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

- On March 5, 2019, the president signed an executive order titled “National Initiative to Empower Veterans and End Veterans Suicide,” which focuses on improving the quality of life for America’s veterans and ending the tragedy of veteran suicide.

The executive order mandates the establishment of the Veteran Wellness, Empowerment and Suicide Prevention Task Force. The task force will include the secretaries of Defense, Health and Human Services, Energy, Homeland Security, Labor, Education and Housing and Urban Development, as well as the director of the Office of Management and Budget, assistant to the president for National Security Affairs, and director of the Office of Science and Technology Policy.

Within 365 days of the date of the order and working with a variety of representatives from across both the public and private sectors, the task force shall:

- Develop a comprehensive national public health roadmap outlining the specific strategies needed to lower effectively the rate of veteran suicide, with a focus on community engagement,

- Design and propose to Congress a program for making grants to local communities, which will increase their ability to collaborate with each other, integrate service delivery and coordinate resources to veterans, and

- Develop a national research strategy to improve the coordination, monitoring, benchmarking and execution of research in the field of veteran suicide prevention.

Learn more about VA’s suicide prevention resources and programs at www.mentalhealth.va.gov/suicide_prevention.
Veterans who are in crisis or having thoughts of suicide, and those who know a veteran in crisis, can call the Veterans Crisis Line for confidential support 24 hours a day, seven days a week, 365 days a year. Call 800-273-8255 and press 1, send a text message to 838255 or chat online at VeteransCrisisLine.net/Chat.

**MILITARY HEALTH CARE NEWS**

- The Defense Health Agency awarded a firm-fixed price contract to QBase LLC, on Feb. 28, 2019.

  The contract was worth $7,546,347 for non-personal information technology (IT) services in support of the Defense Health Agency (DHA), Health Information Technology (HIT), Infrastructure and Operations Division (I&O), Enterprise Systems Branch. The contract provides for four option periods, if exercised.

  These support services include virtual and physical server administration; database administration; IT system patching and mitigation of system vulnerabilities; application deployment, data at rest; technical writing; security scanning; Tiers 2 and 3 system administration services; operating system deployments; backup and storage services; and network and application vulnerability scanning.

- On March 5, 2019, the Uniformed Services University of the Health Sciences awarded a firm-fixed contract to Angayut LLC.

  The contract is indefinite-quantity/indefinite-delivery contract with a minimum award amount of $100,000 and a maximum ceiling/face value of $20,000,000 for professional, scientific, and administrative support services.

  Work will be performance will occur in Bethesda, Maryland; and San Antonio, Texas, from March 5, 2019, to March 4, 2024. The contract does not include options. Angayut is an 8(a) Alaskan Native Corporation in the SBA’s 8(a) Business Development Program. Operations and maintenance funds will be applied at the task order level.

- The Defense Health Agency expended the waiver deadline for TRICARE beneficiaries who may receive emergency prescription refills if they need them as a result of flooding.

  The waiver headline has been extended to March 18, 2019.

  The affected counties include: Calaveras, El Dorado, Humboldt, Los Angeles, Marin, Mendocino, Modoc, Mono, Monterey, Orange, Riverside, San Bernardino, San Diego, San Mateo, Santa Barbara, Santa Clara, Shasta, Tehama, Trinity, Ventura, Yolo.

  TRICARE provides health benefits for active-duty, reserve component service members, military retirees and their families in California.

  To find a network pharmacy, [CLICK HERE](#), or call 1 (877) 363-1303.

**VETERANS AFFAIRS NEWS**

- The Department of Veterans Affairs (VA) selected 18 medical centers that will lead the way in the department’s efforts to transform the nation’s largest integrated health care
Pioneered in highly complex environments, such as aviation and nuclear energy, HROs put procedures and protocols in place that maximize safety and minimize harm, which in the medical industry assures every patient receives excellent care, every time.

Research shows high reliability organizations experience fewer accidents despite being high-risk environments where small errors can produce catastrophic results. A February Leadership Summit kicked off the HRO journey and introduced high reliability concepts and practices to the 18 sites. Lessons learned from these 18 sites will guide a more impactful rollout across every Veterans Health Administration (VHA) medical facility in 2020.

The 18 sites selected are: Manchester VA Medical Center (VAMC) (N.H.); Albany Samuel S. Stratton VAMC (N.Y.); Erie VAMC (Pa.); Beckley VAMC (W.Va.); Durham VAMC (N.C.); Ralph H. Johnson VAMC (Charleston, S.C.); James A. Haley Veterans Hospital (Tampa, Fla.); James H. Quillen VA Healthcare System (HCS) (Johnson City, Tenn.); Louis Stokes Cleveland VAMC (Ohio); William S. Middleton VA Hospital (Madison, Wis.); Kansas City VAMC (Mo.); G.V. Sonny Montgomery VAMC (Jackson, Miss.); Audie L. Murphy VA Hospital (San Antonio, Texas); Oklahoma City VA HCS (Oklahoma); Boise VAMC (Idaho); VA Sierra Nevada HCS (Reno, Nev.); VA San Diego HCS (Calif.); and St. Cloud VA HCS (Minn.).

The VHA journey to become an HRO is consistent with national safety goals set forth by the Joint Commission, an independent, nonprofit organization that accredits and certifies approximately 21,000 health care organizations and programs in the U.S.

In addition to a safer environment focused on reducing errors and preventing patient harm, HRO principles and values call for deference to expertise; oftentimes, the patient’s family caregiver is that expert. HRO will empower veterans and their family caregivers, along with employees who work hands-on with veterans, to make decisions and impact improvements that aim for excellent care for every patient, every time.

**GENERAL HEALTH CARE NEWS**

- **On March 5, 2019, FDA Commissioner Scott Gottlieb announced that he is resigning the position, effective in one month.**

  Gottlieb won approval from many as an effective advocate for public health. Within the Trump administration, he stood out for his efforts to more tightly regulate several industries; he’s been particularly intent on curbing vaping and making generic drugs more accessible.

  Gottlieb is a physician who was previously the FDA's Deputy Commissioner for Medical and Scientific Affairs. He became commissioner in May 2017. The reasons for his resignation are not yet clear, but it appears it was not requested by the White House.

  During his tenure, the FDA cracked down on electronic cigarettes, saying that vaping among teenagers had reached "an epidemic proportion." The agency issued more than 1,300 warning letters and fines to convenience stores, gas stations and other stores last summer for selling e-cigarettes to minors. Gottlieb also announced he would seek a ban on menthol cigarettes, a move welcomed by public health advocates.

  Gottlieb also made efforts to lower drug prices included the release in 2017 of the Drug Competition Action Plan, aimed at reducing barriers for cheaper, generic versions of drugs getting to market. Gottlieb targeted drug makers who use tactics intended to delay the development of generic versions of medications — such as refusing to release drug samples that are needed to develop generics. Under Gottlieb, the FDA started publishing a list of complaints against companies for such tactics.
More than 119,000 people suffered from bloodstream *Staphylococcus aureus* (staph) infections in the United States in 2017 – and nearly 20,000 died, according to a new report by the Centers for Disease Control and Prevention (CDC).

The findings show that hospital infection control efforts successfully reduced rates of serious staph infections in the U.S. Recent data, however, show that this success is slowing and staph still threatens patients.

The new data reflect rates for all *Staphylococcus aureus* infections: methicillin-resistant *Staphylococcus aureus* (MRSA) and methicillin-susceptible *Staphylococcus aureus* (MSSA). While MRSA is often better known, the report underscores that all staph can be deadly and that healthcare providers and administrators can take prevention steps to protect their patients.

According to electronic health record data from more than 400 acute care hospitals and population-based surveillance data from CDC’s Emerging Infections Program, MRSA bloodstream infections in healthcare settings decreased nationally by approximately 17 percent each year between 2005 and 2012. These reductions have recently started to stall, causing concern. The report also showed an almost 4 percent increase in MSSA infections that started outside of a healthcare setting each year from 2012 to 2017.

The rise in staph infections in the community may be linked to the opioid crisis. As reported by CDC last year, 9 percent of all serious staph infections in 2016 happened in people who inject drugs — up from 4 percent in 2011. Patients presenting with recurring staph infections should prompt healthcare providers to consider whether injection drug use could be the cause. To decrease staph infections in people who inject drugs, healthcare providers should link patients to drug-addiction treatment services and provide information on safe injection practices, wound care, and how to recognize early signs of infection.

Staph is a type of germ often found on human skin and on surfaces and objects that touch the skin. While the germ does not always harm people, it can get into the bloodstream and cause serious infections, which can lead to sepsis or death.

The risk for serious staph infection is greatest when people stay in healthcare facilities or have surgery, when medical devices are placed in their body, when they inject drugs, or when they come into close contact with someone who has staph. To reduce the spread of staph in the community, everyone should keep their hands clean, cover wounds, and avoid sharing items that contact skin, like towels, razors, and needles to prevent the spread of staph.

**REPORTS/POLICIES**

- There were no health-related reports published this week.

**HILL HEARINGS**

- The Senate and House Veterans Affairs Committees will hold a hearing on **March 12, 2019**, to receive the legislative presentation of multiple veterans service (NASDVA, FRA, GSW, BVA, JWV, MOPH, MOAA).

- The Senate Armed Services Committee will hold a hearing on **March 14, 2019**, to examine the Department of Defense budget posture in review of the Defense Authorization Request for fiscal year 2020 and the Future Years Defense Program.
**LEGISLATION**

- **H.R.1551** (introduced March 6, 2019): A bill to amend title XI of the Social Security Act to improve the quality, health outcomes, and value of maternity care under the Medicaid and CHIP programs by developing maternity care quality measures and supporting maternity care quality collaboratives was referred to the Committees on Energy and Commerce, and Committee on Ways and Means. Sponsor: Representative Eliot L. Engel [D-NY-16]

- **S.684** (introduced March 6, 2019): A bill to amend the Internal Revenue Code of 1986 to repeal the excise tax on high cost employer-sponsored health coverage was referred to the Committee on Finance. Sponsor: Senator Martin Heinrich [D-NM]

- **H.R.1533** (introduced March 5, 2019): A bill to amend title XVIII of the Social Security Act to improve access to mental health services under the Medicare program was referred to the Committees on Energy and Commerce, and Committee on Ways and Means. Sponsor: Representative Barbara Lee [D-CA-13]

- **S.657** (introduced March 5, 2019): A bill to amend title XXVII of the Public Health Service Act to establish requirements with respect to prescription drug benefits was referred to the Committee on Health, Education, Labor, and Pensions. Sponsor: Senator Mike Braun [R-IN]

**MEETINGS**

- The 9th Annual Heroes of Military Medicine Awards Dinner will be held on **May 9, 2019**, in Washington DC. [https://www.hjfcp3.org/heroes-dinner/](https://www.hjfcp3.org/heroes-dinner/)


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 katheroux@federalhealthcarenews.com.