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 March 22, 2018, the House passed (256-167) the $1.3 trillion spending bill. The bill increases domestic spending by 12 percent and military spending by 15 percent from last year.

  This bill includes $34.4B for the Defense Health Program, $764M above the request, including $359M for cancer research, $125M for traumatic brain injury and psychological health research, and $287M for sexual assault prevention and response.

  To read the one-page summary, visit: https://appropriations.house.gov/uploadedfiles/03.21.18_fy18_omnibus_-_defense_-_one_pager.pdf

MILITARY HEALTH CARE NEWS

- The U.S. Office of Personnel Management (OPM), in partnership with the Defense Health Agency (DHA) and the Department of Defense (DoD), announced the Federal Employees Dental and Vision Insurance Program (FEDVIP) will be offered for the first time to TRICARE eligible retirees and their families during the 2018 Federal Benefits Open Season.
Active duty family members will be eligible to enroll in FEDVIP vision insurance.

The TRICARE Retiree Dental Program ends on Dec. 31, 2018. Those enrolled in TRDP must choose a dental plan through FEDVIP to have coverage in 2019. Enrollment is not automatic. Today’s announcement affects 1.63 million beneficiaries enrolled in TRDP and offers a choice to an additional 1.3 million eligible retired beneficiaries not currently enrolled in TRDP.

Most beneficiaries in a TRICARE health plan may enroll in a FEDVIP vision plan. This comprehensive vision coverage, including eyeglasses or contacts, is in addition to the routine eye examination benefit that many beneficiaries have under TRICARE Prime or TRICARE Select.

The Federal Benefits Open Season enrollment period, Nov. 12, 2018 through Dec. 10, 2018, runs concurrently with the TRICARE Open Season. Coverage will be effective Jan. 1, 2019.

FEDVIP currently serves more than 3 million federal employees, retirees and their families. FEDVIP enrollees give the program high marks for quality and value. It provides comprehensive dental and vision insurance at competitive group rates with 10 dental and four vision carriers.

For more information, visit TRICARE.benefeds.com to sign up to receive messages, updates, and reminders on the FEDVIP throughout the rest of this year.

- The Defense Health Agency announced it has extended the waiver for beneficiaries in the TRICARE West Region until March 31, 2018, due to continued customer service issues.

On Jan. 1, 2018, Health Net Federal Services took over managing the West Region. Since then, the contractor experienced long call center wait times, backlogged enrollments and referrals and delayed payments to providers.

To learn more, please visit: https://tricare.mil/

VETERANS AFFAIRS NEWS

- On March 19, 2018, the U.S. Department of Veterans Affairs (VA) announced Dr. Rasu Shrestha, chief innovation officer at the University of Pittsburgh Medical Center, will lead the VA Open Application Programming Interface (API) pledge.

The API pledge encourages health-care providers to commit to work collaboratively with VA to increase the mapping pace of health data to industry standards, including the current and future versions of Fast Healthcare Interoperability Resources (FHIR).

Considered the “front door” to VA’s vast data stores, Lighthouse is the department’s application programming interface, management platform, and functions similar to a waiter’s role in a restaurant — the critical link communicating orders to the “kitchen.” For VA, the kitchen is the system that will prepare the order then deliver it back to the waiter, or API.

The coalition effort includes key stakeholders across the industry to elevate electronic health record (EHR) interoperability and realize the potential of the Open API Pledge to accelerate the design, testing and implementation of the Argonaut Project implementation guides of the FHIR API.

Pledgees will meet for the first roundtable discussion in April and commit to working with VA and standards community to implement the existing Argonaut implementation guides. The organizations will participate in testing draft specifications for scheduling, clinical notes, questionnaire and encounters, as well as implement access standards for Veterans, clinicians and the care teams that serve them.
**Stars and Stripes** reports that the Veterans Affairs reform measures have been removed from the final omnibus spending bill that the House passed on March 22.

The House and Senate had made a deal to reform the VA Choice program, offer benefits to caregivers, and review the VA facilities throughout the nation with an eye to close older or underused ones. Republicans supported these measures but Democrats opposed it. The need to pass a budget or risk closing the government again drove the decision to remove the VA proposals.

A measure was included to increase mental and behavioral health care for veterans with other-than-honorable discharges. If passed, the VA would be required to provide veterans with mental health screenings and care after they spent more than 100 days on active duty, even if they received other-than-honorable discharges.

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### GENERAL HEALTH CARE NEWS

- **The Department of Health and Human Services (HHS)** announced that Secretary Alex Azar will name Robert R. Redfield, M.D., as the 18th director of the Centers for Disease Control and Prevention and Administrator of the Agency for Toxic Substances and Disease Registry.

  Redfield has been a public health leader actively engaged in clinical research and clinical care of chronic human viral infections and infectious diseases, especially HIV, for more than 30 years.

  He served as the founding director of the Department of Retroviral Research within the U.S. Military’s HIV Research Program, and retired after 20 years of service in the U.S. Army Medical Corps. Following his military service, he co-founded the University of Maryland’s Institute of Human Virology with Dr. William Blattner and Dr. Robert C. Gallo and served as the chief of Infectious Diseases and vice chair of Medicine at the University of Maryland School of Medicine.

  Redfield served as a member of the President’s Advisory Council on HIV/AIDS from 2005 to 2009, and was appointed as Chair of the International Subcommittee from 2006 to 2009.

  He is a past member of the Office of AIDS Research Advisory Council at the National Institutes of Health, the Fogarty International Center Advisory Board at the National Institutes of Health, and the Advisory Anti-Infective Agent Committee of the Food and Drug Administration.

- **The U.S. Food and Drug Administration** approved Adcetris (brentuximab vedotin) to treat adult patients with previously untreated stage III or IV classical Hodgkin lymphoma (cHL) in combination with chemotherapy.

  Lymphoma is a cancer that begins in the lymph system, which is part of the immune system that helps the body fight infection and disease. Lymphoma can begin almost anywhere in the body and can spread to nearby lymph nodes. The two main types of lymphoma are Hodgkin lymphoma (also called Hodgkin disease) and non-Hodgkin lymphoma. Most people with Hodgkin lymphoma have the classical type. With this type, there are large, abnormal lymphocytes (a type of white blood cell) in the lymph nodes called Reed-Sternberg cells. With early intervention, patients with Hodgkin lymphoma can usually experience long-term remission.

  The National Cancer Institute at the National Institutes of Health estimates that 8,260 people in the United States were diagnosed with Hodgkin lymphoma last year and approximately 1,070 patients with non-Hodgkin lymphoma died from the disease in 2017.

  Adcetris combines an antibody and drug, allowing the antibody to direct the drug to a target on lymphoma cells known as CD30. Adcetris has also been previously approved by the FDA to treat cHL after relapse, cHL after stem cell transplant when a patient is at a high risk of relapse or
progression, systemic anaplastic large cell lymphoma (ALCL) after failure of other treatment, and primary cutaneous ALCL after failure of other treatment.

The FDA granted this application Priority Review and Breakthrough Therapy designations.

The FDA granted the approval of Adcetris to Seattle Genetics, Inc.

REPORTS/POLICIES


- The GAO published “New Trauma Care System: DOD Should Fully Incorporate Leading Practices into Its Planning for Effective Implementation,” (GAO-18-300) on March 19, 2018. This report assesses whether the implementation plan includes the four required elements and the extent to which DOD’s planning efforts to date reflect leading practices from prior GAO work, such as identifying goals and strategies to achieve those goals. https://www.gao.gov/assets/700/690716.pdf

HILL HEARINGS

- No hearings scheduled for next week.

LEGISLATION


- **S.324** (introduced March 19, 2018): the State Veterans Home Adult Day Health Care Improvement Act of 2017 was sent to the president. Sponsor: Senator Orrin G. Hatch [R-UT]

- **S.2582** (introduced March 21, 2018): A bill to provide health insurance reform, and for other purposes was referred to the Committee on Finance. Sponsor: Senator Elizabeth Warren [D-MA]

- **H.R.5329** (introduced March 19, 2018): To amend the Public Health Service Act to reauthorize and enhance the poison center national toll-free number, national media campaign, and grant program, and for other purposes was referred to the House Committee on Energy and Commerce. Sponsor: Representative Susan W. Brooks [R-IN-5]

MEETINGS

- 2018 Heroes of Military Medicine Awards Dinner will be held on **May 3, 2018**, in Washington, DC. http://www.hjfcp3.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.