Welcome to Federal Health Update. This newsletter is a compilation of the latest news in the federal health care sector.

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The Update will not be published on Aug 24 and 31, 2018.

EXECUTIVE AND CONGRESSIONAL NEWS

- The House is in recess until Sept. 4, 2018.


MILITARY HEALTH CARE NEWS

- The Department of Defense announced it will extend eligibility for Military OneSource benefits from the current 180 days to 365 days after separation or retirement from military service to ensure all service members and families have access to comprehensive support as they transition to civilian life.
This change goes into effect today in accordance with the John S. McCain National Defense Authorization Act for fiscal year 2019.

Military OneSource provides information, resources and support for active-duty, National Guard and reserve service members, their families and survivors. Provided at no cost, Military OneSource gives exclusive access to programs, tools, and benefits designed to help ensure service members and their families are mission-ready and able to thrive in both their military and post-military lives.

As a DOD program, Military OneSource offers a wide range of services designed exclusively for the military community. Services include help with relocation, tax support, financial planning, health and wellness coaching, as well as confidential non-medical counseling and specialty consultations for spouse employment, education, adoption, elder care, special needs and much more.

Military OneSource services are accessible 24/7. Service members and family members may call Military OneSource at 800-342-9647 or go to www.militaryonesource.mil. To explore additional benefits that may be available through the Department of Veterans Affairs, go to https://explore.va.gov/

TRICARE is hosting a webinar on Aug 23, 2018 from 1:00 to 2:00 pm EDT to answer beneficiaries’ questions about their benefit. The “Ask TRICARE” webinar will include a panel of subject matter experts to answer your questions about TRICARE health care, pharmacy, and dental programs.

Our panelists include representatives from major TRICARE offices and programs, including:

- TRICARE Policy and Benefits
- TRICARE For Life
- TRICARE Reserve Select
- TRICARE Retired Reserve
- TRICARE Overseas Program
- TRICARE Pharmacy Program
- TRICARE Dental Plans

Registration is limited. One must be registered and in the webinar platform to submit a question electronically. Phone participants will only be able to listen to the webinar. To register, please visit https://register.gotowebinar.com/register/8265415227036139522

VETERANS AFFAIRS NEWS

Effective Aug. 13, the U.S. Department of Veterans Affairs (VA) updated portions of the VA Schedule for Rating Disabilities (VASRD, or Rating Schedule) that evaluate conditions related to the skin.

The VASRD is the collection of federal regulations used by Veterans Benefits Administration claims processors to evaluate the severity of disabilities and assign disability ratings. VA is in the process of updating all 15 body systems of the VASRD to reflect modern medicine more accurately and provide clearer rating decisions.
No conditions were removed from the new skin rating schedule. However, several diagnostic codes were restructured or revised. The complete list of updates to the rating schedule for skin conditions is now available online. Claims pending prior to August 13 will be considered under both the old and new rating criteria, and whichever criteria are more favorable to the veteran will be applied. Claims filed on or after August 13 will be rated under the new rating schedule.

By updating the rating schedule for skin conditions, VA claims processors can make more consistent decisions with greater ease and ensure veterans understand these decisions.

VA has issued several VASRD updates since September 2017, including updates for dental and oral conditions, conditions related to the endocrine system, gynecological conditions and disorders of the breast and eye conditions.

- **On Aug. 13, 2018, the Department of Veterans Affairs (VA) announced several leadership changes that will take effect shortly.**

  The leadership changes are as follows:
  - Pamela Powers will become VA chief of staff. Powers is a retired Air Force colonel and previously served with Secretary Wilkie as the chief of staff for the undersecretary of defense for personnel and readiness;
  - Peter O’Rourke will become a senior advisor at VA. O’Rourke previously served as VA chief of staff, and most recently was acting secretary of veterans affairs.
  - Jacquelyn Hayes-Byrd will become acting assistant secretary for human resources and administration. She was previously VA deputy chief of staff, and served most recently as acting chief of staff at VA.
  - Chris Syrek will become VA deputy chief of staff. He was previously executive director of state and local government relations, and served most recently as acting deputy chief of staff at VA.

**GENERAL HEALTH CARE NEWS**

- **The Department of Health and Human Services (HHS) announced $125 million in Quality Improvement grant awards to 1,352 community health centers across all U.S. states, territories and the District of Columbia.**

  Funded by the Health Resources and Services Administration (HRSA), health centers will use these funds to continue to improve quality, efficiency and the effectiveness of healthcare delivery in the communities they serve.

  HRSA’s Quality Improvement grant awards promote continued community health center improvements in the following categories: Expanding access to comprehensive care, improving care quality and outcomes, increasing comprehensive care delivery in a cost-effective way, addressing health disparities, advancing the use of health information technology, and delivering patient-centered care.

  Community health centers that exceed national clinical quality benchmarks, like Healthy People 2020 goals, receive special designation as National Quality Leaders. The top 30 percent of community health centers that achieve the best overall clinical performance receive designation as Health Center Quality Leaders.

  HRSA also released new data compiled from health centers through its Uniform Data System (UDS) reporting, providing an update on health centers’ provision of primary healthcare services.
In 2017, more than 27 million people (approximately 1 in 12 U.S. residents) relied on a HRSA-supported health center for affordable, accessible primary healthcare including:

- One in nine children 17 years or younger;
- One in five rural residents;
- One in three people living in poverty; and
- More than 355,000 U.S. veterans.

For more than 50 years, health centers have delivered affordable, accessible, quality and cost-effective primary healthcare services to patients. Today, nearly 1,400 health centers operate more than 11,000 service delivery sites nationwide.

For a list of FY 2018 Quality Improvement Awards recipients, visit: [https://bphc.hrsa.gov/programopportunities/fundingopportunities/qualityimprovement/index.html](https://bphc.hrsa.gov/programopportunities/fundingopportunities/qualityimprovement/index.html)

To learn more about HRSA’s Health Center Program, visit: [http://bphc.hrsa.gov/about](http://bphc.hrsa.gov/about).

- **One in 4 U.S. adults – 61 million Americans – have a disability that impacts major life activities, according to a Centers for Disease Control and Prevention report.**

  The most common disability type, mobility, affects 1 in 7 adults. With age, disability becomes more common, affecting about 2 in 5 adults age 65 and older.

  Using data from the 2016 Behavioral Risk Factor Surveillance System (BRFSS), this is the first CDC report of the percentage of adults across six disability types:

  - Mobility (serious difficulty walking or climbing stairs) – 13.7 percent
  - Cognition (serious difficulty concentrating, remembering, or making decisions) – 10.8 percent
  - Hearing (serious difficulty hearing) – 6.8 percent
  - Vision (serious difficulty seeing) – 5.9 percent
  - Independent living (difficulty doing errands alone) 4.6 percent
  - Self-care (difficulty dressing or bathing) – 3.7 percent

  These data show that disability is more common among women, non-Hispanic American Indians/Alaska Natives, adults with lower income, and adults living in the South Census region of the United States. The report also shows that:

  After mobility disability, the next most common disability type is cognition, followed by independent living, hearing, vision, and self-care.

  The percentage of adults with disability increased as income decreased. In fact, mobility disability is nearly five times as common among middle-aged (45- to 64-year old) adults living below the poverty level compared to those whose income is twice the poverty level.

  It is more common for adults 65 years and older with disabilities to have health insurance coverage, a primary doctor, and receive a routine health checkup during the previous 12 months, compared to middle-aged and younger adults with disabilities.

  Disability-specific differences in the ability to access health care are common, particularly among adults 18- to 44-years old and middle-aged adults. Generally, adults with vision disability report the least access to health care, while adults with self-care disability report the most access to care.
For more information about CDC’s work to support inclusive settings for people with disabilities, go to http://www.cdc.gov/disabilities.

REPUTS/POLICIES

- The GAO published “NIH Research: Action Needed to Ensure Workforce Diversity Strategic Goals Are Achieved,” (GAO-18-545) on Aug. 10, 2018. This report examines NIH’s efforts to encourage workforce diversity. GAO also reviewed relevant laws and NIH policies, programs, and initiatives, and interviewed NIH officials and stakeholders from the scientific research community. https://www.gao.gov/assets/700/693872.pdf

HILL HEARINGS

- The Senate Armed Services Committee will hold a hearing on Aug. 21, 2018, to examine the nominations of Alan R. Shaffer to be deputy under secretary of defense for acquisition and sustainment; Veronica B. Daigle to be assistant secretary of defense for readiness and force management; E. Casey Wardynski, to be assistant secretary of the army for manpower and reserve affairsl and Alex A. Beehler to be assistant secretary of the army for energy, installations, and environment.

LEGISLATION

- S.3016 (introduced Aug. 15, 2018): the Action for Dental Health Act of 2018 was placed on the Senate Legislative Calendar. Sponsor: Senator Cory A. Booker [D-NJ]

MEETINGS

- The AUSA 2018 Annual Meeting & Exposition will be held Oct. 8-10, 2018, in Washington DC. http://ausameetings.org/2018annualmeeting/
- The 2018 AMSUS Annual Continuing Education Meeting will be held on Nov. 26-30, 2018, at the Gaylord National Harbor, Md. http://www.amsusmeetings.org/home-2/

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