

# Federal Health Update

NOV. 29, 2013

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

**Sponsored by:**

**SPECTRUM<sup>®</sup>**  
**HEALTHCARE RESOURCES**  
[www.spectrumhealth.com](http://www.spectrumhealth.com)  
800-325-3982

***Additional Sponsorship Opportunities Available.***

*Please contact Kate Theroux if you are interested in supporting this service.*

[ktheroux@federalhealthcarenews.com](mailto:ktheroux@federalhealthcarenews.com)

***Happy Thanksgiving!***

## EXECUTIVE AND CONGRESSIONAL NEWS

- **Beginning Nov. 25, the House is on recess until Dec. 2 and the Senate is on recess until Dec. 9, 2013.**
- **The Obama administration announced a yearlong delay of online enrollment for small businesses (companies with 50 or fewer full-time workers) looking to purchase health coverage through federal-run exchanges.**

Small businesses in the 36 states where the federal government is running insurance exchanges can use brokers or enroll directly with insurers until November 2014.

Businesses will still be able to shop for plans at the federal website beginning in December; they just won't be able to sign up their employees using the system. The change may have a minimal effect since many small businesses already rely on agents and brokers for insurance.

Beginning next year small businesses with fewer than 25 workers can obtain a tax credit for as much as 50 percent of the cost of insurance for their workforce, up from 35 percent now. The Government Accountability Office has said the tax credit has been underutilized, and small business groups have complained it isn't easy to apply for the assistance.

- **On Nov. 27, 2013, President Obama signed into law:**
  - H.R. 3204, the "Drug Quality and Security Act," which clarifies the authority of the Food and Drug Administration to regulate specialty compounded (altered) drugs; creates a new voluntary program for FDA to regulate entities engaged in batch compounding that elect to register with the Agency; and establishes authority for FDA to develop a national track-and-trace system to secure the pharmaceutical supply chain and minimize opportunities for contamination, adulteration, diversion, or counterfeiting; and
  - S. 252, the "Prematurity Research Expansion and Education for Mothers who deliver Infants Early Reauthorization Act" or the "PREEMIE Reauthorization Act," which reauthorizes and expands activities in the Department of Health and Human Services with respect to preterm labor and delivery; establishes as part of NIH's Pediatric Research Initiative a National Pediatric Research Network; and authorizes funding for NIH for the care and maintenance of chimpanzees retired from use in its research programs in the statutorily-established sanctuary system where they live.

## MILITARY HEALTH CARE NEWS

- **Secretary of Defense Chuck Hagel announced President Obama has nominated Air Force Col. Robert I. Miller for appointment to the rank of brigadier general.** Miller is currently serving as the command surgeon and director, Medical Services and Training, Headquarters Air Education and Training Command, Joint Base San Antonio-Randolph, Texas.
- **On Nov. 25, 2013, TRICARE announced it is waiving the proof of payment requirement and allowing emergency prescription refills for beneficiaries living in the following locations: Dumangas, Iloilo, Janiuay, Iloilo, the Province of Antique, Samar provinces, Leyte, Cebu, Iloilo, Capiz, Aklan, Palawan, and Tacloban.**
  - Other areas may be added in the future, if needed.
  - Retroactive to Nov. 8, and in effect through Dec. 24, 2013 (45 days).
  - May be extended for another 45 days, if needed.

TRICARE will accept beneficiaries' signature on claims as proof of payment during this period. Also, if a beneficiary recently had prescriptions filled that were lost or destroyed during the typhoon, they may have them refilled. The beneficiary will only be responsible for the appropriate cost-share to refill those prescriptions that were lost or destroyed.

If you need help, call International SOS:

- Customer Service Regional Direct: + (65) 6339-2676
  - Customer Service Toll-Free: 1-800-14410576
  - Medical Assistance Regional Direct: + (65) 6338 9277
  - Medical Assistance Toll-Free: 1-800-14410711
- **U.S. Senators Patty Murray (D-WA) and Kirsten Gillibrand (D-NY) introduced an amendment to the National Defense Authorization Act (NDAA), which would ensure that military families' health plans provide adequate coverage for children and loved ones with disabilities.**

The amendment requires TRICARE, the Department of Defense health program for members of the military and their families, to provide coverage for behavioral health treatments, including applied behavior analysis (ABA).

Under current TRICARE policies, many children are denied coverage for ABA and critical behavioral health treatments, and those children who do receive care often receive less than the prescribed treatment. That places TRICARE behind the curve of thirty-four states and the District of Columbia, which require private insurers to cover ABA as a medically necessary service for most children with a developmental disability. The U.S. Office of Personnel Management also categorizes ABA as a "medical therapy" and covers ABA for federal employees' dependents.

A one-page summary of the legislation is available [here](#).

- **Researchers at the Uniformed Services University of the Health Sciences in Bethesda, Md., are conducting a study on the mental health of military health care providers.**

Military physicians, nurses and other health care professionals are invited to share their personal experiences in seeking help for psychological distress after deployment. They are also invited to share any challenges they may have faced in the process of reaching out for help. University researchers want to know if military health care providers have faced mental health stigmas or challenges to staying in treatment. If you are a military health care provider who deployed one or more times in support of Operation Iraqi Freedom or Operation Enduring Freedom, you are eligible to take part.

Contact Susanne Gibbons via [email](#) or at (410) 227-0966 for more information.

## VETERANS AFFAIRS NEWS

- **November marks the 10<sup>th</sup> anniversary of the Department of Veterans Affairs' award-winning Personal Health Record, My Health eVet ([www.myhealth.va.gov](http://www.myhealth.va.gov)).**

VA is encouraging all veterans and servicemembers to join the millions already accessing VA health care information and services online. Throughout November, My Health eVet Coordinators at all 151 VA medical centers organized community events, host enrollment and education health fairs, lead training sessions and work with VA Voluntary Service to showcase how My Health eVet contributes to more informed and more engaged Veteran patients. VA continues to build its My Health eVet online health record, adding new online tools and features, and My Health eVet Coordinators are geared up to accept new My Health eVet enrollees throughout November.

My Health eVet offers veterans secure access to portions of information in their VA health care records anywhere and anytime. Its web-based tools give users greater control over their care and wellness, helping them become active partners in their health care. It also allows veterans access to their records, My Health eVet lets them save, print and share their health information using the VA Blue Button, refill VA prescriptions online and track their health activities. Veterans who upgrade their accounts, free of charge, can use secure messaging to communicate electronically with their VA health care teams between visits. They can also view VA appointments, get VA Wellness Reminders, access VA lab results and more.

## GENERAL HEALTH CARE NEWS

- **The U.S. Food and Drug Administration approved the first adjuvanted pandemic influenza vaccine, Q-pan, manufactured by GlaxoSmithKline (GSK) to protect against H5N1 influenza.**

Using adjuvants in vaccine can reduce the amount of vaccine antigen needed to stimulate an immune response in people. Antigen is the component of the vaccine that stimulates the person's immune system to protect against a virus. Needing less antigen in each dose of vaccine means more doses of vaccine will be available in a pandemic, and the approval by FDA means this adjuvanted vaccine is safe and effective.

GSK developed the vaccine in partnership with the Biomedical Advanced Research and Development Authority (BARDA), in the Office of the Assistant Secretary for Preparedness and Response of the U.S. Department of Health and Human Services.

Every few decades, new strains of influenza emerge for which the public has little immunity. If a strain spreads from person to person widely across the globe, the virus could become a pandemic. All types of influenza can be deadly including H5N1, better known as avian influenza or bird flu. People have become ill from avian flu after close contact with infected birds. Of the 600 people who have become ill in the past decade, close to 60 percent died from this flu.

This vaccine protects the health of a greater number of people, should this deadly virus change from one that spreads from birds to people to one that can spread person to person like the seasonal influenza virus.

The public health challenge in a pandemic is to get as many people vaccinated as possible as quickly as possible, and an approved, adjuvanted vaccine can help health officials across the country do just that. In an H5N1 pandemic, the U.S. government could have more than 35 million doses of this adjuvanted vaccine available within weeks to protect people, and GSK could produce additional doses to meet the nation's needs for this vaccine.

- **The Centers for Medicare & Medicaid Services (CMS) issued a rule, finalizing payment rates and policies for 2014.**

The rule includes a major proposal to support care management outside the routine office interaction as well as other policies to promote high quality care and efficiency in Medicare. CMS' care coordination policy is a milestone, and demonstrates Medicare's recognition of the importance of care that occurs outside of a face-to-face visit for a wide range of beneficiaries beginning in 2015.

The final rule sets payment rates for physicians and non-physician practitioners who are paid under the Medicare Physician Fee Schedule for 2014 and addresses the policies included in the proposed rule issued in July. CMS projects that total payments under the fee schedule in 2014 will be approximately \$87 billion.

The 2014 payment rates increase payments for many medical specialties with some of the greatest increases going to providers of mental health services including psychiatry, clinical psychologists and clinical social workers.

The final rule will be published on December 10, 2013. For more information about the final rule, please visit: <http://www.ofr.gov/inspection.aspx?AspxAutoDetectCookieSupport=1>.

## REPORTS/POLICIES

- **The GAO published “Medicare Program Integrity: Contractors Reported Generating Savings, but CMS Could Improve Its Oversight,” (GAO-14-111) on Nov. 25, 2013.** In this report, GAO examined Zone Program Integrity Contractors (ZPIC) contract costs and how ZPICs use those funds, the results of ZPICs’ work, and the results of CMS’s evaluations of ZPICs’ performance and aspects of CMS’s evaluation practices. <http://www.gao.gov/assets/660/658565.pdf>

## HILL HEARINGS

- The House Veterans Affairs Subcommittee on Disability Assistance and Memorial Affairs will hold a hearing on **Dec. 4, 2013**, to examine adjudicating VA’s most complex disability claims.

## LEGISLATION

- **H.R.3621** (introduced Nov. 22, 2013): To provide for access to health insurance coverage of life-sustaining treatments furnished by certain providers was referred to the House Committee on Energy and Commerce.  
Sponsor: Representative Sean P. Duffy [WI-7]
- **H.R.3622** (introduced Nov. 22, 2013): Patient Centered Healthcare Savings Act of 2013 was referred to the Committee on Energy and Commerce, and in addition to the Committees on Ways and Means, Education and the Workforce, the Judiciary, Natural Resources, House Administration, Rules, and Appropriations.  
Sponsor: Representative Sean P. Duffy [WI-7]

## MEETINGS

- The Radiological Society of North America (RSNA) 2013 will be held **Dec. 1-3, 2013**, in Chicago, Ill. [http://www.rsna.org/Annual\\_Meeting.aspx](http://www.rsna.org/Annual_Meeting.aspx)
- The 2013 Special Operations Medical Association (SOMA) Conference will be held on **Dec. 14-17, 2013**, in Tampa, Fla. <http://www.specialoperationsmedicine.org/>
- The AAMA 2014 Conference will be held on **Feb. 25-28, 2014**, in Las Vegas Nev. <http://aameda.org/p/cm/ld/fid=98>
- The HIMSS Annual Conference and Exhibition will be held on **Feb. 27-29, 2014**, in Orlando, Fla. <http://www.himssconference.org/>
- The ACHE Congress on Healthcare Leadership will be held on **March 24-27, 2014**, in Chicago, Ill. <http://www.ache.org/congress/>
- The 11th Annual World Health Care Congress will be held on **April 7-9, 2014**, in National Harbor, Md. <http://www.worldcongress.com/events/HR14000/>
- The Heroes of Military Medicine Awards will be held on **May 1, 2014**, in Washington, DC. <http://www.hjfc3.org>

---

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](mailto:katetheroux@federalhealthcarenews.com).