**EXECUTIVE AND CONGRESSIONAL NEWS**

- *Pro Publica* published a story that examines the Trump Administration’s efforts to expand private health care for veterans through the Mission Act, at an estimated cost of $13.9 billion to $32.1 billion over five years.

  The article reports that veteran service organizations supported the Mission Act because they thought the Administration would support additional funding to the VA. However, it appears the VA would have to shift funds from its health care system to pay for the private care. Currently the share of VA care delivered in the private sector has grown to 36 percent from 22 percent in 2014. Pro Publica suggests the Administration is weighing policy changes that would shift as much as 55 percent of veterans to private providers.

  To read the full article, visit: [https://www.propublica.org/article/trump-administration-plots-costly-private-care-expansion-for-veterans](https://www.propublica.org/article/trump-administration-plots-costly-private-care-expansion-for-veterans)

**MILITARY HEALTH CARE NEWS**

- **TRICARE Open Enrollment** began on Nov. 12.

  TRICARE Prime and TRICARE Select beneficiaries will be able to make changes to their health care coverage, if they choose.

  Information on TRICARE plans and enrollment is available at [TRICARE](https://www.tricare.mil). Enrollment changes made in TRICARE plans take effect Jan. 1.
TRICARE beneficiaries who are satisfied with the plan they currently have don’t need to take any action during the enrollment period. Their plans will be enrolled automatically.

Other changes in TRICARE include retiree dental coverage and vision coverage for military family members.

On Dec. 31, the TRICARE Retiree Dental Program will end. Retirees can continue dental coverage by enrolling in the Federal Employees Dental and Vision Insurance Program during the Federal Benefits Open Season.

Information on FEDVIP plans and costs is available at BENEFEDS. Information on the open season for FEDVIP is at TRICARE.

Enrollment changes made during the Federal Benefits Open Season in both retiree dental coverage and vision for family members will go into effect Jan. 1.

The enrollment period ends Dec. 10.

VETERANS AFFAIRS NEWS

- The National Academies of Sciences, Engineering, and Medicine released a study that found sufficient evidence of an association for hypertension and monoclonal gammopathy of undetermined significance (MGUS) as a result to exposure to Agent Orange and other herbicides used during the Vietnam War.

The report, Veterans and Agent Orange: Update 11 (2018), researchers said they found “sufficient” evidence that exposure to Agent Orange is associated to hypertension. The sufficient category indicates that there is enough epidemiologic evidence to conclude that there is a positive association.

While some new studies suggest an association might exist between exposure to the chemicals of interest and Type 2 diabetes, the committee could not come to a consensus on whether this and the other available evidence continued to be limited or suggestive, or merited elevation to sufficient. Both newly and previously reviewed studies consistently show a relationship between well-characterized exposures to dioxin and dioxin-like chemicals and measures of diabetes health outcomes in diverse cohorts, including Vietnam veteran populations. The risk factors for diabetes, such as age, obesity, and family history of the disease, were controlled for in the analyses of most studies reviewed. However, some members of the committee believed that the lack of exposure specificity and the potential for residual uncontrolled confounding influences complicated attribution of the outcome to the chemicals of interest.

In addition, the study examined the possible generational health effects that may be the result of herbicide exposure among male Vietnam veterans, myeloproliferative neoplasms, and glioblastoma multiforme (brain cancers). The evidence of association for exposure to the chemicals of interest and glioblastoma (and other brain cancers) remains inadequate or insufficient, the study concluded.

Because there are relatively few studies on the health effects of paternal chemical exposures on their descendants, and none address Vietnam veterans specifically, researchers recommended further specific study of the health of descendants of male Vietnam veterans.

According to military records, between 2.6 million and 4.3 million service members were exposed to Agent Orange and other herbicides during the Vietnam War.
The Tick-Borne Disease Working Group, a federal advisory committee established by Congress in the 21st Century Cures Act, issued its first report on Nov. 14, 2018. The report recommends a multi-pronged response to address these diseases that affect more than 300,000 Americans each year.

Top recommendations included increases in federal resources to meet urgent research and patient care needs, such as enhanced surveillance, prevention, diagnostic and treatment options. The Working Group identified the following priorities:

- Improve early and accurate diagnosis and treatment.
- Strengthen national surveillance.
- Understand immunological mechanism (for example, pathogen-host interaction) of immune protection for Lyme disease and other tick-borne diseases.
- Develop new rapid and accurate lab tests.
- Develop antibiotic combination and/or therapeutic options for treating acute and persistent illness.
- Encourage the development of strategic plans for tick-borne disease federal investments.
- Dedicate funding to tick-borne diseases and evaluate related activities using performance indicators and clear metrics for success.
- Characterize how tick-borne disease affects U.S. national security, military readiness, and the health and wellness of active duty service members, veterans and their families.

Tick-borne diseases have become a serious, potentially deadly, and rapidly growing threat to public health. Lyme disease alone is estimated to affect more than 300,000 Americans each year, with the number of cases having doubled since 2004. However, only about one-tenth of those cases are reported to local and state health departments and the CDC. Many patients and advocates submitted comments to the Working Group, describing debilitating symptoms from tick-borne diseases that require prolonged treatment often resulting in large medical bills that are not reimbursed by medical insurers. New pathogens continue to be discovered, further increasing public health risks and costs for the U.S.

The Working Group is administered by HHS. Its 14 members represent a variety of stakeholders, including providers, scientists and researchers, patients and family members, patient advocates and federal members. Members were charged with providing expertise and reviewing all HHS efforts related to tick-borne diseases to help ensure interagency coordination, minimize overlap, and to examine research priorities. The next Working Group report is due to Congress and the HHS Secretary by December 2020.


The second edition provides evidence-based recommendations for youth ages 3 through 17 and adults to safely get the physical activity they need to stay healthy. There are new key guidelines for children ages 3 through 5 and updated guidelines for youth ages 6 through 17, adults, older adults, women during pregnancy and the postpartum period, adults with chronic health conditions, and adults with disabilities.
The United States currently has low levels of adherence to the guidelines -- only 26 percent of men, 19 percent of women, and 20 percent of adolescents meet the recommendations. According to the guidelines, these low levels of physical activity among Americans have health and economic consequences for the nation, with nearly $117 billion dollars in annual healthcare costs and 10 percent of all premature mortality attributable to failure to meet levels of aerobic physical activity recommended in the guidelines. Adults need 150 minutes of moderate-to-vigorous aerobic activity each week, with muscle strengthening activities on two days during the week to stay healthy. Youth ages 6 through 17 need 60 minutes of moderate-to-vigorous physical activity each day.

The second edition, based on a comprehensive scientific review, reflects new knowledge about immediate and long-term health benefits from physical activity, as well as new evidence that physical activity can help manage chronic conditions that many Americans have.

Notable updates:

- The previous guidelines stated that only 10-minute bouts of physical activity counted toward meeting the guidelines. This requirement has been removed because all activity counts.
- There are immediate health benefits, attainable from a single bout of activity, including reduced anxiety and blood pressure, improved quality of sleep, and improved insulin sensitivity.
- There are more long-term benefits from physical activity, including improved brain health, reduced risk of eight types of cancer (previously two), reduced risk for fall-related injuries in older adults, and reduced risk of excessive weight gain.

Physical activity helps manage more chronic health conditions.

- It can decrease pain for those with osteoarthritis, reduce disease progression for hypertension and type 2 diabetes, reduce symptoms of anxiety and depression, and improve cognition for those with dementia, multiple sclerosis, ADHD, and Parkinson’s disease.

There are new key guidelines for preschool children to be active throughout the day to enhance growth and development.

For more information about the latest Physical Activity Guidelines for Americans visit www.health.gov/paguidelines.

- The U.S. Food and Drug Administration and U.S. Centers for Disease Control and Prevention (CDC) released new findings from the National Youth Tobacco Survey (NYTS) showing that more than 3.6 million middle and high school students were current (past 30 day) e-cigarette users in 2018, a dramatic increase of more than 1.5 million students since last year.

According to the results youth who use e-cigarettes also are using them more frequently and using flavored products more often than last year. The sharp rise in e-cigarette use has resulted in an increase in overall youth tobacco product use, reversing a decline seen in recent years, and is prompting a series of steps by the FDA to curb youth use trends.

According to the findings, the number of U.S. high school students who reported being current e-cigarette users increased 78 percent between 2017 and 2018 to 3.05 million (or 20.8 percent). Numbers among middle school students rose 48 percent to 570,000 (or 4.9 percent). The study authors suggest the rise in e-cigarette use in the last year is likely due to the recent popularity of certain types of e-cigarettes, such as JUUL.

These products include ones that are cartridge-based, can be used discreetly because of their resemblance to slim USB flash drives, have a high nicotine content and come in appealing fruit
and candy flavors. The increased popularity of e-cigarettes among youth raises a number of other health concerns: risk of addiction to nicotine early on in life; potential harm from nicotine exposure to the developing adolescent brain; and exposure to chemicals associated with adverse health effects. In addition, research shows that, compared with non-users, youth who use e-cigarettes are more likely to transition to conventional cigarettes – risking a lifetime of addiction to smoking and resulting smoking-attributable disease.

The uptick in e-cigarette use has led overall tobacco product use to increase by 38 percent among high school students (to 27.1 percent) and by 29 percent among middle school students (to 7.2 percent) in the last year, reversing the positive decline seen over the last few years.

Additionally, the survey also shows that high school students who reported being current e-cigarette users also reported using the product more frequently. In the last year, the proportion of those using the product more regularly (on 20 or more of the past 30 days) increased from 20 percent to 27.7 percent, an alarming one-year rise. The 2018 NYTS also found that among high school e-cigarette users, there was a significant increase in current flavored e-cigarette use within the past year, from 60.9 percent to 67.8 percent. Research shows youth and young adults identify flavors as a primary reason for e-cigarette use. Additionally, there is evidence from the Population Assessment of Tobacco and Health (PATH) Study indicating youth who first tried a flavored tobacco product have a higher likelihood of current tobacco use compared to those who first tried an unflavored product.

NYTS is a cross-sectional, voluntary, school-based, self-administered, pencil-and-paper survey of U.S. middle and high school students. The data for the 2018 NYTS were collected from March to May 2018. The alarming rise in use and the threat of a new generation of young people becoming addicted to nicotine prompted the FDA and CDC to release these data earlier than usual so as to encourage e-cigarette companies and retailers, state, county and local health departments, public health organizations, and parents and educators to act immediately to curtail this crisis. The FDA and CDC plan to release the remaining data on usage rates of other tobacco products in early 2019.

- The suicide rate among the US working age population increased 34 percent during 2000-2016, according to a new Centers for Disease Control and Prevention report.

The study examined lifetime occupations of 22,053 people aged 16-64 years old who died by suicide in the 17 states participating in the National Violent Death Reporting System (NVDRS) in 2012 and 2015.

In 2012 and 2015, suicide rates were highest among males in the Construction and Extraction occupational group (43.6 and 53.2 per 100,000 civilian noninstitutionalized working persons, respectively) and highest among females in the Arts, Design, Entertainment, Sports, and Media group (11.7 and 15.6 per 100,000, respectively).

From 2012 to 2015, suicide rates increased most for males in Arts, Design, Entertainment, Sports, and Media occupations (47 percent) and for females in Food Preparation and Serving Related occupations (54 percent).

Suicide risk varies by occupation

Top 3 major occupational groups by suicide rate among males in 2015
- Construction and Extraction
- Arts, Design, Entertainment, Sports, and Media
- Installation, Maintenance, and Repair

Top 3 major occupational groups by suicide rate among females in 2015
- Arts, Design, Entertainment, Sports, and Media
Among both males and females, the lowest suicide rate in 2015 was observed in *Education, Training, and Library* occupations.

The workplace is an important place for suicide prevention efforts because the workplace is where many adults spend a great deal of their time.

Workplace suicide prevention strategies include employee assistance programs, workplace wellness programs, technology to provide online mental health screenings and web-based tools, reduction of stigma toward help-seeking and mental illness, and increased awareness of the National Suicide Prevention Lifeline ([www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org), 1-800-273-TALK [8255]).

CDC’s *Preventing Suicide: A Technical Package of Policies, Programs, and Practices and the National Violent Death Reporting System* can help states and communities prioritize prevention efforts and address persistent upward trends in suicide rates.

### REPORTS/POLICIES


- The GAO published “VA Medical Centers: VA Should Establish Goals and Measures to Enable Improved Oversight of Facilities’ Conditions,” (GAO-19-21) on Nov. 13, 2018. This report examines how VHA medical centers identify maintenance and repair needs and challenges they face in addressing those needs; and to what extent VHA provides oversight to ensure medical centers are providing a safe, clean, and functional environment. [https://www.gao.gov/assets/700/695354.pdf](https://www.gao.gov/assets/700/695354.pdf)

### HILL HEARINGS

- The Senate Committee on Health Education, Labor and Pension will hold a hearing on Nov. 28, 2018, to examine reducing health care costs, focusing on improving affordability through innovation.

### LEGISLATION

- **S.3620** (introduced Nov. 14, 2018): A bill to require the Secretary of Defense to develop and implement a plan to provide chiropractic health care services for certain covered beneficiaries as part of the TRICARE program was referred to the Committee on Armed Services. Sponsor: Senator Tammy Baldwin [D-WI]

- **H.R.7122** (introduced Nov. 13, 2018): the Shared Accountability for Improved Patient Outcomes Act of 2018 was referred to the Committees on Energy and Commerce and Ways and Means. Sponsor: Representative Erik Paulsen [R-MN-3]
MEETINGS

- 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/](http://www.amsusmeetings.org/home-2/)


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.