

Federal Health Update

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EXECUTIVE AND CONGRESSIONAL NEWS

- **On March 13, 2013, President Obama signed into law: H.R. 307, the "Pandemic and All-Hazards Preparedness Reauthorization Act of 2013."**

This legislation reauthorizes appropriations through fiscal year 2018 and revises authorities for activities to improve public health and bioterrorism emergency planning, preparedness, and response; streamlines authorities within the Department of Health and Human Services to improve coordination and eliminate inefficiencies; and strengthens the role of the Food and Drug Administration to bring prevention and treatment products, known as "countermeasures," to market for emergency use.

- **On March 13, 2013, President Barack Obama announced his intent to appoint the following individuals to the Commission on Long-Term Care:**

Henry Claypool is the executive vice president of the American Association of People with Disabilities, a position he has held since January 2013. Previously, Mr. Claypool served as principal deputy administrator of the Administration for Community Living at the U.S. Department of Health and Human Services (HHS), where he also advised the Secretary on disability policy. From 2009 to 2012, Mr. Claypool was director of the Office of Disability at HHS, and from 2006 to 2009, he was Policy Director of Independence Care System. From 2005 to 2006, he served as senior advisor to the Associate Commissioner of the Office of Employment Support Programs at the Social Security Administration, and from 2002 to 2004, he served as co-director of Advancing Independence. Mr. Claypool worked at the Centers for Medicare and Medicaid Services

from 1999 to 2001 and at the Administration on Development Disabilities in 1998. In 2007, he served on Virginia's Health Reform Commission. Mr. Claypool received a B.A. from the University of Colorado at Boulder.

Dr. Julian Harris is the director of the Office of Medicaid in Massachusetts, a position he has held since July 2011. He oversees the state's \$11 billion Medicaid program that provides comprehensive health insurance for children, families, seniors, and people with disabilities. From 2008 to 2011, Dr. Harris trained in internal medicine and primary care at the Brigham & Women's Hospital while serving as a clinical fellow on the faculty of Harvard Medical School. Concurrently, he practiced as a hospitalist physician with the Cambridge Health Alliance. In 2006 and 2007, he worked as a consultant, first at the AIDS Support Organization in Uganda and later at BioAdvance Life Sciences Fund and McKinsey & Company. Previously, he worked at the World Bank as a consultant for Global Core Courses on Reproductive Health and Health Sector Reform. Dr. Harris is a Truman and Rhodes Scholar. He received a B.A. from Duke University, a M.Sc. from Oxford University, an M.B.A. from the Wharton School of Business, and an M.D. from the University of Pennsylvania.

Carol Raphael is the vice chair of the American Association of Retired Persons (AARP) Board of Directors, a position she has held since May 2012. From 1989 to 2011, she was chief executive officer and president of Visiting Nurse Service of New York. In 1989, Ms. Raphael served as a director of Operations Management at Mount Sinai Medical Center in New York City. She is chair of the Long Term Quality Alliance and the National Quality Forum Workgroup on Post-Acute and Long-Term Care. She is a member of the Henry Schein, Inc. Board of Directors and a former member of the Medicare Payment Advisory Commission. Ms. Raphael received a B.A. from City College of City University of New York and an M.P.A. from the John F. Kennedy School of Government at Harvard University.

MILITARY HEALTH CARE NEWS

- **On March 13, 2013, Secretary of the Army John McHugh launched the Army's Ready and Resilient Campaign.**

This campaign is designed to guide the Army's efforts to build physical, emotional, and psychological resilience in our soldiers, families and civilians, and directly enhance personal and unit readiness. Specifically, this campaign will help integrate and synchronize multiple Army-wide programs aimed at improving physical, psychological and emotional health.

The campaign will review programs, processes and policies to ensure effectiveness and reduce redundancies, improve methods for commanders to understand high risk behaviors and intervene early, and continue improvements to the Integrated Disability Evaluation System. In addition, the campaign will work to reduce barriers and stigma associated with seeking help and will promote healthy lifestyles based on the performance triad of physical fitness, nutrition, and sleep.

For more information, visit: <http://www.army.mil/readyandresilient>.

- **According to *Military Update*, sequestration will carve \$3.2 billion in funds from TRICARE.**

The article reports that unless Congress allows reallocation of medical dollars from research and hospital equipment accounts, TRICARE by late August will be forced to delay payments to private sector doctors caring for military family members and retirees.

VETERANS AFFAIRS NEWS

- **During a hearing of the House Veterans Affairs Subcommittee on Oversight and Investigations on March 13, a former senior epidemiologist for the Department of Veterans Affairs testified that the VA has covered up data showing adverse consequences for veterans who were exposed to toxic materials from burn pits and other environmental hazards in Iraq, Afghanistan and the first Gulf War.**

Steven S. Coughlin testified that he resigned from the VA's Office of Public Health in December "because of serious ethical concerns" about the agency's conduct, which he said included not releasing study results that point to a connection between environmental exposures and illnesses.

During the hearing, several speakers said the VA has been slow to clearly acknowledge research that has validated Gulf War illnesses as a serious medical condition.

The VA has said it does recognize there are health issues associated with Gulf War service, and notes that Shinseki formed a task force to conduct a comprehensive review of VA programs to help improve care and services for Gulf War vets.

The VA says in 2010 it recognized nine diseases linked to experience in the Gulf War.

- **At a Senate Veterans Affairs Committee hearing held on March 14, committee members requested VA internal performance data with Congress, according to San Francisco NBC affiliate.**

The request was in response to Center for Investigative Reporting (CIR) released VA's internal tracking documents, showing its ability to provide timely disability benefits to veterans had virtually declined.

The documents obtained by CIR show that since 2009, the number of veterans waiting more than a year for service-connected benefits had increased from 11,000 to 245,000.

The VA says it has a plan to eliminate the disability claims backlog by 2015, but the internal documents show the agency believes the number of veterans waiting for benefits, currently at about 900,000, will hit a million this month and continue to rise throughout the year.

Lawmakers from both parties expressed skepticism during the hearing that the 2015 deadline could be met, noting that delays and the number of veterans waiting have continued to increase in the three years since the agency pledged to eliminate the backlog.

VA said it "will continue to be responsive to requests from the committee for information in addition to the public reports posted online and quarterly briefings provided to members of Congress."

During her testimony, Allison Hickey, the VA's undersecretary for benefits, said the VA is working feverishly to put into place systems that could substantially shrink the backlog, asserting that a new computer system will help the agency achieve its goal.

But after spending four years and more than half a billion dollars on the new system, the internal documents show 97 percent of claims remain on paper.

- **Michael Wells, of Sacramento, has been appointed undersecretary at the California**

Department of Veterans Affairs, according to Gov. Jerry Brown's office.

Wells has served in multiple positions at the California Military Department since 1991, including deputy commander of the Youth and Community Programs Task Force, director of manpower and personnel, chief of logistics, legislative liaison to the director of governmental and international affairs, plans officer and chief of environmental programs.

Wells has served as commander of the 223rd Infantry Regiment and Camp, San Luis Obispo since 2011. He was chief of intelligence at the joint force headquarters of the California Military Department from 2009 to 2011 and chief of intelligence operations at NATO headquarters in Sarajevo from 2008 to 2009. He served as assistant chief of intelligence for the 40th Infantry Division at the Joint Training Base in Los Alamitos from 2006 to 2008 and commander of the 250th Military Intelligence Battalion at Camp Victory from 2004 to 2006.

Wells served in the U.S. Naval Reserve from 1983 to 1991. He earned a Juris Doctorate degree from the University of the Pacific, McGeorge School of Law and a Master of Science degree in strategic studies from the U.S. Army War College.

GENERAL HEALTH CARE NEWS

- **The U.S. Food and Drug Administration approved Lymphoseek Injection, a radioactive diagnostic imaging agent that helps doctors locate lymph nodes in patients with breast cancer or melanoma who are undergoing surgery to remove tumor-draining lymph nodes.**

Lymph nodes filter lymphatic fluid that flows from the body's tissues. This fluid may contain cancer cells, especially if the fluid drains a part of the body containing a tumor. By surgically removing and examining the lymph nodes that drain a tumor, doctors can sometimes determine if a cancer has spread.

Lymphoseek, marketed by Navidea Biopharmaceuticals, Inc., is an imaging drug that helps locate lymph nodes; it is not a cancer imaging drug. It is the first new drug used for lymph node mapping to be approved in more than 30 years. Other FDA-approved drugs used for lymph node mapping include sulfur colloid (1974) and isosulfan blue (1981).

Surgeons subsequently removed suspected lymph nodes for pathologic examination. Confirmed lymph nodes were examined for their content of blue dye and/or Lymphoseek. Results showed Lymphoseek and blue dye had localized most lymph nodes, although a notable number of nodes were localized only by Lymphoseek.

- **Most U.S. drivers reported talking on their cell phone and about one in three read or sent text or email messages when driving, according to a new study released by the Centers for Disease Control and Prevention (CDC).**

The study, published in CDC's Morbidity and Mortality Weekly Report, examined two specific types of self-reported distracted driving behaviors: cell phone use while driving and reading or sending text or e-mail messages while driving, among drivers aged 18-64 years in the United States and in seven European countries (Belgium, France, Germany, the Netherlands, Portugal, Spain, and the United Kingdom).

CDC researchers analyzed data from the 2011 EuroPNStyles and HealthStyles surveys and found that 69 percent of U.S. drivers talked on their cell phone while driving within

the 30 days before they were surveyed compared to 21 percent of drivers from the United Kingdom. The study also found that 31 percent of drivers in the United States reported that they had read or sent text messages or emails while driving, compared to 15 percent of drivers in Spain.

CDC researchers also looked specifically at U.S. drivers and found that in the 30 days before they were surveyed:

- There were no significant differences between men and women in terms of cell phone use or reading or sending text or e-mail messages while driving.
- A higher percentage of 25-44 year-old men and women reported talking on a cell phone while driving than those ages 55–64, and;
- A higher percentage of 18-34 year-old men and women reported reading or sending text or e-mail messages while driving than those ages 45-64.

Many strategies have been applied to try to reduce distracted driving in the United States and other countries. These include law enforcement efforts, communication campaigns, vehicle and cell phone technologic advances, legislation, and safe driver education. Some strategies have been aimed specifically at high risk drivers such as teens and new drivers. As of February 2013, 33 states and the District of Columbia have laws in place restricting at least some teens or new drivers from using cell phones while driving. More research is needed to identify strategies that can decrease distraction-related crashes.

▪ **Quitting smoking is more beneficial to one's overall health than the risks associated with modest weight gained after quitting, according to a new National Institutes of Health-funded community study.**

The study found that former smokers without diabetes had about half as much risk of developing cardiovascular disease as current smokers, and this risk level did not change when post-cessation weight gain was accounted for in the analysis.

This study is the first epidemiological effort to directly address the health impact of the weight gain that many people experience following smoking cessation. The findings were published in the March 13 [*Journal of the American Medical Association*](#).

Researchers said the analysis could not definitively conclude the role of modest weight gain in former smokers with diabetes, though the numbers suggested a similar trend. However, follow-up studies to confirm this negligible effect of weight gain in people with diabetes would be important, as weight control is a key factor in managing diabetes and preventing diabetes-related heart problems.

The study team analyzed data collected between 1984 and 2011 from 3,251 participants enrolled in the NHLBI's Framingham Heart Study. During this time, participants received periodic medical exams so that researchers could calculate changes in weight and smoking status. Participants were divided whether they had diabetes or not, then further divided into four smoking categories: smokers, non-smokers, recent quitters (quit for four years or less), and long-term quitters (quit for more than four years). The researchers then examined the occurrence of cardiovascular problems such as coronary heart disease, stroke or heart failure in each group.

The initial analysis, which did not account for any changes in weight, found that former smokers without diabetes had about half as much risk of cardiovascular problems as smokers (0.47 times the risk for recent quitters and 0.46 for long-term quitters). By comparison, non-smokers had about one-third as much risk (0.32).

The researchers then made statistical adjustments to account for the fact that recent

quitters gained more weight on average than other groups (about 6.5 pounds). The researchers found that even accounting for weight, the lowered risk remained nearly the same for recent quitters (going from 0.47 to 0.49 times the risk). The lowered risk for long-term quitters and non-smokers remained constant when adjusting for weight gain.

REPORTS/POLICIES

- **The GAO published “Defense Health Care: DoD Chiropractor Wage Rates,” (GAO-13-443R) on March 14, 2013.** This report examines the wage rates of DoD chiropractors compared with the wages of health care professionals with similar training; skill sets; licensure requirements; certification requirements; and health care responsibilities. <http://www.gao.gov/assets/660/653039.pdf>
- **The GAO published “VA Health Care: Appointment Scheduling Oversight and Wait Time Measures Need Improvement,” (GAO-13-372T) on March 14, 2013.** This report examines the reliability of VHA’s reported medical appointment wait times, scheduling oversight and VHA initiatives to improve access to timely medical appointments. <http://www.gao.gov/assets/660/652795.pdf>
- **The GAO published “Veterans’ Disability Benefits: Challenges to Timely Processing Persist,” (GAO-13-453T) on March 14, 2013.** In this report, GAO focuses on factors that contribute to lengthy disability claims and appeals processing times at VA regional offices, and the status of the veterans Benefits Administration’s (VBA) recent improvement efforts. <http://www.gao.gov/assets/660/652979.pdf>

HILL HEARINGS

- The House Veterans’ Affairs Committee will hold a hearing on **March 20, 2013**, to examine VA’s Plans for employee training, accountability, and workload management to improve disability claims processing.
- The House Appropriations Subcommittee on Labor, Health and Human Services will hold an oversight hearing on **March 20, 2013**, to examine children’s mental health.
- The Senate Armed Services Committee will hold a hearing on **April 11, 2013**, to examine the Department of the Air Force in review of the Defense Authorization Request for fiscal year 2014 and the Future Years Defense Program; with the possibility of a closed session in SVC-217 following the open session.
- The Senate Armed Services Committee will hold a hearing on **April 25, 2013**, to examine the Department of the Navy in review of the Defense Authorization Request for fiscal year 2014 and the Future Years Defense Program; with the possibility of a closed session in SVC-217 following the open session.

LEGISLATION

- **H.R.1074** (introduced March 12, 2013): To amend the Public Health Service Act to foster more effective implementation and coordination of clinical care for people with pre-

diabetes and diabetes was referred to the House Committee on Energy and Commerce.
Sponsor: Representative Pete Olson, [TX-22]

- **H.R.1076** (introduced March 12, 2013): To amend the Patient Protection and Affordable Care Act to provide for savings to the federal government by permitting pass-through funding for State authorized public entity health benefits pools was Referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means.
Sponsor: Representative Ralph M. Hall [TX-4]
- **H.R.1098** (introduced March 12, 2013): To amend the Public Health Service Act to reauthorize certain programs relating to traumatic brain injury and to trauma research was referred to the House Committee on Energy and Commerce.
Sponsor: Representative Bill Pascrell, Jr. [NJ-9]
- **H.R.1099** (introduced March 12, 2013): To repeal the *Prevention and Public Health Fund* was referred to the House Committee on Energy and Commerce.
Sponsor: Representative Joseph R. Pitts [PA-16]
- **H.R.1100** (introduced March 12, 2013): To amend the Public Health Service Act to improve mental and behavioral health services on college campuses was referred to the Committee on Energy and Commerce, and in addition to the Committee on Education and the Workforce.
Sponsor: Representative Janice D. Schakowsky [IL-9]
- **H.R.1102** (introduced March 12, 2013): To amend part D of title XVIII of the Social Security Act to require the Secretary of Health and Human Services to negotiate covered part D drug prices on behalf of Medicare beneficiaries was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means.
Sponsor: Representative Peter Welch [VT]
- **H.R.1134** (introduced March 13, 2013): To direct the Secretary of Veterans Affairs to carry out a grant program and pilot program designed to improve the delivery of health care to veterans residing in rural areas, and for other purposes was referred to the House Committee on Veterans' Affairs.
Sponsor: Representative Pete P. Gallego [TX-23].
- **H.R.1146** (introduced March 13, 2013): To amend the Public Health Service Act and title XVIII of the Social Security Act to make the provision of technical services for medical imaging examinations and radiation therapy treatments safer, more accurate, and less costly was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means.
Sponsor: Representative Ed Whitfield [KY-1]
- **S.531** (introduced March 12, 2013): A bill to provide for the publication by the Secretary of Human Services of physical activity guidelines for Americans was referred to the Committee on Health, Education, Labor, and Pensions was referred to the Committee on Health, Education, Labor, and Pensions.
Sponsor: Senator Tom Harkin [IA]
- **S.539** (introduced March 12, 2013): A bill to amend the Public Health Service Act to foster more effective implementation and coordination of clinical care for people with pre-diabetes and diabetes was referred to the Committee on Health, Education, Labor, and Pensions.
Sponsor: Senator Jeanne Shaheen [NH]
- **S.541** (introduced March 12, 2013): A bill to prevent human health threats posed by the consumption of equines raised in the United States was referred to the Committee on Health, Education, Labor, and Pensions.
Sponsor: Senator Mary L. Landrieu [LA] (

- **S.543** (introduced March 13, 2013): A bill to require the Secretary of Veterans Affairs to reorganize the Veterans Integrated Service Networks of the Veterans Health Administration and for other purposes was referred to the Committee on Veterans' Affairs.
Sponsor: Senator Richard Burr [NC]

MEETINGS

- The National Center for Disaster Medicine and Public Health (NCDMPH) rescheduled [Learning in Disaster Health: A Continuing Education Workshop](#) from **April 2-3, 2013** to **Sept. 17-18, 2013**.
- The Global Health & Innovation Conference (GHIC) will be held **April 2-4, 2013**, in New Haven Conn. <http://www.uniteforsight.org/conference/>
- 10th Annual World Healthcare Congress will be held **April 8-10, 2013**, in Washington DC <http://www.worldcongress.com/events/HR13000/>
- The 16th Annual Conference on Vaccine Research will be held on **April 22-24, 2013**, in Baltimore, Md. <http://www.cvent.com/events/16th-annual-conference-on-vaccine-research/event-summary-db97bedd5ee041eeb09d971650f76be0.aspx>
- AAMA Presents: "3-in-1" Conference - Bringing Together Cardiovascular, Neuroscience & Oncology Leaders will be held on **April 10-12 2013**, in Las Vegas, Nev. <http://www.aameda.org/Conference/ACCA/ACCAMain.html>
- The AMSUS Annual Continuing Education Meeting will be held **Nov. 3-8, 2013**, in Seattle Wash. AMSUSMeeting.org
- The 29th Annual Meeting of the International Society for Traumatic Stress Studies (ISTSS) will be held **Nov.7-9, 2013**, in Philadelphia, Pa. <http://www.istss.org/Home.htm>
- The AMIA 2013 Annual Symposium will be held on **Nov. 16-20, 2013**, in Washington DC. <http://www.amia.org/amia2013>
- The 2013 American Academy of Medical Administrators (AAMA) Annual Conference will be held on **Nov. 19 - 22, 2012**, Las Vegas, Nev. <http://www.aameda.org/Conference/Annual/AnnualMain.html>
- The Radiological Society of North America (RSNA) 2013: **Dec. 1-3, 2013**, in Chicago, Ill. http://www.rsna.org/Annual_Meeting.aspx
- The 2013 Special Operations Medical Association (SOMA) Conference will be held on **Dec. 14-17, 2012**, in Tampa, Fla. <http://www.specialoperationsmedicine.org/>

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.