releases-items/2017-08-02.html](https://www.cms.gov/Newsroom/MediaReleaseDatabase/Press-releases/2017-Press-releases-items/2017-08-02.html)

**Articles of Interest**

- *Why 2018 could lead to more Medicaid expansion.* “It’s never too early to start thinking about the upcoming 2018 elections. And while a lot of the focus so far has been on the House, a handful of hotly contested gubernatorial races could have higher stakes for health care — specifically, for the Affordable Care Act’s Medicaid expansion. A raft of open governors’ races next year will give Democrats a chance to replace some of the
most stridently anti-expansion governors in the country — and, if they win even a few of those races, the chance to cover millions of currently uninsured people even as the Trump administration drags its heels on so much of the ACA.”

- To read more: https://www.axios.com/medicaid-expansion-state-governors-races-2468829964.html