

Federal Health Update

APRIL 28, 2017

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EXECUTIVE AND CONGRESSIONAL NEWS

- **As of April 28, 2017, Congress has not passed a continuing resolution, which is needed to keep the federal government open beyond April 30th.**
- **On April 21, 2017, the White House announced that President Trump will nominate Brett Giroir to be an assistant secretary of Health and Human Services.**

Giroir currently serves as president and CEO of ViraCyte, LLC and as an adjunct professor of Pediatrics, Tropical Medicine and Medical Ethics and Health Policy at Baylor College of Medicine in Houston. Prior to that he was the executive vice president and CEO at the Texas A&M Health Science Center, and earlier he served as director, Defense Science Office of the Defense Advanced Research Projects Agency (DARPA),

Giroir earned a A.B., magna cum laude in Biology from Harvard University and his M.D. from the University of Texas Southwestern Medical Center. He has received the Secretary of Defense Medal for Outstanding Public Service and the Texas A&M University System Award for Innovation. He serves as chair of the Veterans Choice Act Blue Ribbon Panel to Review and Assess the Veterans Health System, a Scientific Advisory Board Member at the Cancer Moonshots Program, MD Anderson Cancer Center, and is a Scientific Advisory Board Member at the A. Alfred Taubman Medical Research Institute, University of Michigan.

MILITARY HEALTH CARE NEWS

- **Belvoir Hospital is offering a new localized option for liver cancer.**

The targeted treatment delivers millions of the tiny beads to fight the tumor's growth and is injected directly into the liver artery. The process to insert the beads takes about 30 minutes and is minimally invasive. Following the insertion, patients are typically discharged within 4 to 6 hours. Side effects from the treatment can include flu-like symptoms in some patients, said Army Lt. Col. Llewellyn Lee, chief of Radiology at Belvoir Hospital.

Called SIR-Spheres Y-90 resin microspheres, the microscopic resin beads contain the radioactive isotope Yttrium-90 (Y-90) and emit radiation to kill cancer cells.

Due to their small size – about 1/3 the width of a human hair – they travel easily with the bloodstream directly to the liver tumors. The microspheres become lodged inside the microvasculature that supplies the tumor and kills the cancer cells through radiation, said Lee.

While the treatment improves quality of life, it isn't curative. The beads can cause some tumors to shrink, extending patients' lives and the quality of them, with research showing improvements in patients are statistically significant.

Using only chemotherapy, analysts found that liver tumors progressed within about 14 to 15 months. Adding Y90, bumped that time up to around 22 months.

VETERANS AFFAIRS NEWS

- **On April 27, 2017, President Trump signed an Executive Order entitled, "Improving Accountability and Whistleblower Protection at the Department of Veterans Affairs."**

The Executive Order is focused on improving "accountability and whistleblower protection" at the VA by creating an office dedicated to that purpose and the position of Special Assistant to the Secretary who will report directly to the Secretary and serve as executive director of the office.

The new executive director "will report directly to me as Secretary so that we can identify barriers that are preventing us from removing employees and people that we have identified that should no longer be working at VA," said Dr. David Shulkin, Secretary of Veterans Affairs. "We want make sure that we have employees who work hard and are committed to the mission of serving our Veterans."

The VA will establish the office and appoint the executive director within 45 days of the signing of the Executive Order.

The executive director will advise and assist the Secretary in using all available authorities to discipline or terminate any VA manager or employee who has violated the public's trust and failed to carry out his or her duties on behalf of Veterans. The executive director will also assist the Secretary in recruiting, rewarding, and retaining high-performing employees.

At the signing ceremony for the Executive Order, Secretary Shulkin also announced three new key initiatives at the Department.

- **Effective April 27, 2017, VA is entering a partnership agreement with the Department of**

Health and Human Services that will allow the assignment of medical professionals from the U.S. Public Health Service Commissioned Corps to provide direct patient care to Veterans in VA hospitals and clinics in underserved communities.

The initial agreement enables up to 20 officers from the Commissioned Corps to treat Veterans in VA facilities that are most in need of staffing support. The agreement also allows up to 10 more officers to help support coordination for veterans receiving non-VA community care.

- **The Department of Veterans Affairs announced a major new initiative to detect and prevent fraud, waste and abuse in the department.**

Effective April 27, 2017, this initiative has the potential to save tens of millions of taxpayer dollars currently at risk, for fraud, waste and abuse that can be redirected to better serve veterans.

The initiative will include bringing in the leading thinkers from the private sector and other government organizations in an advisory committee to identify and leverage cutting-edge fraud detection tools and; and coordinate all fraud, waste and abuse detection and reporting activities across the Department through a single office.

The department has identified potential savings in the area of improper payments to health care providers, major contracts, contracts for pharmaceuticals, and the delivery of benefits to veterans.

- **On April 27, 2017, VA amended guidelines to allow state-owned veteran nursing homes to follow state guidelines in the construction design of their facilities - removing red tape, while increasing access to services for Veterans.**

Up to now, to qualify for federal grant funding for veteran nursing homes in their state, governors and state officials have had to follow federal construction design guidelines. With today's announcement by the Secretary, that is no longer the case, and governors are freed up to follow their own state guidelines in the construction design of these facilities while still qualifying for the same level of federal grant funding as before.

GENERAL HEALTH CARE NEWS

- **The Department of Health and Human Services (HHS) and the Public Health Agency of Canada have launched competitions to spur innovative ideas to collect precise wellness data from people's daily activities and help public health experts make more informed health policy recommendations.**

With a prize pot at \$100,000 for the U.S. competition, the *Healthy Behavior Data Challenges* competition will focus on the use of new technologies such as wearable devices and mobile applications to collect data related to nutrition, sleep, physical activity, and sedentary behavior.

The competitions will include parallel data challenges that will run separately in both the U.S. and Canada. Residents and survey-data experts in both countries, as well as innovators in health and technology from both the public and private sectors, may enter each competition.

When it comes to our health, understanding the factors that influence our choices and behaviors are key to creating responsive programs and policies that improve health and well-being. Public health experts have traditionally relied on self-reported data from online questionnaires, in-person interviews, and telephone surveys to gain insight into a population's health. However,

real-time data sources are emerging with greater potential to provide a more accurate and complete picture of human health.

Public health surveillance is crucial in supporting researchers, policy makers and public health professionals as they advise patients, tailor prevention programs to specific populations, encourage positive behavior change, and identify emerging areas that require public health attention.

Learn more about the U.S. Healthy Behaviors Data Challenge at <https://www.challenge.gov/challenge/the-healthy-behavior-data-challenge/>.

- **The Centers for Disease Control and Prevention (CDC) released its new, interactive *U.S. Cancer Statistics* data displays that improve the access to and look of the official federal cancer statistics.**

Compelling graphics and analysis make it easy for **anyone** to explore and use the latest official federal cancer data by cancer type, state, demographics, and year.

Working together, the Centers for Disease Control and Prevention (CDC) and the National Cancer Institute (NCI) capture information on nearly every cancer diagnosed across the U.S. Each year, this information is updated and available as *U.S. Cancer Statistics*. The data comes from hospitals, physicians, and labs across the nation. Cancer counts and rates are essential to measuring progress and targeting action toward this major cause of death among Americans.

The data visualizations make it easy for anyone to access the latest and official U.S. cancer statistics to help cancer control efforts have the greatest impact. Cancer care and prevention professionals, planners, advocates, journalists and policymakers are encouraged to access this new tool to view and report cancer statistics.

To view the site, please visit: <https://nccd.cdc.gov/USCSDataViz/rdPage.aspx>

- **The U.S. Food and Drug Administration (FDA) expanded the approved use of Stivarga (regorafenib) to include treatment of patients with hepatocellular carcinoma (HCC or liver cancer) who have been previously treated with the drug sorafenib.**

This is the first FDA-approved treatment for a liver cancer in almost a decade.

According to the National Cancer Institute, approximately 40,710 people will be diagnosed with liver cancers in 2017 and approximately 28,920 will die of these diseases. HCC originates in the liver and is the most common form of liver cancer.

Stivarga is a kinase inhibitor that works by blocking several enzymes that promote cancer growth, including enzymes in the vascular endothelial growth factor pathway. Stivarga is also approved to treat colorectal cancer and gastrointestinal stromal tumors that are no longer responding to previous treatments.

This Stivarga application was granted Priority Review designation, under which the FDA's goal is to take action on an application within six months where the agency determines that the drug, if approved, would significantly improve the safety or effectiveness of treating, diagnosing or preventing a serious condition.

This indication for Stivarga also received Orphan Drug designation, which provides incentives to assist and encourage the development of drugs for rare diseases.

The FDA granted the approval of Stivarga to Bayer HealthCare Pharmaceuticals Inc.

REPORTS/POLICIES

- **The GAO published “Pediatric Trauma Centers: Availability, Outcomes, and Federal Support Related to Pediatric Trauma Care,” (GAO-17-334) on April 26, 2017.** This report examines what is known about the availability of trauma centers for children and the outcomes for children treated at different types of facilities, and how, if at all, federal agencies are involved in supporting pediatric trauma care and how these activities are coordinated.
<http://www.gao.gov/assets/690/683706.pdf>

HILL HEARINGS

- The Senate Armed Services Subcommittee on Personnel will hold a hearing on **May 3, 2017**, to examine building a flexible personnel system (F.A.S.T. Force) for a modern military.
- The Senate Appropriations: Subcommittee on Military Construction and Veterans Affairs, and Related Agencies will hold a hearing on **May 4, 2017**, to examine telemedicine in the Department of Veterans Affairs, focusing on leveraging technology to increase access, improve health outcomes, and lower costs.

LEGISLATION

- **S.925** (introduced April 25, 2017): VETS Act of 2017 was referred to the Committee on Veterans' Affairs Sponsor: Senator Joni Ernst [R-IA] (Introduced 04/25/2017) Cosponsors: (1) Committees: Senate - Veterans' Affairs Latest Action: 04/25/2017 Read twice and referred to the Committee on Veterans' Affairs. (All Actions) Tracker:
- **H.R.2180** (introduced April 26, 2017): To amend title 10, United States Code, to ensure that women members of the Armed Forces and their families have access to the contraception they need in order to promote the health and readiness of all members of the Armed Forces, and for other purposes was referred to the House Committee on Armed Services. Sponsor: Representative Jackie. Speier [D-CA-14]
- **H.R.2123** (introduced April 25, 2017): VETS Act of 2017 was referred to the House Committee on Veterans' Affairs Sponsor: Representative Glenn Thompson [R-PA-5]
- **H.J.Res.99** (introduced April 26, 2017) Making further continuing appropriations for fiscal year 2017, and for other purposes was referred to the House Committee on Appropriations. Sponsor: Representative Rodney P. Frelinghuysen [R-NJ-11]

MEETINGS

- The Heroes of Military Medicine Awards will be held on **May 4, 2017**, in Washington,

DC. <http://www.hjfc3.org>

- The 7th Annual Traumatic Brain Injury Conference will be held **May 24-25, 2017**, in Washington DC. <http://tbiconference.com/home/>
- The AUSA 2017 Annual Meeting & Exposition will be held **Oct. 9-11, 2017**, in Washington DC. <http://ausameetings.org/2017annualmeeting/>
- The 2017 AMSUS Annual Continuing Education Meeting will be held on **Nov. 27- Dec. 1, 2017**, at the Gaylord National Harbor, Md. <http://www.amsus.org/annual-meeting/>

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.