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The Update will not be published on Aug. 10 and 24, 2017.

EXECUTIVE AND CONGRESSIONAL NEWS

- Congress went on summer recess until September 2017.

- On Aug. 3, 2017, the Senate passed H.R. 2430, the FDA Reauthorization Act of 2017. This legislation amends the Federal Food, Drug, and Cosmetic Act to revise and extend the user-fee programs for prescription drugs, medical devices, generic drugs, and biosimilar biological products, and for other purposes.

MILITARY HEALTH CARE NEWS

- TRICARE will hold a webinar on Aug. 15, 2017 from 1 to 2 p.m. EDT to discuss how to use TRICARE For Life with Medicare and what you need to do to keep your TRICARE coverage.

  The presenter will share information about:
  
  o TRICARE For Life and Medicare eligibility
  o Medicare enrollment
TRICARE For Life is Medicare-wraparound coverage for TRICARE beneficiaries. You’re eligible for TRICARE For Life if you have Medicare Part A and Medicare Part B, regardless of your age or where you live. Once you have both Medicare Parts A and B, you automatically receive TRICARE benefits under TRICARE For Life.

Medicare is a federal health insurance program for people who are age 65 or older, under age 65 with certain disabilities, and those with end-stage renal disease, Lou Gehrig’s disease or certain cases of mesothelioma.

Participants can submit questions for the presenter to answer during the live webinar. Be sure not to include personal health information when you submit your question.

VETERANS AFFAIRS NEWS

- On Aug. 3, 2017, President Trump and VA Secretary Dr. David Shulkin announced three initiatives that will expand access to health care for veterans across the country.

Using telehealth technology and mobile applications, VA will connect with more veterans to provide services where they live.

Through VA Telehealth VA can practice over 50 clinical specialties, from tele-dermatology to tele-intensive care. Many of the veterans using telehealth live in rural areas or far away from their closest VA medical facility. VA already has the largest telehealth program in the country. Last year, 700,000 veterans accessed telehealth services through the VA.

The three initiatives are:

- The “Anywhere to Anywhere VA Health Care” initiative will empower VA to hire providers in major metropolitan areas, where there is an abundance of clinical services and connect them to better serve veterans in rural communities that lack sufficient medical services.

- The VA Video Connect provides a secure and web-enabled video service that makes it easy for veterans to connect with their VA providers by video on their own mobile phones or personal computers. VA Video Connect is currently being used by more than 300 VA providers at 67 hospitals and their associated clinics. It will be rolled out to VA providers and veterans across the country over the next year.

- The Veteran Appointment Request app (VAR), an application that makes it possible for veterans to use their smartphone, tablet or computer to schedule or modify appointments at VA facilities. The VAR capability is currently available to veterans at several locations nationwide. During its initial rollout, Veterans used the app to book more than 4,000 appointments with their providers. As of Aug. 3, VA will continue to roll out the application nationwide – bringing the capability to all VA facilities and clinics.

To find out more about VA’s telehealth program, visit https://www.telehealth.va.gov/.
GENERAL HEALTH CARE NEWS

- The U.S. Food and Drug Administration approved Vyxeos for the treatment of adults with two types of acute myeloid leukemia (AML): newly diagnosed therapy-related AML (t-AML) or AML with myelodysplasia-related changes (AML-MRC). Vyxeos is a fixed-combination of chemotherapy drugs daunorubicin and cytarabine.

AML is a rapidly progressing cancer that forms in the bone marrow and results in an increased number of white blood cells in the bloodstream. The National Cancer Institute at the National Institutes of Health estimates that approximately 21,380 people will be diagnosed with AML this year; approximately 10,590 patients with AML will die of the disease in 2017. T-AML occurs as a complication of chemotherapy or radiation in approximately 8 to 10 percent of all patients treated for cancer within an average of five years after treatment. AML-MRC is characterized by a history of certain blood disorders and other significant mutations within cancer cells. Patients with t-AML or AML-MRC have very low life expectancies.

Manufactured by Jazz Pharmaceuticals, the prescribing information for Vyxeos includes a boxed warning not to interchange Vyxeos with other daunorubicin- and/or cytarabine-containing products.

The FDA granted this application Priority Review and Breakthrough Therapy designations. Vyxeos also received Orphan Drug designation, which provides incentives to assist and encourage the development of drugs for rare diseases.

- Suicide among teen girls between the ages of 15 and 19 has hit a 40-year high, according to new data released by the National Center for Health Statistics.

Male teens, by comparison, experienced an increase in suicides from the mid-1980s to mid-1990s.

Academic pressure, cyberbullying and undiagnosed mental disorders could offer a partial explanation of why a young person might consider or attempt suicide, according to experts. This is especially true of young people who are gay, trans or questioning.

In 2015, more than 44,000 people took their own lives, according to the Centers for Disease Control and Prevention. Overall, suicide is the second-leading cause of death for people between the ages of 10 and 34. More than one million people attempt suicide every year.

Men are more likely to die by suicide, but women are more likely to attempt it, the CDC reported. The disparity comes down to method: men gravitate towards suicide by firearms and hanging while women turn to overdosing on medication. The latter has a higher chance of reversal with timely medical attention.

REPORTS/POLICIES

- There were no reports published this week.

HILL HEARINGS

- There are no relevant hearings scheduled until September.
**LEGISLATION**

- **H.R.3615** (introduced July 28, 2017): To direct the Secretary of Health and Human Services to conduct or support a comprehensive study comparing total health outcomes, including risk of autism, in vaccinated populations in the United States with such outcomes in unvaccinated populations in the United States, and for other purposes was referred to the House Committee on Energy and Commerce. Sponsor: Representative Bill Posey [R-FL-8]

- **S.1723** (introduced Aug. 2, 2017): A bill to appropriate amounts to the Department of Veterans Affairs to improve health care furnished by the Department, and for other purposes was referred to the Committee on Veterans' Affairs. Sponsor: Senator Bernard Sanders [I-VT]

- **S.1688** (introduced Aug. 2, 2017): A bill to amend title XVIII of the Social Security Act to allow the Secretary of Health and Human Services to negotiate fair prescription drug prices under part D of the Medicare program was referred to the Committee on Finance. Sponsor: Senator Amy Klobuchar [D-MN]

- **H.R.3557** (introduced Sept. 28, 2017): To amend title 38, United States Code, to increase the number of health care professionals employed by the Department of Veterans Affairs by improving the Department of Veterans Affairs Education program was referred to the House Committee on Veterans' Affairs Sponsor: Representative Greg. Walden [R-OR-2]

**MEETINGS**


- 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/](http://www.amsus.org/annual-meeting/)

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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.