

# Federal Health Update

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

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## EXECUTIVE AND CONGRESSIONAL NEWS

- The House and Senate are in recess until Feb. 23, 2015.
- **Vice President Biden swore in Ashton B. Carter to be the next Secretary of Defense on Feb. 17.** To read Carter's Department of Defense biography, please visit: <http://www.defense.gov/bios/biographydetail.aspx?biographyid=186>

## MILITARY HEALTH CARE NEWS

- **The Department of Defense announced Air Force Maj. Gen. Mark A. Ediger has been nominated for appointment to the rank of lieutenant general and for assignment as surgeon general of the Air Force.** Ediger is currently serving as deputy surgeon general, Office of the Surgeon General, Headquarters U.S. Air Force, Falls Church, Virginia.
- **The *Military Times* reports that Military Compensation and Retirement Modernization Commission report cited the U.S. Family Health Plan (USFHP) as an arrangement that shows how the panel's Tricare Choice program could work.**

The USFHP serves 134,000 military family members, retirees and their dependents, using incentives and strategies to manage costs while providing optimal services. The HMO-like program manages frequent users of emergency rooms and high-risk patients to sponsoring call

centers staffed by physicians or nurse practitioners who offer treatment advice and make appointments. As a result, USFHP Alliance members have one-third fewer inpatient hospital days and 28 percent fewer emergency room visits than Tricare Prime enrollees, according to the report.

USFHP, available 16 states and the District of Columbia, had an overall member satisfaction rating in 2013 of 93 percent. Participating health care providers include Brighton Marine Health Center, Christus Health, Johns Hopkins Health Care, Martin's Point Health Care, Pacific Medical Centers and St. Vincent Catholic Medical Centers.

The program became part of the military health system in 1982 when Congress transferred ownership of some U.S. Public Health Service hospitals to the current organizations and allowed military beneficiaries to continue receiving care at the facilities.

- **TRICARE and Military OneSource are co-hosting a webinar to educate TRICARE beneficiaries about TRICARE Dental Options, with an emphasis on children's dental care.**

The webinar will take place on Feb. 23, 2015, from 12:00-1:00 p.m. EST. The featured speaker for this event is COL Gary (Chad) Martin, chief of the TRICARE Dental Care Office. COL Martin also serves as the Chief Military Consultant for Dental Public Health to the Air Force Surgeon General.

Registration is on a first-come, first-served basis and is limited due to system capacity. Sign up at <https://attendee.gotowebinar.com/register/1076046214903274241>. Participants must avoid sharing personal health information when asking a question.

## VETERANS AFFAIRS NEWS

- **The Washington Post reports that new DEA restrictions on narcotic painkillers are affecting veterans.**

The restrictions require veterans to return to the doctor every month to renew their prescription. With the well documented delays to get appointments and a number of veterans living far from VA health facilities, this new requirement is especially challenging for those with injuries sustained during the long wars in Iraq and Afghanistan.

The Centers for Disease Control and Prevention has identified addiction to narcotic painkillers as "the worst drug addiction epidemic in the country's history, killing more people than heroin and crack cocaine." The rules apply to "hydrocodone combination products," such as Vicodin.

The Department of Veterans Affairs reports that about 500,000 veterans are currently prescribed opioids today.

Gavin West, a clinical operations chief at VA, said there has been a systematic effort since autumn to contact veterans to explain the new rules, broader concerns about opioid use and alternative options for treatment. At the same time, he said, the agency is working to ensure that veterans get the access to medical care that's required.

To help patients adjust to the changes, Rollin Gallagher, VA's national director for pain management, said staff members are meeting personally with veterans. "There is the real anxiety of being in pain and losing control of that pain. We are aware of the fact that we need to pay attention to this," he said.

The agency recently set up a Choice Card program for veterans, which would allow those facing long wait lists or who live more than 40 miles away from a VA hospital to use private clinic visits. Veterans say the initiative is complicated and confusing. VA officials acknowledged this month

that veterans have been using this program at a lower rate than anticipated.

## GENERAL HEALTH CARE NEWS

- **Health and Human Services Secretary Sylvia M. Burwell announced \$386 million in grant awards to states, territories, and nonprofit organizations to support the Maternal, Infant, and Early Childhood Home Visiting Program (Home Visiting Program).**

These funds will allow states to continue to expand voluntary, evidence-based home visiting services to women during pregnancy and to parents with young children.

The Home Visiting Program currently serves approximately one-third of the counties in the country with high rates of the following indicators: low birth weight, teen birth rate, living in poverty and infant mortality rates. More than 1.4 million home visits have been conducted through the national Home Visiting Program, serving parents and children in 721 counties in all 50 states, the District of Columbia, and five territories. In 2014, the Home Visiting Program served 115,000 parents and children. Nearly 80 percent of families participating in the program had household incomes at or below the 100 percent of the Federal Poverty Level.

Administered by HRSA, in close partnership with the Administration for Children and Families, the Home Visiting Program is one part of President Obama's Early Learning Initiative that focuses on both high-quality infant and toddler care through Early Head Start-Child Care Partnerships and universal Pre-K to improve the essential foundations in early childhood for future healthy development and well-being. Current authority for the Home Visiting Program expires on March 31, 2015. The President's Budget requests \$500 million for fiscal year 2016 and \$15 billion over the next 10 years to continue to expand Home Visiting for families.

For more information on HRSA's Home Visiting Program, visit <http://mchb.hrsa.gov/programs/homevisiting>.

For a list of awardees, visit [www.hrsa.gov/about/news/2015tables/homevisiting](http://www.hrsa.gov/about/news/2015tables/homevisiting).

- **The proportion of people surviving years after a cancer diagnosis is improving, according to a new analysis.**

Men and women ages 50 to 64, who were diagnosed in 2005 to 2009 with a variety of cancer types, were 39 to 68 percent more likely to be alive five years later, compared to people of the same age diagnosed in 1990 to 1994, Vanderbilt University researchers found.

As reported in JAMA Oncology, researchers analyzed data from a national sample of more than 1 million people who were diagnosed with cancer of the colon or rectum, breast, prostate, lung, liver, pancreas or ovary between 1990 and 2010.

Among people ages 50 to 64 diagnosed with colon or rectal cancer in 1990 to 1994, about 58 percent were alive five years later. Five-year survival rates were about 83 percent for breast cancer, about 7 percent for liver cancer, about 13 percent for lung cancer, about 5 percent for pancreas cancer, about 91 percent for prostate cancer and about 47 percent for ovarian cancer.

Among people in the same age range diagnosed between 2005 and 2009, a larger proportion survived each of the cancers except ovarian cancer. Survival rates at five years rose by 43 percent for colon or rectum cancers, 52 percent for breast cancer, 39 percent for liver cancer, 68 percent for prostate cancer, 25 percent for lung cancer and 27 percent for pancreas cancer, compared to the early 1990s.

The better odds of survival did not apply equally to all age groups, however, and tended to favor

younger patients. For example, survival rose by only 12 to 35 percent for people diagnosed between ages 75 to 85.

And while there was a small improvement in ovarian cancer survival among white women during the study period, survival among black women with ovarian cancer got worse.

Advances in treatments and better cancer screenings and diagnoses are likely responsible for the overall increases in survival.

## REPORTS/POLICIES

- **The GAO published “Improper Payments: TRICARE Measurement and Reduction Efforts Could Benefit from Adopting Medical Record Reviews,” (GAO-15-269) on Feb. 18, 2015.** This report addresses TRICARE and Medicare improper payment measurement comparability; and the extent to which each program identifies root causes of, and develops corrective actions to address, improper payments. <http://www.gao.gov/assets/670/668554.pdf>
- **The GAO published “Defense Health Care: Better Tracking and Oversight Needed of Servicemember Separations for Non-Disability Mental Conditions,” (GAO-15-266) on Feb. 13, 2015.** This report examines the extent to which (1) DOD and the military services are able to identify the number of enlisted servicemembers separated for non-disability mental conditions, and (2) the military services are complying with DOD requirements when separating enlisted servicemembers for non-disability mental conditions, including personality disorders. <http://www.gao.gov/assets/670/668519.pdf>

## HILL HEARINGS

- 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 Appropriations Subcommittee on Military Construction, Veterans Affairs, and Related Agencies will hold a hearing on **Feb. 25, 2015**, to examine the budget on quality of life in the military.
- 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 **March 4, 2015**, to receive Legislative Presentation of the Veterans of Foreign Wars.
- The House and Senate Veterans Affairs Committees will hold a joint hearing on **March 5, 2015**, to receive legislative presentations from multiple military and veterans service organizations.
- The House Veterans Affairs Committee will hold a hearing on **March 18, 2015**, to receive legislative presentations from multiple military and veterans service organizations.

## LEGISLATION

- **H.R.975** (introduced Feb. 13, 2015): To amend the Internal Revenue Code of 1986 to allow the

transfer of required minimum distributions from a retirement plan to a health savings account was referred to the House Committee on Ways and Means.

Sponsor: Representative Bill Huizenga [MI-2]

- **H.R.976** (introduced Feb. 13, 2015): To repeal changes made by health care reform laws to the Medicare exception to the prohibition on certain physician referrals for hospitals, and for other purposes was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means.  
Sponsor: Representative Sam Johnson [TX-3].
- **H.R.1006** (introduced Feb. 13, 2015): To amend the Public Health Service Act to help build a stronger health care workforce was referred to the House Committee on Energy and Commerce.  
Sponsor: Representative Raul Ruiz [CA-36]
- **H.R.1011** (introduced Feb. 13, 2015): To require the disclosure of determinations with respect to which Congressional staff will be required to obtain health insurance coverage through an Exchange.  
Sponsor: Representative Brad R. Wenstrup [OH-2]
- **H.RES.117** (introduced Feb. 13, 2015): Recognizing the importance of vaccinations and immunizations in the United States was referred to the House Committee on Energy and Commerce.  
Sponsor: Representative Adam B. Schiff [CA-28]

## MEETINGS

- The ACHE Congress on Healthcare Leadership will be held on **March 16-19, 2015**, in Chicago, Ill. <http://www.ache.org/congress/>
- The 12th Annual World Health Care Congress will be held on **March 22-25, 2015**, in Washington DC. <http://www.worldcongress.com/events/HR15000/>
- The HIMSS Annual Conference and Exhibition will be held on **April 12-16, 2015**, in Chicago, Ill. <http://www.himssconference.org/>
- The 5th Annual Traumatic Brain Injury Conference will be held **April 15-16, 2015**, in Washington DC. <http://tbiconference.com/home/>
- The Heroes of Military Medicine Awards will be held on **May 7, 2015**, in Washington, DC. <http://www.hjfc3.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/>

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