

Federal Health Update

JAN. 26, 2018

Welcome to Federal Health Update. This newsletter is a compilation of the latest news in the federal health care sector.

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ktheroux@federalhealthcarenews.com

EXECUTIVE AND CONGRESSIONAL NEWS

- **On Jan. 24, 2018, the Senate confirmed Alex Michael Azar II, to be the 24th Secretary of Health and Human Services.**

Most recently, Azar was chairman of Seraphim Strategies, LLC. Prior to this, he was president of Lilly USA, LLC, the largest affiliate of global biopharmaceutical leader Eli Lilly and Company, Azar served the as deputy secretary of the U.S. Department of Health and Human Services immediately after serving as its General Counsel, where the Senate confirmed him for both Presidential appointments by voice vote. He received his bachelor's degree from Dartmouth College and his juris doctorate from Yale University.

MILITARY HEALTH CARE NEWS

- **The Department of Defense and the Department of Veterans Affairs launched a web-based tool that will provide customized guidance to veterans who desire to upgrade or change the conditions of their military discharge.**

Over the years, some veterans have criticized the review process as daunting or difficult to understand. The issuance of supplemental guidance over the past few years, while helpful to many, has the side effect of creating multiple guidance documents that can be confusing to some. Furthermore, some veterans suffer from mental health or other conditions that make tasks

like these more difficult for them than for others.

This innovative tool simplifies and customizes the guidance. By answering a few short questions, veterans will know which board they need to go to, what form to fill out, any special guidance applicable to their case, where to send their application, and some helpful tips for appealing their discharge. Any veterans who believe their discharge was unjust, erroneous, or warrants an upgrade are encouraged to use this tool and then apply for review.

This tool can be found on Vets.gov at: <https://www.vets.gov/discharge-upgrade-instructions>. The link is also available on Military OneSource (<http://www.militaryonesource.mil/>) and each of the review board's websites (listed below). The link has also been forwarded to a number of veterans service organizations and military service organizations in order to spread the news to as many veterans as possible.

Below is contact information about the services review boards:

Air Force Board for Correction of Military Records

Website: <http://www.afpc.af.mil/Career-Management/Board-for-Correction-of-Military-Records/>

Phone: 240-612-5379

E-mail: usaf.pentagon.saf-mr.mbx.saf-mrbc@mail.mil

Air Force Discharge Review Board:

Website: <http://www.afpc.af.mil/Separation/Discharge-Review-Board/>

Phone: 240-612-0995

E-mail: usaf.pentagon.saf-mr.mbx.saf-mrb@mail.mil

Army Board for Correction of Military Records:

Website: <http://arba.army.pentagon.mil/>

E-mail: army.arbainquiry@mail.mil

Army Discharge Review Board:

Website: <http://arba.army.pentagon.mil/>

E-mail: army.arbainquiry@mail.mil

Navy Board for Correction of Naval Records:

Website: <http://www.secnav.navy.mil/mra/bcncr/Pages/home.aspx>

Phone: 703-607-6111

E-mail: BCNR_Application@navy.mil

Navy Discharge Review Board:

Website: <http://www.secnav.navy.mil/mra/CORB/Pages/NDRB/default.aspx>

Phone: 202-685-6600

E-mail: NDRB@navy.mil

- **TRICARE is requesting people take brief [survey about our TRICARE publications](#).**

[TRICARE publications](#) are resources for questions about TRICARE medical, dental and pharmacy benefits. A new search feature now on the [TRICARE Publications](#) page allows beneficiaries to quickly find the information needed to make informed decisions about their health care.

Your [feedback](#) is important!

VETERANS AFFAIRS NEWS

- **The U.S. Department of Veterans Affairs (VA) announced a collaboration between its**

National Center for PTSD and the nonprofit organization [PINK Concussions](#), encouraging women to donate their brains for the purpose of research of the effects of traumatic brain injury (TBI) and post-traumatic stress disorder (PTSD).

While there is postmortem brain tissue available for study of injury in men, there has been almost none for women. There is also a lack of research on Chronic Traumatic Encephalopathy, also known as CTE, in women. In all published literature on CTE, only two peer-reviewed journal articles (both published in the early 1990s) have focused on women.

Women veterans interested in participating in the brain bank may take the [PINK Concussions pledge](#). Though tissue donation may occur many years or decades from now, enrollment will allow researchers to learn as much as possible about the health of an enrolled female participant and how things may change over the years.

For more information about the effort, visit www.pinkconcussions.com/. For more information about the VA's National PTSD Brain Bank, visit www.research.va.gov/programs/tissue_banking/PTSD/default.cfm or call 800-762-6609.

- **The U.S. Department of Veterans Affairs (VA) and Department of Health and Human Services (HHS) Centers for Medicare and Medicaid Services (CMS) announced a partnership to share data, data analytics tools and best practices for identifying and preventing fraud, waste and abuse.**

This newest partnership enhances ongoing efforts between the country's two largest public-private health-care payment organizations to help America's Veterans by leveraging the gains made by CMS.

CMS continues to focus on reducing and eliminating fraud, waste and abuse in Medicare, and in 2010, it established the Center for Program Integrity to help with this work. CMS estimates that its program integrity activities saved Medicare operations \$17 billion in fiscal 2015. Other HHS combined efforts — including law enforcement — contributed to greater program savings.

VA plans to capitalize on the advancements in analytics CMS has made by concentrating on its use of advanced technology, statistics and data analytics to improve fraud detection and prevention efforts. Additionally, in November 2017, VA invited industry experts to provide information on the latest commercial sector tools and techniques to enhance VA's fraud detection capabilities. In April, VA will invite these industry experts to demonstrate their capabilities for detecting and preventing fraud, waste and abuse and recovering improper payments.

By using CMS' successes in its program integrity protocols, VA will be able to close existing gaps in its own claims payment process.

GENERAL HEALTH CARE NEWS

- **The Department of Health and Human Services (HHS), Office of the Chief Information Officer (OCIO) has awarded the second Next Generation Information Technology Services (NGITS) blanket purchase agreement (BPA) to ActioNet, CSRA, Leidos, NuAxis, Peraton (Harris IT), and SAIC.**

The BPA, with an estimated value of \$139 million, provides end-to-end lifecycle support for all current and future HHS production systems regardless of manufacturer or operating system. It covers major HHS information technology operational needs such as network and security operations; data center operations; and deployment, testing, and maintenance of software and systems. SAIC won the first task order on the BPA and will provide call center, service desk, and data center support for HHS staff divisions and operating divisions.

The new operations task order promises to improve customer experience by separating call center and service desk functions, thereby directing customer service requests to those with the required expertise, providing additional technical support options to customers, and shortening response times for users.

According to Steve Verber, director of operations for the Office of Information Technology Infrastructure and Operations (ITIO), "Implementing a dedicated call center will help us provide real benefit to our customers by creating a single interface for requesting any type of IT assistance. We will provide new options for customer interaction to include chat via the web and increase the availability of self-help options." In addition, Verber states, "Functionally aligned support queues will ensure that incidents are assigned to the most experienced support staff in any subject area."

HHS OCIO launched the NGITS program last year to provide improved support in IT service delivery, accountability, integration of new and emerging technologies, customer service, and performance measurement of information technology for the Office of the Secretary, its 22 staffing divisions, and more than 12,000 employees. In September 2017, the NGITS program awarded the first BPA in the area of application hosting. NGITS will award two more BPAs this year in engineering and program management integration.

The NGITS program offers an improved platform to leverage technology; manage standards, consistency, and activities across divisions; and allow for better services and transparency to HHS customers. "This award represents another great step forward in our efforts to provide shared services and cost-effective information technology support as a part of the HHS mission to improve the well-being of all Americans," states George Chambers, ITIO executive director.

- **According to the Centers for Disease Control and Prevention, influenza activity increased again in this week's FluView report.**

All U.S. states but Hawaii continue to report widespread flu activity and the number of states experiencing "high" influenza activity increased from 26 plus New York City to 32 states plus New York City and Puerto Rico. Indicators used to track influenza-like-illness (ILI) activity are similar to what was seen during the peak of the 2014-2015 season, a season of high severity. The overall hospitalization rate is high also, but still lower than the overall hospitalization rate reported during the same week of the 2014-2015 season. CDC also is reporting an additional 10 flu-related pediatric deaths, bringing the total number of flu-related pediatric deaths reported this season to 30 so far. Flu activity is likely to continue for several more weeks.

Influenza-like Illness State Activity Indicator Map: New York City, Puerto Rico and 32 states experienced high ILI activity (Alabama, Arizona, Arkansas, California, Florida, Georgia, Hawaii, Illinois, Indiana, Kansas, Kentucky, Louisiana, Maryland, Mississippi, Missouri, Nebraska, Nevada, New Jersey, New Mexico, New York, North Carolina, Ohio, Oklahoma, Oregon, South Carolina, South Dakota, Tennessee, Texas, Virginia, West Virginia, Wisconsin, and Wyoming). Nine states (Alaska, Colorado, Idaho, Iowa, Massachusetts, Minnesota, North Dakota, Pennsylvania, and Rhode Island) experienced moderate ILI activity. The District of Columbia and six states (Connecticut, Michigan, New Hampshire, Utah, Vermont, and Washington) experienced low ILI activity. Three states experienced minimal ILI activity (Delaware, Maine, and Montana).

Additional data, including data for previous seasons, can be found at <https://gis.cdc.gov/grasp/fluview/main.html>

REPORTS/POLICIES

- There were no relevant reports published this week.

HILL HEARINGS

- There are no health-related hearings scheduled next week.

LEGISLATION

- **H.R.1660** (introduced Jan. 21, 2018): Global Health Innovation Act of 2017 was referred to the Senate Committee on Foreign Relations. Sponsor: Representative Sires Albio. [D-NJ-8]
- **H.R.4855** (introduced Jan. 19, 2018): the SNAP Healthy Incentives Act of 2018 was referred to the House Committee on Agriculture. Sponsor: Representative Matt Cartwright [D-PA-17]

MEETINGS

- HIMSS 2018 Annual Conference will be held on **March 5-9, 2018**, in Las Vegas Nev. <http://www.himssconference.org/>
- 2018 Heroes of Military Medicine Awards Dinner will be held on **May 3, 2018**, in Washington, DC. <http://www.hjfc3.org/heroes-dinner/>
- The 8th Annual Traumatic Brain Injury Conference will be held on **May 16-17, 2018**, in Washington DC. <http://tbiconference.com/home/>

If you need further information on any item in the *Federal Health Update*, please contact Kate Theroux at (703) 447-3257 or by e-mail at katetheroux@federalhealthcarenews.com.