

Federal Health Update

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EXECUTIVE AND CONGRESSIONAL NEWS

- **On July 15, 2015, the House passed S. 984, the Steve Gleason Act, which allows ALS patients to access technology that gives them the ability to speak despite the disease's effect on communication.**

After a change in Medicare last year, the expensive devices were no longer covered by insurance. Steve Gleason was a New Orleans Saints football player who was diagnosed with ALS in 2011.

MILITARY HEALTH CARE NEWS

- **The Department of Defense released the Quarterly Suicide Report (QSR) for the first quarter of calendar year 2015.**

The report summarizes confirmed suicide counts for all services and components during the months of January through March. There were 57 suicides among service members in the active component, 15 suicides among service members in the reserve component and 27 suicides among service members in the National Guard.

The QSR is intended to communicate the department's suicide data on a routine basis. The QSR is available at <http://www.suicideoutreach.org/Docs/suicide-data/DoD-Quarterly-Suicide-Report->

[CY2015-Q1.pdf](#). Additional information is available on the Defense Suicide Prevention Office website at www.suicideoutreach.org.

Service members and their families who need support can reach out to the Military Crisis Line, which offers free and confidential support for those in crisis:

<http://veteranscrisisline.net/ActiveDuty.aspx>.

- **On July 13, 2015, Defense Secretary Ash Carter announced he was creating a working group to study over the next six months the policy and readiness implications of welcoming transgender persons to serve openly.**

The working group will be led by (Acting) Under Secretary of Defense for Personnel and Readiness Brad Carson, and composed of military and civilian personnel representing all the military services and the Joint Staff and will report to Deputy Secretary of Defense Bob Work.

At my direction, the working group will start with the presumption that transgender persons can serve openly without adverse impact on military effectiveness and readiness, unless and except where objective, practical impediments are identified.

Ash also announced that the authority in all administrative discharges for those diagnosed with gender dysphoria or who identify themselves as transgender will be elevated to Under Secretary Carson, who will make determinations on all potential separations.

VETERANS AFFAIRS NEWS

- **On July 13, 2015, the Department of Veterans Affairs (VA) sent a series of documents to Congress, urging it to act expeditiously and approve its pending request for fiscal year 2015 budget flexibility.**

The request, formally transmitted on June 23, seeks the transfer of funds from the Choice Program to continue VA's efforts to increase Veterans' access to care and life-saving pharmaceuticals.

Below are the letter and full text of the documents submitted to Congress:

- [Signed letter to Congress](#)
- [Putting Veterans First: Legislative Request](#)
- [Draft Legislation](#)
- [Choice Act Obligations](#)
- [Care in Community Overview](#)
- [Hepatitis C Treatment Summary](#)

Nationally, VA completed more than 56.2 million appointments between June 1, 2014, and May 31, 2015 – 2.6 million more appointments than were completed during the same time period in 2013-2014. VA also made more than three million authorizations for outside care.

GENERAL HEALTH CARE NEWS

- **The Department of Health and Human Services (HHS) released *2015 Update to the National Plan to Address Alzheimer's Disease*, reflecting our nation's progress toward**

accomplishing goals set in 2012 and current action steps to achieving them.

The [2015 Update](#) was developed with input from experts in aging and Alzheimer's disease from federal, state, private and non-profit organizations, as well as caregivers and people with the disease. The *2015 Update* includes the following five goals:

- Finding ways to prevent and effectively treat Alzheimer's disease by 2025;
- Enhancing care for Alzheimer's patients;
- Expanding support for people with dementia and their families; improving public awareness; and
- Tracking data to support these efforts.

The *2015 Update* includes an overview of federal agency accomplishments in 2014, including specific information on completed and ongoing action steps:

- HHS's National Institutes of Health (NIH) has developed [research agenda recommendations](#) to provide a framework for a bold and transformative Alzheimer's disease research agenda over the next few years that will help the research community meet the goals of the National Plan.
- The HHS Health Resources and Services Administration announced that it will create an Alzheimer's disease and Related Dementias training curriculum to build a health care workforce with the necessary skills to provide high quality dementia care and ensure timely and accurate detection and diagnosis of dementia. .
- The HHS Administration on Community Living is launching a \$4 million Brain Health Awareness Campaign, featuring Academy Award winning actress Marcia Gay Harden to help older adults better understand changes that occur in the brain as people age and reduce the fear of discussing concerns with family members and clinicians.
- HHS also, in conjunction with OCR and the Advisory Council on Alzheimer's Research, Care, and Services, released the Alzheimer's and Related Dementias: HIPAA Resource List. This resource list gives guidance to providers regarding consent, capacity, and decision making when treating individuals with dementia.

For more information about the National Alzheimer's Project Act and the 2015 Update to the National Plan, visit <http://aspe.hhs.gov/daltcp/napa/>

▪ **The Department of Health and Human Services launched the first online collection of the federal resources and capabilities available to mitigate the health impacts of emergencies.**

The HHS Office of the Assistant Secretary for Preparedness and Response ([ASPR](#)) sponsored the [HHS Response and Recovery Resources Compendium](#) to aid state, tribal, territorial, local officials in health and emergency management as they guide communities in responding to and recovering from disasters.

The compendium offers an easy-to-navigate, comprehensive, web-based repository of HHS products, services and capabilities available to state, state, tribal, territorial, and local agencies before, during, and after public health and medical incidents. The information spans 24 categories, and each category showcases the relevant disaster resources available from HHS and partner agencies, a brief description of each resource and information on accessing each one.

Categories range from patient movement to hospital care and from situational awareness to decontamination. Resources include platforms such as GeoHEALTH and the HHS emPOWER Map that use Geographic Information System capabilities to support health response as well as consultation services, such as emergency planning, disease surveillance and tracking, and food,

drug and device safety.

Resources also include personnel, such as medical staff from the U.S. Public Health Service and National Disaster Medical System who can deploy to communities to augment local hospital, shelter or public health staff.

The compendium will be updated regularly and expanded as federal agencies add products, capabilities and services to help communities prepare for, respond to and recover from the health impacts of disasters.

- **The Centers for Medicare & Medicaid Services (CMS) for the first time published star ratings on Home Health Compare, CMS's public information website for Home Health Agencies.**

Star ratings can help consumers more quickly identify differences in quality and make use of the information when selecting a health care provider. In addition to summarizing certain data about Home Health Agency performance for consumers, star ratings can also help the agencies identify areas for improvement.

Each Home Health Agency will receive a single summary Quality of Patient Care Star Rating encompassing that agency's relative performance on 9 of the 29 quality measures already posted on Home Health Compare. The measures are calculated using information from patient assessments performed by the HHA and from Medicare claims submitted by the HHA. When calculating patient outcomes, statistical models are used to adjust for differences in the types of patients served by different agencies.

The new Home Health Compare Quality of Patient Care Star Ratings will be updated each quarter as more recent data become available. In addition, CMS plans to introduce additional star ratings based on a patient experience of care survey (the Home Health Consumer Assessment of Healthcare Providers and Systems (HHCAHPS) instrument) in January 2016. It is the sixth star rating system that has been added by this Administration to Medicare.gov.

Star ratings are currently publicly displayed on Nursing Home Compare, Physician Compare, Dialysis Facility Compare, the Medicare Advantage Plan Finder, and Hospital Compare.

For more information about the Home Health Quality of Patient Care Star Ratings, please visit the CMS Home Health Star Ratings web site at: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/HHQIHomeHealthStarRatings.html>

REPORTS/POLICIES

- **The GAO published "Veterans' Disability Benefits: Improvements Needed to Better Ensure VA Unemployability Decisions Are Well Supported," (GAO-15-735T) on July 15, 2015.** This report examines age-related trends in the population of Total Disability Individual Unemployability (TDIU) 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/680/671414.pdf>

HILL HEARINGS

- There are no hearings scheduled next week.

LEGISLATION

- **H.R.3019** (introduced July 10, 2015): the *Veterans Residential Care Choice Act* was referred to the House Committee on Veterans' Affairs
Sponsor: Representative Rosa L. DeLauro [CT-3]
- **H.R.3020** (introduced July 10, 2015): Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2016 was placed on the legislative calendar.
Sponsor: Representative Tom Cole [OK-4]
- **H.R.3024** (introduced July 10, 2015): To amend title XVIII of the Social Security Act to permit review of certain Medicare payment determinations for disproportionate share hospitals, and for other purposes was referred to the House Committee on Ways and Means.
Sponsor: Representative Charles W. Boustany, Jr. [LA-3]
- **H.R.3037** (introduced July 13, 2015): the *Hospice Care Access Improvement Act of 2015* was referred to the House Committee on Ways and Means
Sponsor: Representative Tom Reed [NY-23]
- **H.R.3053** (introduced July 13, 2015): the *Medicare Ventricular Assist Device Access Act of 2015* was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce
Sponsor: Representative Larry Bucshon [IN-8]
- **H.R.3057** (introduced July 13, 2015): the *EAT for Health Act of 2015* was referred to the House Committee on Energy and Commerce
Sponsor: Representative Raul M. Grijalva [AZ-3]
- **H.R.3061** (introduced July 14, 2015): To amend part D of title XVIII of the Social Security Act to require the Secretary of Health and Human Services to negotiate covered part D drug prices on behalf of Medicare beneficiaries was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means.
Sponsor: Representative Peter Welch [VT]
- **H.R.3081** (introduced July 15, 2015): To amend title XVIII of the Social Security Act to permit certain Medicare providers licensed in a state to provide telemedicine services to certain Medicare beneficiaries in a different state referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce.
Sponsor: Representative Devin Nunes [CA-22]
- **S.1757** (introduced July 14, 2015): A bill to amend title XVIII of the Social Security Act to promote health care technology innovation and access to medical devices and services for which patients choose to self-pay under the Medicare program, and for other purposes was referred to the Committee on Finance.
Sponsor: Senator Rob Portman [OH].
- **S.1778** (introduced July 15, 2015): A bill to amend title XVIII of the Social Security Act to permit certain Medicare providers licensed in a State to provide telemedicine services to certain Medicare beneficiaries in a different state was referred to the Committee on Finance.
Sponsor: Senator Mazie Hirono [HI]

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/>

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