

Federal Health Update

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Happy July Fourth!

EXECUTIVE AND CONGRESSIONAL NEWS

- **The House and Senate are in recess until July 7, 2015.**

MILITARY HEALTH CARE NEWS

- **The *Military Times* outlined some of the medical provisions being debated by the House and Senate in order to finalize defense authorization bill.**

Discrepancies to be addressed include access to urgent care and other medical appointments, mental health services for troops, family members and veterans, pharmacy fees and birth control.

The Senate bill would allow TRICARE beneficiaries up to four visits a year for urgent care without referrals, a move designed to reduce the number of emergency room visits for nonemergency treatment. The House bill does not include the urgent care benefit but also seeks to address ER overuse by requiring DoD to provide appointments for beneficiaries within the time

standards and wait time goals set by the department.

Earlier this year, the Defense Department proposed fining beneficiaries who frequently seek care at emergency rooms rather than make a physician's appointment or wait until normal office hours.

Service members and their families use ERs both at military and civilian hospitals at rates that exceed the national average, costing the government millions each year, according to reports from advocacy groups.

The Senate draft bill aims to improve mental health services both within the military and in local communities through a requirement that all DoD primary care physicians and mental health providers be trained to assess for suicide risk and manage patients at high risk for suicide. The bill also includes a proposal that would require DoD to develop a system that would encourage civilian mental health providers to receive training to treat service-related behavioral health conditions in troops, veterans and their families and be listed in a registry accessible to patients.

The Senate's version provision also includes an increase prescription drug co-payments starting next year. Under the legislation, fees would rise substantially by 2025 for nearly all types of medications, including generics. The House version rejects any proposals to raise TRICARE fees, including pharmacy co-payments.

Both versions contain provisions on birth control, with proposals in the House expanding birth control options available at military treatment facilities to include all methods approved by the Food and Drug Administration.

- **Centene announced it would buy managed care organization Health Net for \$6.8 billion, including \$500 million of debt.**

Centene provides health insurance plans to the under-insured and uninsured through Medicaid, Medicare and other products. Health Net also provides health care services through government-sponsored managed care plans and health plans to six million people across the U.S.

The merger of the two companies would address over 10 million members and have service revenue of around \$37 billion, with Centene's growth accelerating as it provides more options to uninsured and under-insured individuals. This includes Medicare Advantage, Tricare and veterans affairs programs.

Health Net is expected to strengthen the merged company's hold in the California Medicaid program, which serves over 12 million individuals. It also will give Centene access to California's dual demonstration program and expansion in other Medicaid and Medicare programs in the western United States. The combined companies are estimated to have \$150 million of annual cost synergies by the second year following the deal's close.

There was no word on how this would impact Health Net Federal Services.

- **The Congressional Budget Office (CBO) released a presentation given to the Western Economic Association, 90th Annual Conference, which outlines how the Defense Department (DoD) could save between \$18 billion and \$90 billion over 10 years by pursuing cost-sharing options and other efforts to reduce military healthcare expenditures.**

CBO analysis showed that increased annual fees for military retirees who are under TRICARE Standard and Extra plans, increased cost sharing for retirees who are not yet qualified for Medicare and requires non-reimbursable expenses for TRICARE for Life coverage.

DoD has proposed to combine the three TRICARE options into a single coverage, while the Military Compensation and Retirement Modernization Commission has suggested a plan to non-active duty members a choice of private insurance plans.

CBO predicts the expansion of disease management initiatives to result in about \$23 million in annual savings.

CBO also cited the hiring of additional fraud-detection auditors, consolidation of military health facilities and closure of the Uniformed Services University of the Health Sciences as some of the other ways in which DoD could realize nearly \$200 million in annual savings.

To view the presentation, visit: <http://www.cbo.gov/sites/default/files/114th-congress-2015-2016/presentation/50354-MilitaryHealthCarePresentation.pdf>

VETERANS AFFAIRS NEWS

- **A consortium led by the Department of Veterans Affairs' (VA) National Center for Posttraumatic Stress Disorder (PTSD) has launched the first brain tissue biorepository (also known as a "brain bank") – to support research on the causes, progression and treatment of PTSD affecting veterans.**

The national brain bank will follow the health of enrolled participants during their lifetime. Participants in the brain bank will donate their brain and other body tissue after their death. The donated tissue, along with each veteran's health information, will provide crucial information for use in research on PTSD and related disorders.

Dr. Friedman also is the founder of the national brain bank, and former executive director and current senior advisor to the National Center for PTSD. The national brain bank will investigate the impact of stress, trauma and PTSD on brain tissue in order to advance the scientific knowledge of PTSD, particularly the identification of PTSD biomarkers. Participating sites are located at VA medical centers in Boston, Massachusetts, San Antonio, Texas, West Haven, Connecticut, and White River Junction, Vermont, along with the Uniformed Services University of Health Sciences at Bethesda, Maryland (USUHS).

PTSD is a significant mental health concern among Veterans. In 2013, 533,720 veterans with primary or secondary diagnosis of PTSD received treatment at VA medical centers and clinics. PTSD is a serious mental disorder resulting from exposure to direct or indirect threat of death, serious injury or physical violence, including sexual violence.

The national brain bank is seeking Veterans with PTSD to participate in research about PTSD that affects veterans. Veterans without PTSD are also eligible to participate in the brain bank because it is important to study veterans without PTSD to compare the impact of stress, trauma and PTSD on brain tissue. Veterans interested in learning more about enrolling in the brain bank are encouraged to call its toll-free number 1-800-762-6609 or visit its website

http://www.research.va.gov/programs/tissue_banking/PTSD/default.cfm

GENERAL HEALTH CARE NEWS

- **To ensure that U.S. health care providers and facilities are prepared to safely identify, isolate, transport, and treat patients with Ebola and other emerging threats, the U.S. Department of Health and Human Services launched a National Ebola Training and Education Center.**

A collaborative effort among HHS' Office of the Assistant Secretary for Preparedness and Response ([ASPR](#)), the Centers for Disease Control and Prevention (CDC) and three academic institutions, the program supports further training of health care providers and facilities on strategies to manage Ebola and other emerging infectious diseases.

Through the effort, ASPR and CDC will provide \$12 million over the next five years to Emory University in Atlanta, Georgia; University of Nebraska Medical Center/Nebraska Medicine in Omaha, Nebraska; and Bellevue Hospital Center in New York City, New York, which together will co-lead the National Ebola Training and Education Center.

Emory University and Nebraska Medical Center have been working with CDC since December to train more than 460 health care workers from 87 health care systems, including 37 designated Ebola treatment centers, on all aspects of infection control and patient care for individuals with Ebola. Emory University and Nebraska Medical Center are offering additional training opportunities this summer for up to 400 staff from Ebola assessment hospitals.

The new National Ebola Training and Education Center will expand on the success of this initial work and offer state health departments and health care facilities additional access to the clinical expertise and training capabilities offered by these institutions.

HHS recently announced [nine regional Ebola treatment centers](#) that are part of [a national network of 55 Ebola treatment centers](#), but will have enhanced capabilities to treat a patient with confirmed Ebola or other highly virulent disease. Ebola treatment centers are staffed, equipped and have been assessed to have current capabilities, training and resources to provide the complex treatment necessary to care for a person with Ebola while minimizing risk to health care workers.

For more information on how to access the expertise through the National Ebola Training and Education Center, contact hpp@hhs.gov. To learn more about Ebola, visit www.cdc.gov/ebola. To learn more about preparedness, response and recovery from the health impacts of emergencies, visit www.phe.gov.

- **The U.S. Department of Health and Human Services published new training material to help provide health care professionals with education necessary to care for people living with multiple chronic conditions.**

The HHS Education and Training Resources on Multiple Chronic Conditions (MCC) for the Healthcare Workforce materials –a first of their kind– were created by the Office of the Assistant Secretary for Health, in collaboration with the Health Resources and Services Administration (HRSA).

Through these new resources, HHS seeks to bolster inter-professional education and training materials for health professions students, faculty, practitioners, direct care workers, and patients and their families that address the care of persons with multiple chronic conditions. In addition, health professions education focuses on caring for patients with a single disease rather than those with multiple chronic conditions.

One in four Americans has multiple concurrent chronic conditions and their care costs nearly two-thirds of health care spending in the United States.

The resources are available [online](#) and include:

- “Multiple Chronic Conditions Education and Training Repository” - a searchable database of existing educational resources that specifically address the care of persons living with MCC;
- “Multiple Chronic Conditions: A Framework for Education and Training” – a conceptual model that outlines the core domains and competencies for the inter-professional

health care team and;

- “Education and Training Curriculum on Multiple Chronic Conditions” - a web-based course consisting of six modules.

These resources enhance new and existing education and training programs throughout the United States by emphasizing the use of inter-professional teams to provide better quality care to this vulnerable population.

For more information about the [HHS Initiative on Multiple Chronic Conditions](#) and the [HHS Education and Training Resources on MCC](#), go to: <http://www.hhs.gov/ash/initiatives/mcc>.

REPORTS/POLICIES

- **The GAO published “Veterans’ Disability Benefits: VA Can Better Ensure Unemployability Decisions Are Well Supported,” (GAO-15-464) on July 2, 2015.** This report examines age-related trends in the population of individual unemployable beneficiaries and benefit payments; assesses the procedures used for benefit decision-making; and describes suggested options for revising the benefit. <http://www.gao.gov/assets/680/670592.pdf>
- **The Institutes of Medicine (IOM) published “Strategies to Improve Cardiac Arrest Survival: A Time to Act” on July 2, 2015.** This study examines the current status of, and future opportunities to improve, cardiac arrest treatment and outcomes in the United States. This report examines the complete system of response to cardiac arrest in the United States and identifies opportunities within existing and new treatments, strategies, and research that promise to improve survival and recovery of patients. <http://iom.nationalacademies.org/Reports/2015/Strategies-to-Improve-Cardiac-Arrest-Survival.aspx>

HILL HEARINGS

- The House Veterans Affairs on Subcommittee on Health will hold a legislative hearing on **July 14, 2015**, to examine H.R. 272; H.R. 353; H.R. 359; H.R. 421; H.R. 423; H.R. 1356; H.R. 1688; H.R. 1862; H.R. 2464; H.R. 2914; H.R. 2915; draft legislation to clarify the role of podiatrists in VA; and, draft legislation to authorize VA major medical facility construction projects for FY 2015 and to make certain improvements in the administration of VA medical facility construction projects.
- The Senate Armed Services Committee will hold a hearing on **July 14, 2015**, to examine the nominations of General Paul J. Selva, USAF, to be Vice Chairman of the Joint Chiefs of Staff, and General Darren W. McDew, USAF, to be commander of the U.S. Transportation Command.

LEGISLATION

- **H.R.2911** (introduced June 25, 2015): the *Small Business Healthcare Relief Act* was referred to the Committee on Ways and Means, and in addition to the Committees on Energy and Commerce, and Education and the Workforce
Sponsor: Representative Charles W. Boustany, Jr. [LA-3]

- **H.R.2915** (introduced June 25, 2015): the *Female Veteran Suicide Prevention Act* was referred to the House Committee on Veterans' Affairs
Sponsor: Representative Julia Brownley [CA-26]
- **S.1695** (introduced June 25, 2015): the *Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2016* was placed on the Senate Legislative Calendar,
Sponsor: Senator Roy Blunt [MO]
- **S.1697** (introduced June 25, 2015): the *Small Business Healthcare Relief Act* was referred to the Committee on Finance
Sponsor: Senator Chuck Grassley [IA]

MEETINGS

- The 2015 Military Health System Research Symposium will be held **Aug. 17-20, 2015**. The location has yet to be determined. <https://mhsrs.amedd.army.mil/SitePages/about-public.aspx>
- The 2015 AHRQ Research Conference, "Producing Evidence and Engaging Partners to Improve Health Care", will be held **Oct. 4-6, 2015**, in Crystal City, Va. <http://www.ahrq.gov/news/events/conference/index.html>
- The AUSA 2015 Annual Meeting & Exposition will be held **Oct. 12-14, 2015**, in Washington DC. <http://ausameetings.org/2015annualmeeting/>
- 2015 AMSUS Annual Continuing Education Meeting - The Society of Federal Health Professionals will be held on **Dec. 1-4, 2015**, in San Antonio, Texas. <http://amsusmeetings.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.