

Federal Health Update

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Happy Fourth of July!

EXECUTIVE AND CONGRESSIONAL NEWS

- **The House and Senate are in recess until July 9, 2013**
- **On June 25, 2013, the President signed into law H.R. 475, which expands the list of vaccines covered under the National Vaccine Injury Compensation Program administered by the Department of Health and Human Services by adding all seasonal influenza vaccines to the list of vaccines on which a Federal excise tax of 75 cents per dose must be imposed.**
- **Senate Committee on Veterans' Affairs Chairman Bernie Sanders (I-Vt.) released a statement regarding the Supreme Court ruling on federal benefits for married same-sex couples and urged the Department of Veterans Affairs to implement the decision and provide equal treatment for the spouses and children of all veterans.**

"I welcome today's decision that struck down the Defense of Marriage Act. The ruling means that all men and women who served our country and their families must be treated fairly and equally. I expect the Department of Veterans Affairs to honor the ruling by honoring all of our nation's veterans and their spouses and

children.”

“Pending before the veterans’ committee is legislation by Sen. Jeanne Shaheen (D-N.H.), the Charlie Morgan Military Spouses Equal Treatment Act of 2013 “The Veterans’ Affairs Committee will take up this legislation next month if VA cannot implement the Supreme Court’s decision without congressional action.”

MILITARY HEALTH CARE NEWS

- **The following statement was released by Defense Secretary Hagel regarding the Supreme Court ruling on the Defense of Marriage Act (DOMA):**

“The Department of Defense welcomes the Supreme Court’s decision today on the Defense of Marriage Act. The department will immediately begin the process of implementing the Supreme Court’s decision in consultation with the Department of Justice and other executive branch agencies. The Department of Defense intends to make the same benefits available to all military spouses -- regardless of sexual orientation -- as soon as possible. That is now the law and it is the right thing to do.

“Every person who serves our nation in uniform stepped forward with courage and commitment. All that matters is their patriotism, their willingness to serve their country, and their qualifications to do so. Today’s ruling helps ensure that all men and women who serve this country can be treated fairly and equally, with the full dignity and respect they so richly deserve.”

DoD issued a statement detailing some of the steps the department is taking to respond to the decision:

- The Department will immediately begin to update the identification card issuance infrastructure and update the applicable implementing guidance. We estimate that this process will take about 6-12 weeks. For civilian employees, the Department will look to OPM for guidance. For civilian employees who are eligible for ID card-related benefits, the Department intends that ID cards will be made available to same-sex spouses of civilian employees at the same time as same-sex spouses of military members.
- The Supreme Court’s ruling means that the Defense Department will extend all benefits to same-sex spouses of military personnel that are currently extended to opposite-sex spouses, including medical, dental, interment at Arlington National Cemetery, and with-dependent Basic Allowance for Housing. The Department will implement these benefit changes as soon as possible for same-sex spouses.
- The policies governing burial at Arlington National Cemetery will apply equally to same-sex and opposite-sex spouses.
- DoD is carefully reviewing command sponsorship for overseas tours, and all applicable Status of Forces agreements.

DoD will assess costs as the law is implemented.

- **Delta Dental, which administrates the TRICARE Retiree Dental Program (TRDP), announced that it will be extending its benefit year from Oct. 1 to Dec. 31 and enhancing benefits.**

Delta will prorate benefits this year from Oct. 1 to Dec. 31. This will not increase a member’s premium or deductible. The program will follow a calendar year beginning

2014. Below are updated features of the program:

- The Premium Program is raising the lifetime orthodontic maximum from \$1,500 to \$1,750;
- The average premium is \$43.64 for a single, \$84.04 for two people and \$138.57 for a family (3 or more). Premiums will decrease slightly on Jan. 1, 2014.
- Patients with diabetes qualify for an additional teeth cleaning annually (up to three per year);
- Starting Oct. 1, TRICARE Dental will only take electronic funds transfer (EFT) or government allotment as payment for premiums;
- TRDP has 200,000 provider locations and is adding more;
- DDS submits claim to TRDP at no charge; and

More information can be found at its website, www.trdp.org.

- **According to Law 360, The U.S. Government Accountability Office rejected Onsite Health Inc.'s protest of a \$750 million contract to provide health services to military reserves, saying in a decision published Monday that Onsite failed to show the incumbent contractor benefited from a conflict of interest related to a previous contract.**

Onsite protested with the GAO after the U.S. Department of Defense's TRICARE Management Activity awarded Logistics Health Inc. with a contract to provide services under the Reserve Health Readiness Program, which provides medical and dental care to DOD active duty, reserve and civilian personnel. The contract covered a wide range of medical services, including immunizations, physical exams, periodic health assessments, post-deployment health reassessments, mental health assessments, and dental exams and treatment, according to the decision.

Onsite had argued that Logistics Health had "unequal access to information" that gave rise to an organizational conflict of interest because most competitors had to come up with a process for mental health assessments with no guidance from the DoD, while Logistics Health knew the DOD would accept its approach because the agency had already approved it during a previous contract.

But the GAO said an incumbent's advantage was not necessarily the result of unfair government actions or preferential treatment, finding the DoD had acted reasonably and fairly when it chose Logistics Health's higher-rated \$749.4 million over Onsite's \$786.3 million offer.

Onsite had also claimed it wasn't given the same opportunities to negotiate that Logistics Health and another contractor had received because it was initially excluded from the competition when the GAO narrowed its five bidders down to two finalists. While Onsite was added back to competition after it pointed out errors in its initial evaluation, it had only one opportunity to explain and negotiate its offer with the DoD, as opposed to the two opportunities that the other finalists had.

But the GAO ruled that the second round of discussions, which included Onsite and the other two finalists, was enough for the contractor to identify and correct weaknesses in its proposal.

VETERANS AFFAIRS NEWS

- **In observance of post-traumatic stress disorder (PTSD) awareness month, the Department of Veterans Affairs National Center for PTSD invites the public to**

participate in its “Take the Step” campaign.

Throughout the month, online at www.PTSD.va.gov, the campaign has highlighted different topics so visitors can “Take the Step” to: know more about PTSD; challenge their beliefs; explore the treatment options available; and reach out to make a difference.

VA provides effective PTSD treatment for Veterans and conducts extensive research on PTSD, including prevention of stress disorders. Veterans are encouraged to use VA’s PTSD resources so they are able to recognize symptoms and seek help if the need arises. VA also encourages Veterans to share what they learn with someone they know to build awareness and support systems.

Following exposure to trauma, most people experience stress reactions but many do not develop PTSD. Mental health experts are not sure why some people develop PTSD and others do not. However, if stress reactions do not improve over time and they disrupt everyday life, VA encourages Veterans to seek help to determine if PTSD may be a factor.

Throughout the summer, VA will hold mental health summits at each of its 152 medical centers across the nation to establish and enhance positive working relationships with their community partners. The summits will help encourage community engagement in order to better address and understand the broad mental health care needs of veterans and their families.

For more information about PTSD, visit The National Center for PTSD Web site at www.ptsd.va.gov, which offers resources such as:

- [PTSD Coach mobile app](#), this award-winning app provides symptom-management strategies and it’s always with you when you need it.
- [Continuing education](#) opportunities for providers, including PTSD 101 courses, on the best practices in PTSD treatment (CEs/CMEs offered).
- [AboutFace](#): An online video gallery of Veterans talking about PTSD and how treatment can turn your life around.

▪ **A National Institutes of Health released findings from a study revealing that Vietnam vets with PTSD are more likely to have cardiovascular disease than those without PTSD.**

This is the first long-term study to measure the association between PTSD and heart disease using objective clinical diagnoses combined with cardiac imaging techniques.

Researchers from the Emory University Rollins School of Public Health in Atlanta, along with colleagues from other institutions, assessed the presence of heart disease in 562 middle-aged twins (340 identical and 222 fraternal) from the Vietnam Era Twin Registry. The incidence of heart disease was 22.6 percent in twins with PTSD (137 individuals) and 8.9 percent in those without PTSD (425 individuals). Heart disease was defined as having a heart attack, having an overnight hospitalization for heart-related symptoms, or having undergone a heart procedure. Nuclear scans, used to photograph blood flow to the heart, showed that individuals with PTSD had almost twice as many areas of reduced blood flow to the heart as individuals without PTSD.

The use of twins, identical and fraternal, allowed researchers to control for the influences of genes and environment on the development of heart disease and PTSD.

“This study suggests a link between PTSD and cardiovascular health,” said lead

researcher Viola Vaccarino, M.D., Ph.D., professor in the department of medicine at Emory University and chair of the department of epidemiology at the Rollins School of Public Health. “For example, repeated emotional triggers during everyday life in persons with PTSD could affect the heart by causing frequent increases in blood pressure, heart rate, and heartbeat rhythm abnormalities that in susceptible individuals could lead to a heart attack.”

When researchers compared the 234 twins where one brother had PTSD and the other did not, the incidence of heart disease was almost double in those with PTSD compared to those without PTSD (22.2 percent vs. 12.8 percent).

The effects of PTSD on heart disease remained strong even after researchers accounted for lifestyle factors such as smoking, physical activity level, and drinking; and major depression and other psychiatric diagnoses. Researchers found no link between PTSD and well-documented heart disease risk factors such as a history of hypertension, diabetes or obesity, suggesting that the disease may be due to physiologic changes, not lifestyle factors.

Affecting nearly 7.7 million U.S. adults, PTSD is an anxiety disorder that develops in a minority of people after exposure to a severe psychological trauma such as a life-threatening and terrifying event. People with PTSD may have persistent frightening thoughts and memories of their trauma, may experience sleep problems, often feel detached or numb, and may be easily startled. According to a 2006 analysis of military records from the National Vietnam Veterans Readjustment Study, between 15 and 19 percent of Vietnam veterans experienced PTSD at some point after the war.

The study used state-of-the-art imaging scans with positron emission tomography, which measures blood flow to the heart muscle and identifies areas of reduced blood flow, at rest and following stress.

GENERAL HEALTH CARE NEWS

- **The Department of Health and Human Services (HHS) is seeking innovators and entrepreneurs to apply for the HHS*Entrepreneurs* Program.**

Launched last year, HHS*Entrepreneurs* connects private sector innovators and entrepreneurs with teams of federal employees working on projects that address some of the biggest challenges in health, health care and human services..

HHS*Entrepreneurs* is recruiting the brightest experts and entrepreneurs in the nation who have demonstrated a significant record of achievement in their fields. In last year's competition for four projects, six individuals were selected from a field of more than 100 candidates. These highly talented professionals from business, industry, and academia bring successful innovations, models, and business practices to work on specific, high-priority projects over a period of six to 12 months.

This year, HHS*Entrepreneurs* intends to place six to eight external entrepreneurs into the following projects starting in the fall of 2013:

- Application of Design Thinking to Grants: The Administration for Children and Families seeks to improve grantee program implementation to better meet the needs of the low income populations that the agency serves through the creation of a low cost, replicable methodology to better assess grantee client problems.
- Cloud-Based GIS Maps Displaying Aggregate Data on Medical Malpractice: The Health Resources Services Administration seeks to build a public-facing Geographic Information Systems map application that displays medical malpractice data to allow researchers and the general public to better view,

analyze, and understand this information to support the development of novel tools and strategies to improve patient safety and protection.

- Health Information Exchange Accelerators: The Office of the National Coordinator for Health Information Technology seeks to accelerate health information exchange (HIE) by developing new tools that can reduce HIE implementation effort and cost for a wide range of health care entities including those that are not eligible for the Centers for Medicare & Medicaid Services (CMS) Electronic Health Records Incentive Program.
- Modernizing the National Plan and Provider Enumeration System: CMS seeks to improve the existing National Plan and Provider Enumeration System to improve usability, scalability and data quality.
- Predictive Analytics: Merging Innovation and Business Operations: The Office of the Assistant Secretary for Financial Resources seeks to leverage the field of predictive analytics to generate predictive risk models to proactively manage grants across HHS Operating and Staff Divisions.
- Publication Planning and Clearance Process Improvement Project: The Office of the Assistant Secretary for Public Affairs seeks to re-engineer its publications planning and clearance process to better meet the needs of a communications landscape dominated by digital and social media.

Applications are being accepted until Aug. 16, 2013. For more information and to apply, visit <http://www.hhs.gov/open/initiatives/entrepreneurs/index.html>.

- **The Advisory Committee on Immunization Practices (ACIP) voted (13 to 0) in favor of recommending FluBlok during the 2013-2014 influenza season for vaccination of persons 18 through 49 years of age with egg allergy of any severity.**

FluBlok was licensed by the Food and Drug Administration (FDA) in January 2013. Unlike current production methods for other available seasonal influenza vaccines, FluBlok does not use the influenza virus or chicken eggs in its manufacturing process.

The ACIP recommends that individuals with a severe egg allergy consult with a physician about their allergic conditions prior to vaccination if FluBlok is not available.

Additional information about FluBlok can be found at http://www.cdc.gov/flu/protect/vaccine/qa_flublok-vaccine.htm.

REPORTS/POLICIES

- **The Institute of Medicine published “Core Measurement Needs for Better Care, Better Health, and Lower Costs: Counting What Counts - Workshop Summary,” on June 24, 2013.** The workshop looked at how to improve the nation’s measurement capacity to track progress in a core measure set for better quality, lower cost, improved patient and public engagement, and better health outcomes.
<http://www.iom.edu/Reports/2013/Core-Measurement-Needs-for-Better-Care-Better-Health-and-Lower-Costs.aspx#sthash.eIPHDn8b.dpuf>
- **The Congressional Budget Office (CBO) was published “Rising Demand for Long-Term Services and Supports (LTSS) for Elderly People,” on June 26, 2013.** The

report noted that one-fifth of the total U.S. population will be elderly (that is, 65 or older) by 2050; the number of people age 85 or older will make up four percent of the population -- 10 times its share in 1950. In 2011, the LTSS expenditures for elderly people accounted for an estimated 1.3 percent of gross domestic product (GDP). CBO projects LTSS expenditure growth to range from 1.9 percent of GDP to 3.3 percent of GDP by 2050. <http://www.cbo.gov/publication/44363>

HILL HEARINGS

- The House Veterans Affairs Committee will hold a legislative hearing on **July 9, 2013**, to examine the Long-Term Care Veterans Choice Act'; H.R. 1443; H.R. 1612; H.R. 1702; H.R. 2065.
- The Senate Armed Services Committee will hold hearings on **July 16, 2013**, to examine the nominations of General Martin E. Dempsey, USA for reappointment to the grade of general and reappointment as Chairman of the Joint Chiefs of Staff, and Admiral James A. Winnefeld, Jr., USN for reappointment to the grade of admiral and reappointment as Vice Chairman of the Joint Chiefs of Staff, both of the Department of Defense.

LEGISLATION

- **H.R.2480** (introduced June 25, 2013): To direct the Secretary of Labor to issue an occupational safety and health standard to reduce injuries to patients, nurses, and all other health care workers by establishing a safe patient handling, mobility, and injury prevention standard, and for other purposes was referred to the Committee on Education and the Workforce, and in addition to the Committees on Energy and Commerce, and Ways and Means.
Sponsor: Representative John Conyers, Jr. [MI-13]
- **H.R.2499** (introduced June 25, 2013): To amend the Internal Revenue Code of 1986 to extend the exclusion from gross income for employer-provided health coverage for employees' spouses and dependent children to coverage provided to other eligible designated beneficiaries of employees was referred to the House Committee on Ways and Means.
Sponsor: Representative Jim McDermott [WA-7]
- **H.R.2504** (introduced June 26, 2013): To amend title XVIII of the Social Security Act to ensure more timely access to home health services for Medicare beneficiaries under the Medicare program was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce.
Sponsor: Representative Greg Walden, Greg [OR-2]
- **H.R.2510** (introduced June 26, 2013): To direct the Secretary of Defense to establish within the Department of Defense centers of excellence in the prevention, diagnosis, mitigation, treatment and rehabilitation of health conditions relating to exposure to open burn pits was referred to the House Committee on Armed Service.
Sponsor: Representative Timothy H. Bishop [NY-1]
- **H.R.2519** (introduced June 26, 2013): To direct the Secretary of State, the Secretary of Health and Human Services, and the Secretary of Veterans Affairs to provide assistance for individuals affected by exposure to Agent Orange, and for other purposes was referred to the Committee on Veterans' Affairs, and in addition to the Committees on Energy and Commerce, and Foreign Affairs.
Sponsor: Representative Barbara Lee [CA-13]
- **H.R.2524** (introduced June 26, 2013): To establish a program to provide incentive

payments to participating Medicare beneficiaries who voluntarily establish and maintain better health was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce.

Sponsor: Representative Erik Paulsen [MN-3]

- **S.1228** (introduced June 26, 2013): A bill to establish a program to provide incentive payments to participating Medicare beneficiaries who voluntarily establish and maintain better health was referred to the Committee on Finance.
Sponsor: Senator Ron Wyden [OR]
- **S.1251** (introduced June 27, 2013): A bill to establish programs with respect to childhood, adolescent, and young adult cancer was referred to the Committee on Health, Education, Labor, and Pensions.
Sponsor: Senator Jack Reed [RI]

MEETINGS

- The Learning in Disaster Health: A Continuing Education Workshop will be held on **Sept. 17-18, 2013**, in Washington DC. <http://hjf.cvent.com/events/learning-in-disaster-health-a-continuing-education-workshop/event-summary-8688867233a844d3b5a3afeccebbf288.aspx>
- 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 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.