

# Federal Health Update

APRIL 5, 2013

*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 April 8, 2013.**
- **President Obama announced a new research initiative designed to revolutionize our understanding of the human brain.**

Launched with approximately \$100 million in the President's Fiscal Year 2014 Budget, the BRAIN (Brain Research through Advancing Innovative Neurotechnologies) Initiative ultimately aims to help researchers find new ways to treat, cure, and even prevent brain disorders, such as Alzheimer's disease, epilepsy, and traumatic brain injury.

The BRAIN Initiative will accelerate the development and application of new technologies that will enable researchers to produce dynamic pictures of the brain that show how individual brain cells and complex neural circuits interact at the speed of thought. These technologies will open new doors to explore how the brain records, processes, uses, stores, and retrieves vast quantities of information, and shed light on the complex links between brain function and behavior.

For details about BRAIN, please visit: <http://www.whitehouse.gov/the-press-office/2013/04/02/fact-sheet-brain-initiative>.

## MILITARY HEALTH CARE NEWS

- **TRICARE Management Activity launched a new smoking cessation program, offer TRICARE beneficiaries a variety of gums, patches, lozenges and pills to help smokers kick the habit, at no charge.**

The program began in March, 2013. The smoking cessation options are available through home delivery for TRICARE beneficiaries living in the United States who are 18 years of age and older, and who are not Medicare eligible. The covered medications are also available at military pharmacies. Active duty service members overseas may get the smoking cessation medications at military pharmacies and via home delivery.

TRICARE requires a prescription for any smoking cessation medication, including over the counter medications. The free mail order medications include the popular varenicline (Chantix) and bupropion (Zyban). To find out what other medications are covered and learn more about eligibility, visit TRICARE. And, for smoking cessation help, visit TRICARE's [Quit Tobacco](#) page and the Department of Defense's "[Quit Tobacco: Make Everyone Proud](#)" initiative.

Find more ways to kick the habit at [Operation Live Well](#).

- **Defense from Secretary Chuck Hagel published a message on Sexual Assault awareness and Prevention Month to DoD personnel.**

To read the message, please visit:

<http://www.defense.gov/releases/release.aspx?releaseid=15903>.

- **A new GAO study found private physicians were accepting fewer TRICARE patients.**

Researchers compared annual beneficiary survey data from 2008 to 2011 to the 2005 to 2007 period. Physicians outside TRICARE's managed-care network, known as TRICARE Prime, accepted 76 percent fewer patients compared to the earlier period. Overall, about 31 percent of non-enrolled beneficiaries reported problems finding a physician.

Researchers found that reduced access to mental care was one of the biggest problems. Only 39 percent of civilian mental healthcare providers took in new TRICARE patients compared to 67 percent of civilian primary-care providers and about 77 percent of civilian specialty-care providers.

Providers ranked reimbursement rates as the top reason why providers did not accept new TRICARE patients. TRICARE's reimbursement rates are largely based on Medicare reimbursement rates with out-of-network providers allowed to charge as much as 15 percent more.

In one California area that accepts TRICARE Prime, the leading reason providers cited was lack of awareness about the program.

The report found that accessibility varied by location. Central and Southern California, Texas and Louisiana were the areas that reported the heaviest concentration of problems with access.

To read the report, visit <http://www.gao.gov/assets/660/653487.pdf>.

- **Former VA Assistant Secretary for Information and Technology and Chief Information Officer Roger Baker has been named as chief strategy officer for Agilex, a Chantilly, VA-based technology company, which focuses on health care and mobile computing.**

As chief strategy officer, Baker will work closely with agencies to implement strategies and technologies to modernize IT operations, lower sustainment cost, enhance performance and improve mission results. He will also lead strategic initiatives to leverage and scale Agilex's capabilities to address the needs of additional clients and larger programs.

- **There were a number of stories reporting on the VA claims backlog this week.**

Below are a couple:

- *PBS News Hour*: "[Veterans Affairs Backlog Files Stacked So High, They Posed Safety Risk to Staff](#)"
- *USA Today*: "[Army calls on VA to work harder on disability checks](#)"

## GENERAL HEALTH CARE NEWS

- **Although teen births have fallen over the past 20 years, nearly one in five teen births is a repeat birth, according to a [Vital Signs](#) report from the Centers for Disease Control and Prevention.**

More than 365,000 teens, ages 15-19 years, gave birth in 2010, and almost 67,000 (18.3 percent) of those were repeat births. A repeat birth is a second (or more) pregnancy resulting in a live birth before the age of 20.

Almost any pregnancy during the teen years can change the lives and futures of the mother, child and family. Infants born as a result of a repeat pregnancy are also more likely to be born too soon (premature) and born too small (at low birth weight).

Data from CDC's National Vital Statistics System show that repeat teen births in the United States decreased by more than six percent between 2007 and 2010. Despite this decline, the number of repeat births remains high and there are substantial racial/ethnic and geographic differences.

Repeat teen births were highest among American Indian/Alaska Natives (21.6 percent), Hispanics (20.9 percent), and non-Hispanic blacks (20.4 percent), and lowest among non-Hispanic whites (14.8 percent).

There were also geographic disparities. Repeat teen births ranged from 22 percent in Texas to 10 percent in New Hampshire. Data show that although nearly 91 percent of teen mothers who were sexually active used some form of contraception in the postpartum period, only 22 percent used contraceptives considered to be "most effective" (that is, where the risk is less than one pregnancy per 100 users in a year).

To prevent repeat teen births health care providers, parents, guardians, and caregivers can talk to both male and female teens about avoiding pregnancy by not having sex and can discuss with sexually active teens the most effective types of birth control to prevent repeat teen pregnancy.

For more information about teen pregnancy, visit CDC's Web site at <http://www.cdc.gov/teenpregnancy>.

- **The U.S. Food and Drug Administration approved Invokana (canagliflozin) tablets, used with diet and exercise, to improve glycemic control in adults with type-2 diabetes.**

Type-2 diabetes is the most common form of the disease, affecting about 24 million people and accounting for more than 90 percent of diabetes cases diagnosed in the United States. Over time, high blood sugar levels can increase the risk for serious complications, including heart disease, blindness, and nerve and kidney damage.

Invokana, manufactured for Janssen Pharmaceuticals, Inc., works by blocking the reabsorption of glucose by the kidney, increasing glucose excretion, and lowering blood glucose levels in diabetics who have elevated blood glucose levels. Its safety and effectiveness were evaluated in nine clinical trials involving over 10,285 patients with type-2 diabetes. The trials showed improvement in hemoglobin A1c levels (a measure of blood sugar control) and fasting plasma glucose (blood sugar) levels.

Invokana has been studied as a stand-alone therapy and in combination with other type-2 diabetes therapies including metformin, sulfonyleurea, pioglitazone, and insulin. Invokana should not be used to treat people with type-1 diabetes; in those who have increased ketones in their blood or urine (diabetic ketoacidosis); or in those with severe renal impairment, end stage renal disease, or in patients on dialysis.

## REPORTS/POLICIES

- **The GAO published “Defense Health Care: TRICARE Multiyear Surveys Indicate Problems with Access to Care for Non-enrolled Beneficiaries,” (GAO-13-364) on April 2, 2013.** This report examines what the results of the four-year beneficiary surveys indicate about the adequacy of access to care for non-enrolled beneficiaries; what the results of the four-year civilian provider surveys indicate about civilian providers' awareness and acceptance of TRICARE, and what the collective results of the surveys indicate about access to care by geographic area.  
<http://www.gao.gov/assets/660/653487.pdf>
- **The Institute of Medicine (IOM) published “Cognitive Rehabilitation Therapy for Traumatic Brain Injury: Model Study Protocols and Frameworks to Advance the State of the Science - Workshop Summary,” on March 29, 2013.** This report examines the barriers for evaluating the effectiveness of CRT care and for identifying suggested taxonomy, terminology, timing, and ways forward for CRT research.  
<http://www.iom.edu/Reports/2013/Cognitive-Rehabilitation-for-Traumatic-Brain-Injury-Workshop-Summary.aspx>

## HILL HEARINGS

- The House Veteran Affairs Subcommittee on Economic Opportunity will hold a legislative hearing on **April 10, 2013**, to examine H.R. 357, H.R. 562, H.R. 631, H.R. 844, H.R. 1305, H.R. 1316, H.R. 1402, a draft bill entitled “Improving Job Opportunities for Veterans Act of 2013.
- The House Veterans Affairs Committee will hold a hearing on **April 11, 2013**, to examine the Department of Veterans Affairs budget request for fiscal year 2014.
- 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

- There was no legislation proposed this week.

## MEETINGS

- 10th Annual World Healthcare Congress will be held **April 8-10, 2013**, in Washington DC <http://www.worldcongress.com/events/HR13000/>
- The 16<sup>th</sup> 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](http://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](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/>

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**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](mailto:katetheroux@federalhealthcarenews.com).**