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EXECUTIVE AND CONGRESSIONAL NEWS

- On Jan. 21, 2015, the Senate Veterans’ Affairs Committee passed unanimously a bill that would improve mental health care and suicide prevention resources for American service members.

The unanimous, bipartisan vote came during the committee’s first official meeting in the 114th Congress and also the first meeting with Senator Johnny Isakson, R-Ga., serving as chairman.

The Clay Hunt Suicide Prevention for American Veterans Act, which passed the House of Representatives on Jan. 12, 2015, will now proceed to the full Senate floor for consideration.

The Clay Hunt bill would require a third-party evaluation of existing suicide prevention programs at the Department of Defense and the Department of Veterans Affairs to gauge their effectiveness and make recommendations for consolidation, elimination or improvement.

The bill provides for better access to information on mental health by improving the exchange of training, best practices, and other resources among the VA and non-profit mental health organizations to enhance collaboration of suicide prevention efforts, as well as including a new website that offers veterans information on mental health care services. It creates a pilot loan repayment program for VA psychiatrists. The Clay Hunt Act also creates a community outreach pilot program to help veterans transition from active duty service and extends the ability for certain combat veterans to enroll in the Veterans Health Administration for one year.

The legislation is named for Clay Hunt, a Marine veteran who committed suicide in March 2011 at the age of 28. Clay enlisted in the Marine Corps in May 2005 and deployed to Anbar Province, near Fallujah, in January 2007. He was shot in the wrist by a sniper’s bullet that barely missed his head, earning him a Purple Heart. Clay recuperated at Twenty Nine Palms, Calif., and then graduated from Marine Corps Scout Sniper School in March 2008. He redeployed to southern Afghanistan a few weeks later. His unit returned in late October of 2008 and he was honorably
discharged from the Marines in April 2009. After returning home, Clay struggled with Post-traumatic Stress Disorder for many years as he was provided care at his local VA hospital before taking his own life.

MILITARY HEALTH CARE NEWS

- **Suicides among active duty members of the U.S. military decreased in 2013 from the previous year, while those among the reserve components were slightly higher, according to a Defense Department report released on Jan. 16, 2015.**

  The 2013 DoD Suicide Event Annual Report lists 259 suicides among active component service members and 220 such deaths among members of the reserves and National Guard. According to the report, failed intimate relationships were the most prevalent stress factor precipitating suicide, with most of those taking their own lives married. Financial or workplace difficulties were also found to be a key factor. Young, Caucasian males -- including junior enlisted troops -- were found to be most likely to turn to suicide.

  The report found that just over 66 percent of those who committed suicide had deployed one or more times.

  More than a dozen suicide prevention programs are available to service members, veterans and their families, and each of the military branches conducts suicide prevention awareness training. In addition, DoD as a whole has increased the number of counselors available.

  The Defense Department is also partnered with Veterans Affairs to promote the Veterans/Military Crisis Line, a confidential counseling service available around the clock at 800-273-8255. Also offered is Vets4Warriors.com, which provides confidential peer support to service members and their families.

- **The Military Times reports that while NDAA 2015, signed by President Obama in December, includes a provision requiring TRICARE to pay for costs related to breast-feeding, the Defense Health Agency (DHA) must first develop a policy addressing the details of TRICARE coverage before beneficiaries will have these costs covered.**

  Under a provision of the 2015 Defense Authorization Act, TRICARE will cover the cost of lactation support, supplies and counseling, but until the policy is approved, these services and supplies are still not covered.

  The legislation fixes a discrepancy between coverage for breast-feeding expenses in the Affordable Care Act and those of TRICARE, which currently pays only for hospital-quality breast pumps for use in medical facilities and under certain conditions for premature infants.

  The Affordable Care Act requires insurers to cover the full cost of renting or providing pumps as well as lactation counseling and support.

  DHA recommends that new parents save receipts for services and supplies in case the new policy allows for reimbursement.

  Roughly 100,000 babies are born to TRICARE-eligible families each year, according to the Defense Department.

VETERANS AFFAIRS NEWS
The Department of Veterans Affairs posted a statement about the Denver replacement VA Medical Center project, which was halted when the contractor Kiewit-Turner said it was walking away from the project because of cost overruns in December and the U.S. Civilian Board of Contract Appeals agreed with Kiewit-Turner that the VA failed to meet its contractual obligation to manage the Denver VA Medical Replacement Project.

Since then the Army Corps of Engineers has been brought in to advise on the current construction and on the overall management of this project as part of the transition to negotiate a long-term contract and manage the project until completion.

In addition, the VA is also convening Administrative Investigation Board to review all aspects of the Denver project to determine the facts that led to the current situation and gather evidence of any misconduct or mismanagement that contributed to this unacceptable outcome.

Effective immediately, the Department's Construction and Facility Management organization will report to the Deputy Secretary through the Office of Management.

To read the statement, please visit:
http://www.va.gov/opa/pressrel/pressrelease.cfm?id=2671

The Military Times reports that during a hearing on Jan. 22, members of the House Veterans' Affairs Committee renewed their questions about VA's benefits system and growing appeals workload, which reports show the average wait of more than 3.5 years for appeals to be completed (an increase of 10 percent).

VA focused mainly on the backlog of first-time benefits requests in recent years, after that backlog grew to more than 610,000 cases in 2013. The total is around 250,000 cases today, but VA's goal of reaching zero by the end of 2015 doesn't look likely under the current system.

During the hearing, Deputy Undersecretary for VBA Field Operations Beth McCoy testified that while the number of pending appeals cases has grown steadily, that's a function of the rising total of veterans' claims, not an overwhelmed system.

According to McCoy, the rate of claims appeals of claims has remained steady in recent years, as has the rate of new awards for appealed cases. More than 70 percent of veterans who appeal a benefits case are already receiving some payout from the department.

Rep. Ralph Abraham, (R-La.) chair of the House Veterans' Affairs Committee's disability assistance panel, said reports of veterans waiting up to a decade for a final decision on their appeals are "alarming and unacceptable" and risk causing veterans to lose faith in the system.

"These claims need to be adjudicated ... and the system needs to be thorough, swift and fair," he said.

GENERAL HEALTH CARE NEWS

Marilyn Tavenner announced that she is resigning from her position as administrator of the Centers for Medicare and Medicaid Services next month.

Tavenner, who's been with CMS since 2010, played a major role in the implementation of President Barack Obama's health-care law. Her agency wrote many of the new rules putting the Affordable Care Act in place and oversees the new health insurance exchanges created by the law.

Tavenner, 63, had been acting administrator of CMS since late 2011, and she was confirmed by the Senate, 91-7, in May 2013 — making her the first permanent head of the massive agency in
about six years. CMS oversees insurance coverage for about one in three Americans, making it the largest health-care payer in the country and an influential force in the health-care system.

CMS principal deputy administrator Andy Slavitt will become acting administrator when Tavenner leaves at the end of February.

- The Centers for Medicare & Medicaid Services (CMS) added star ratings to the Dialysis Facility Compare (DFC) website.
  These ratings summarize performance data, making it easier for consumers to use the information on the website. These ratings also spotlight excellence in health care quality. In addition to posting the star ratings, CMS updated data on individual DFC quality measures to reflect the most recent data for the existing measures.
  DFC joined Nursing Home Compare and Physician Compare in expanding the use of star ratings on CMS websites. The DFC rating gives a one to five-star rating based on information about the quality of care and services that a dialysis facility provides. Currently, nine DFC quality measures are being used collectively to comprise the DFC star ratings. In the future, CMS will add more measures.
  In related news, CMS plans to add the Standardized Readmission Ratio (SRR) for dialysis facilities to the publicly reported quality outcome measures available on the Compare website. SRR is a measure of care coordination. SRR is not included in DFC's star rating at this time.
  DFC quality measure data is either updated quarterly or annually. CMS plans to update the DFC's star rating on an annual basis beginning in October 2015.
  For more information on Dialysis Facility Compare, please visit: http://www.medicare.gov/dialysisfacilitycompare/#search.

REPORTS/POLICIES

- There were no new reports published this week.

HILL HEARINGS

- The Senate Armed Services Committee will hold a hearing on Jan. 28, 2015, to examine the impact of the "Budget Control Act of 2011" and sequestration on national security.
- The House Veterans Affairs Committee will hold a hearing on Jan. 28, 2015, to examine Transition Assistance Program (TAP)
- The House Armed Services Committee will hold a hearing on Jan. 28, 2015, to examine the Department of Defense’s ability to respond to the pace of technological change.
- The House Veterans Affairs Committee will hold a hearing on Feb. 28, 2015, to examine the quality and cost of VA health care.
- The House and Senate Veterans Affairs Committees will hold a joint hearing on Feb. 24, 2015.
to receive the legislative presentation of the Disabled American Veterans.

- The House and Senate Veterans Affairs Committees will hold a joint hearing on **Feb. 25, 2015**, to receive the legislative presentation of The American Legion.
- The House and Senate Veterans Affairs Committees will hold a joint hearing on **March 4, 2015**, to receive Legislative Presentation of the Veterans of Foreign Wars.

**LEGISLATION**

- **H.R.398** (introduced Jan. 15, 2015): To provide for the development and dissemination of evidence-based best practices for health care professionals to recognize victims of a severe form of trafficking and respond to such individuals appropriately, and for other purposes was referred to the House Committee on Energy and Commerce. Sponsor: Representative Renee L. Ellmers [NC-2]
- **H.R.420** (introduced Jan. 20, 2015): To establish a certification process for opting out of the individual health insurance mandate was referred to the House Committee on Ways and Means. Sponsor: Representative David Schweikert [AZ-6]
- **H.R.421** (introduced Jan. 20, 2015): To amend title 38, United States Code, to improve the mental health treatment provided by the Secretary of Veterans Affairs to veterans who served in classified missions. Sponsor: Representative Kyrsten Sinema [AZ-9]
- **H.R.440** (introduced Jan. 21, 2015): To ensure that long-term unemployed individuals are not taken into account for purposes of the employer health care coverage mandate was referred to the House Committee on Ways and Means. Sponsor: Representative Charles W. Boustany, Jr. [LA-3]
- **H.R.453** (introduced Jan. 21, 2015): To authorize the Secretary of Health and Human Services, acting through the Administrator of the Health Resources and Services Administration, to award grants on a competitive basis to public and private entities to provide qualified sexual risk avoidance education to youth and their parents was referred to the House Committee on Energy and Commerce. Sponsor: Representative Randy Hultgren [IL-14]
- **S.183** (introduced Jan. 16, 2015): A bill to repeal the annual fee on health insurance providers enacted by the Patient Protection and Affordable Care Act was referred to the Committee on Finance. Sponsor: Senator John Barrasso [WY]
- **S.185** (introduced Jan. 16, 2015): A bill to create a limited population pathway for approval of certain antibacterial drugs was referred to the Committee on Health, Education, Labor, and Pensions. Sponsor: Senator Orrin G. Hatch [UT]
- **S.205** (introduced Jan. 21, 2015): A bill to provide for the development and dissemination of evidence-based best practices for health care professionals to recognize victims of a severe form of trafficking and respond to such individuals appropriately, and for other purposes was referred to the Committee on Health, Education, Labor, and Pensions. Sponsor: Senator Bill Cassidy, Bill [LA]
- **S.207** (introduced Jan. 21, 2015): A bill to require the Secretary of Veterans Affairs to use existing authorities to furnish health care at non-Department of Veterans Affairs facilities to veterans who live more than 40 miles driving distance from the closest medical facility of the Department that furnishes the care sought by the veteran, and for other purposes was referred to...
the Committee on Veterans' Affairs.
Sponsor: Senator Jerry Moran [KS]

- **S.216** (introduced Jan. 21, 2015): A bill to establish the National Prostate Cancer Council for improved screening, early detection, assessment, and monitoring of prostate cancer, and to direct the development and implementation of a national strategic plan to expedite advancement of diagnostic tools and the transfer of such tools to patients was referred to the Committee on Health, Education, Labor, and Pensions.
  Sponsor: Senator Jeff Sessions [AL]

- **S.218** (introduced Jan. 21, 2015): A bill to facilitate emergency medical services personnel training and certification curriculums for veterans was referred to the Committee on Health, Education, Labor, and Pensions.
  Sponsor: Senator Michael B. Enzi [WY]

- **S.221** (introduced Jan. 21, 2015): A bill to amend the Patient Protection and Affordable Care Act to authorize additional funding for the pregnancy assistance fund was referred to the Committee on Health, Education, Labor, and Pensions.
  Sponsor: Senator Robert P. Casey, Jr. [PA]

- **S.222** (introduced Jan. 21, 2015): A bill to establish the National Prostate Cancer Council for improved screening, early detection, assessment, and monitoring of prostate cancer, and to direct the development and implementation of a national strategic plan to expedite advancement of diagnostic tools and the transfer of such tools to patients was referred to the Committee on Health, Education, Labor, and Pensions.
  Sponsor: Sen Boxer, Barbara [CA]

### MEETINGS

- The HIMSS Annual Conference and Exhibition will be held on **April 12-16, 2015**, in Chicago, Ill. [http://www.himssconference.org/](http://www.himssconference.org/)
- The Heroes of Military Medicine Awards will be held on **May 7, 2015**, in Washington, DC. [http://www.hjfcp3.org/heroes-dinner](http://www.hjfcp3.org/heroes-dinner)
- **2015 AMSUS Annual Continuing Education Meeting** - The Society Of The Federal Health Professionals will be held on **Dec. 1-4, 2015**, in San Antonio, Texas. [http://amsusmeetings.org/annual-meeting/](http://amsusmeetings.org/annual-meeting/)

If you need further information on any item in the *Federal Health Update*, please contact Kate
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