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 April 2, 2014,** the White House announced 7.1 million Americans signed up for private health plans under the Patient Protection and Affordable Care Act by the March 31 deadline.

- **On April 1, 2014,** President Obama signed into law: H.R. 4302, the “Protecting Access to Medicare Act of 2014.” This legislation averts cuts to Medicare physician payments that will go into effect on April 1, 2014, under the current-law “sustainable growth rate” system, to extend other health-related provisions set to expire, and to make other changes to current-law health provisions.

MILITARY HEALTH CARE NEWS

- **TRICARE and Military OneSource** are co-hosting a webinar to educate TRICARE beneficiaries about using TRICARE and other health insurance. The webinar will take place on Thursday, April 10, 2014, from 1-2 p.m. ET.

  The featured speaker for this event is Mr. Mark Ellis. Mr. Ellis is a senior health program analyst with the Defense Health Agency. He manages the Continued Health Care Benefit and TRICARE Young Adult programs which offer premium based health care coverage to former service members and their family members when they are no longer eligible for TRICARE benefits. For more information about OHI, visit www.tricare.mil/GettingCare/OHI.
To sign up, go to https://www2.gotomeeting.com/register/310246506. Registration is on a first-come, first-served basis and is limited due to system capacity. Participants must avoid sharing personal health information when asking a question.

- **Assistant Secretary of Defense for Health Affairs Jonathan Woodson and the three surgeons general** testified before the House Appropriations Defense Subcommittee for its annual oversight hearing on the Defense Health Program.

In his opening statement, Woodson said over the next few years his office is expected to modernize MHS management with an enterprise focus; define and deliver the medical capabilities and manpower needed in the 21st century; invest in and expand strategic partnerships; assess the balance of the medical force structure; modernize the TRICARE health program; and define the MHS’ global health engagement requirements.

Subcommittee chairman Rep. Frelinghuysen recognized the fiscal challenges the DoD is under but reminded Woodson that previous attempts to raise fees have been unsuccessful.

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**VETERANS AFFAIRS NEWS**

- **One year after the backlog of pending disability compensation claims peaked at over 611,000 in March 2013, the Department of Veterans Affairs (VA) announced it has reduced that number by approximately 44 percent to 344,000 claims.**

VA also said it has improved the accuracy of the decisions being made on veterans’ disability claims. Additionally, on average, veterans are waiting 119 days less for a decision than they were at this time last year.

The current backlog, defined as claims pending more than 125 days, is at its lowest point since March 2011, when the backlog spiked in part because of the need to re-adjudicate 150,000 previously decided cases involving exposure to the Vietnam-era defoliant, Agent Orange. The re-adjudication of these claims was mandated under the Nehmer court decision and followed the Secretary’s decision to add ischemic heart disease, certain leukemias, and Parkinson’s disease to the list of conditions presumed to be related to exposure to Agent Orange. During this same time period, VA also received and processed over 100,000 new claims for these three conditions from Vietnam veterans and survivors newly eligible for VA benefits as a result of this decision.

Since establishing the goal in 2010 of processing all disability claims within 125 days at a 98 percent accuracy level, VA developed and is implementing a plan that transforms the decades-old, manual paper claim approach into a state-of-the-art electronic process that leverages digital data transfer and automated calculators to reduce processing time and input errors.

VA has also increased the productivity of its claims processing workforce through enhanced training, streamlined business processes and other initiatives such as mandating overtime and prioritizing the oldest claims, allowing VA’s 56 regional benefits offices to exceed monthly production records four times in fiscal year 2013.

At the same time, the accuracy of rating decisions continues to improve. VA’s national “claim-level” accuracy rate, determined by dividing the total number of cases that are error-free by the total number of cases reviewed, is currently 91 percent – an eight-percentage-point improvement since 2011. When measuring the accuracy of rating individual medical conditions
inside each claim, the three-month accuracy level is 96.5 percent. VA’s accuracy measures are statistically valid and the process has been independently verified by the Institute for Defense Analyses.

Regardless of the status of their compensation claims, veterans who have served in combat since Nov. 11, 1998, are eligible for five years of free medical care from VA for any illness associated with their service.

- **The Department of Veterans Affairs (VA) announced that more than 400 disabled veterans participating in the National Disabled Veterans Winter Sports Clinic in Snowmass Village, Colo.**

  The event is the largest adaptive sports event of its kind in the world.

  Last month, 18 military veteran Paralympic athletes competed at the 2014 Paralympic Games in Sochi, Russia. Many of these athletes received their first exposure to winter sports at this VA Clinic. Since 2005, VA has had a partnership with the U.S. Paralympics that establishes VA’s Winter Sports Clinic as a pipeline to provide participants to American Paralympic teams engaged in national and international competition.

  The Winter Sports Clinic, which is sponsored by VA and Disabled American Veterans (DAV), teaches veterans with disabilities about adaptive Alpine and Nordic skiing. It also introduces them to a number of other adaptive recreational activities and sports. Now in its 28th year, the Clinic is an annual rehabilitation program open to U.S. military veterans with traumatic brain injuries, spinal cord injuries, orthopedic amputations, visual impairments, certain neurological problems and other disabilities, who receive care at a VA medical facility or military treatment center.

  Learn more about VA's adaptive sports programs and partnerships at [www.va.gov/ adaptivesports](http://www.va.gov/adaptivesports).

### GENERAL HEALTH CARE NEWS

- **FDA Commissioner Margaret A. Hamburg released a statement on prescription opioid abuse.**

  In the statement, she highlighted the fact that more than 16,000 lives are lost each year due to opioid-related overdoses. In fact, drug overdose deaths, driven largely by prescription drug overdose deaths, are now the leading cause of injury death in the United States – surpassing motor vehicle crashes.

  To read her full statement, please visit: [http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm391590.htm?source=govdelivery&utm_medium=email&utm_source=govdelivery](http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm391590.htm?source=govdelivery&utm_medium=email&utm_source=govdelivery)

- **The Department of Health and Human Services (HHS) announced that the Social Security Administration (SSA) is now able to process requests for Medicare Part A and Part B Special Enrollment Periods, and reductions in Part B and premium Part A late enrollment penalties for certain eligible people in same-sex marriages.**

  This is another step HHS is taking in response to the June 26, 2013 Supreme Court ruling in [*U.S. v. Windsor*](http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm391590.htm?source=govdelivery&utm_medium=email&utm_source=govdelivery), which held section 3 of the Defense of Marriage Act (DOMA) unconstitutional.
Because of this ruling, Medicare is no longer prevented by DOMA from recognizing same-sex marriages for determining entitlement to, or eligibility, for Medicare.

While Medicare is managed by the Centers for Medicare & Medicaid Services (CMS), SSA is responsible for determining eligibility for, and enrolling people in, Medicare.

For additional information, please visit: http://medicare.gov/sign-up-change-plans/same-sex-marriage.html.

REPORTS/POLICIES

- There were no reports published this week.

HILL HEARINGS

- The Senate Armed Services Subcommittee on Personnel will hold a budget hearing on May 21, 2014, to markup those provisions, which fall under the subcommittee’s jurisdiction of the proposed National Defense Authorization Act for fiscal year 2015.

LEGISLATION

- **H.R.4288** (introduced March 24, 2014): the *Opioid Overdose Reduction Act of 2014* was referred to the House Committee on the Judiciary. Sponsor: Representative Richard E. Neal [MA-1].
- **H.R.4299** (introduced March 26, 2014): To amend the Controlled Substances Act with respect to drug scheduling recommendations by the Secretary of Health and Human Services and with respect to registration of manufacturers and distributors seeking to conduct clinical testing was referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary. Sponsor: Representative Joseph R. Pitts, [PA-16]
- **H.R.4305** (introduced March 26, 2014): To amend title 10, United States Code, to provide an individual with a mental health assessment before the individual enlists in the Armed Forces or is commissioned as an officer in the Armed Forces was referred to the House Committee on Armed Services. Sponsor: Representative Glenn Thompson [PA-5].
- **S.2154** (introduced March 25, 2014): A bill to amend the Public Health Service Act to reauthorize the Emergency Medical Services for Children Program was referred to the Committee on Health, Education, Labor, and Pensions. Sponsor: Senator Robert P. Casey, Jr. [PA]
The 11th Annual World Health Care Congress will be held on April 7-9, 2014, in National Harbor, Md. [http://www.worldcongress.com/events/HR14000/](http://www.worldcongress.com/events/HR14000/).


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