

Federal Health Update

DEC. 22, 2017

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Happy Holidays!

We will not published the *Update* on Dec. 29th.

EXECUTIVE AND CONGRESSIONAL NEWS

- **The House and Senate passed another stop-gap measure to fund the government until Jan. 19, 2018.** The president is expected to sign the bill.
- **On Dec. 20, 2017, Congress passed the Tax Cuts and Jobs Act. Part of the legislation repeals the individual-mandate tax penalty effective for tax year 2019.**

In 2015, according to the IRS, nearly 6.7 million Americans paid the federal government more than \$3 billion under the individual mandate.

MILITARY HEALTH CARE NEWS

- **The Department of Defense announced details of the implementation of the Uniformed Services Blended Retirement System (BRS), which goes into effect on Jan. 1, 2018.**

The new system blends aspects of the traditional [defined benefit](#) retirement pension system, with a [defined contribution](#) system of automatic and matching government contributions through the [Thrift Savings Plan](#) (TSP). All new entrants into the Uniformed Services on or after Jan. 1, 2018, will be enrolled in this new retirement system.

Nearly 1.6 million current service members will have the option to remain in the current legacy high-3 retirement system or choose the BRS when the opt-in period for eligible service members opens on Jan. 1, 2018. [Opt-in eligible service members](#) from all seven of the Uniformed Services will have an entire year to make their retirement system election. The open period for the majority of service members is from Jan. 1, 2018, through Dec. 31, 2018.

Service members will need to visit one of these designated resources to opt into BRS:

- Army, Air Force, Navy: [MyPay](https://mypay.dfas.mil) (<https://mypay.dfas.mil>)
- Marine Corps: [Marine Online \(MOL\)](https://www.mol.usmc.mil) (<https://www.mol.usmc.mil>)
- Coast Guard, NOAA Commissioned Corps: [Direct Access](https://portal.direct-access.us) (<https://portal.direct-access.us>)
- U.S. Public Health Service (USPHS): Contact the USPHS Compensation Branch

Service members who believe they are eligible to opt-in, but do not see the opt-in option available online, should contact their local personnel/human resources office to verify eligibility. The decision to opt-in is irrevocable, even if a service member changes their mind before the deadline on Dec. 31, 2018. If an eligible service member takes no action, they will remain in the legacy retirement system.

Prior to opting in, service members should take advantage of all available resources to assist in making an informed decision on the financial implications specific to their retirement situation.

The DOD endorses several training and informational tools to support a service member's decision, to include the BRS [Opt-In Course](#), the BRS [Comparison Calculator](#) and numerous online BRS [resource materials](#). Service members can receive no-cost, personal support from an accredited personal financial manager or counselor available at their installation's Military and Family Support Center or by calling Military OneSource at 1-800-342-9647.

The change to the retirement system is a key step in modernizing the Uniformed Service's ability to recruit, retain and maintain an all-volunteer force in the 21st century. For more information about BRS, visit <http://militarypay.defense.gov/BlendedRetirement>

- **On Jan. 1, 2018, the current three U.S. TRICARE regions consolidate into two.**

[New regional contractors](#) will administer the TRICARE benefit for the East (Humana Military) and West (Health Net Federal Services, LLC) Regions. Beneficiaries are encouraged to check to ensure their primary care manager (PCM) remains in network. They should also check to see if your specialty care providers will remain in network.

The 2018 TRICARE Network Provider Directories are now available when using the online [Find a Doctor](#) provider search tool.

For more information about the changes coming to TRICARE, visit www.tricare.mil/changes. Stay informed about your benefit and take command of your health.

VETERANS AFFAIRS NEWS

- **The Department of Veterans Affairs (VA) and Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA) announced the inaugural Mayor's Challenge to Prevent Suicide among service members, veterans and their families.**

The goal of the Mayor's Challenge is to eliminate suicide by using a comprehensive public health approach to suicide prevention.

"Of the 20 suicides a day that we reported last year, 14 were not under VA care," said VA Secretary Dr. David J. Shulkin. "We are pleased to partner with SAMHSA to bring attention, education and support regarding suicide prevention to communities where our Veterans live."

VA and SAMHSA will invite seven cities to participate in a [policy academy process](#) that up until now has been available only to states and territories. The cities will be invited based on veteran population data, suicide prevalence rates and capacity of the city to lead the way in this first phase of the Mayor's Challenge.

The selected cities will be announced mid-December, once they have formally accepted nominations.

Teams from each of the seven cities will meet March 14-16, 2018, in Washington, D.C., to develop strategic action plans to implement in their communities. The teams will include collaborative groups of community, municipal, military and other stakeholders. VA will provide technical assistance to support local efforts and to document outcomes and share strategies with other municipalities.

Cities interested in learning more about the Mayor's Challenge, can submit a [request for information form](#) at <https://pra.typeform.com/to/C2Zv2B>.

For more information on VA's suicide prevention campaign, visit <http://www.veteranscrisisline.net/bethere>.

For information on SAMHSA's suicide prevention efforts, visit <https://www.samhsa.gov/suicide-prevention/samhsas-efforts>.

Veterans in crisis or having thoughts of suicide — and those who know a Veteran in crisis — should call the Veterans Crisis Line for confidential support 24 hours a day, seven days a week, and 365 days a year. Call 800-273-8255 and press 1, chat online at [VeteransCrisisLine.net/Chat](https://www.veteranscrisisline.net/Chat), or text to 838255.

GENERAL HEALTH CARE NEWS

- **The Centers for Medicare & Medicaid Services (CMS) updated data on the [Hospital Compare website](#) to provide patients, families and all stakeholders with the information they need to compare the performance of hospitals where they seek medical care.**

Along with data on quality measures, CMS will also update the Overall Hospital Star Rating.

Hospital Compare reports information on quality measures for over 4,000 hospitals nationwide, including Veterans Administration (VA) Medical Centers and military hospitals. The website provides information for patients and caregivers on how well hospitals deliver care and encourages hospitals to improve the quality of care they provide. Users can compare performance across many common conditions.

For this update, CMS will respond to stakeholder concerns by updating several existing measures and the Overall Star Rating. The Overall Star Rating has been revised to use an enhanced methodology to assign ratings to hospitals, based on Technical Expert Panel recommendations and public input.

CMS's Overall Hospital Quality Star Rating on *Hospital Compare* will be updated twice a year (July and December). As a proven healthcare consumer tool, the Overall Hospital Quality Star Rating summarizes data from existing measures on *Hospital Compare* for each hospital to allow its users to easily compare hospital facilities. In addition, with data.medicare.gov, users can explore and download hospital data, as well as data on ambulatory surgical centers, inpatient psychiatric facilities and some cancer hospitals.

As part of the December update, CMS will post supporting documents related to the Star Ratings on the *QualityNet* website:

- [Quarterly Specifications](#) – Provides updates on various national distributions of the Star Ratings
- [Comprehensive Methodology](#) – Provides several enhancements to the Overall Star Rating methodology
- [SAS Pack](#) – Provides materials to calculate individual Star Ratings

CMS will post the summary of comments from the public comment period on the Technical Expert Panel recommendations on cms.gov in the Public Input Summary Report, which provides stakeholders with results of public input collected last fall. The public input period was intended to draw comments on several enhancements to the Star Ratings recommended by a Technical Expert Panel and other stakeholders. CMS will post this report on cms.gov at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/Public-Comments.html>.

REPORTS/POLICIES

- **The GAO published “Drug Industry Profits, Research and Development Spending, and Merger and Acquisition Deals,” (GAO-18-40) on Dec. 19, 2017.** This report describes: how the financial performance and structure of the industry have changed over time; how reported R&D spending and new drug approvals have changed; and what is known about the potential effects of consolidation on drug prices and new drug development. <https://www.gao.gov/assets/690/688472.pdf>
- **The GAO published “Health Insurance Exchanges: Changes in Benchmark Plans and Premiums and Effects of Automatic Re-enrollment on Consumers' Costs,” (GAO-18-68) on Dec. 14, 2017.** This report examines the extent to which plans identified as benchmark plans remained the same plans from year to year, and how premiums for benchmark plans changed; the proportion of exchange consumers who were automatically re-enrolled into the same or similar plans, and how these proportions compared to those for consumers who actively re-enrolled; and the extent to which consumers' financial responsibility for premiums changed for those who were automatically re-enrolled compared to those who actively re-enrolled. <https://www.gao.gov/assets/690/688350.pdf>

HILL HEARINGS

- There are no hearings scheduled until the new year.

LEGISLATION

- **H.R.4728** (introduced Dec. 21, 2017): To amend title 38, United States Code, to establish the office of the Health Monitor of the Department of Veterans Affairs, and for other purposes was referred to the House Committee on Veterans' Affairs. Sponsor: Representative Michelle Lujan

Grisham [D-NM-1]

- **H.R.4727** (introduced Dec. 21, 2017): To amend title 38, United States Code, to direct the Secretary of Veterans Affairs to assign temporary disability ratings to certain veterans for purposes of compensation and health care, and for other purposes was referred to the House Committee on Veterans' Affairs. Sponsor: Representative Michelle. Lujan Grisham [D-NM-1]:
- **H.R.4653** (Introduced Dec. 21, 2017): Service members and Veterans Prescription Drug Safety Act of 2017 was referred to the Committee on Energy and Commerce, and in addition to the Committees on Armed Services, the Judiciary, and Veterans' Affairs. Sponsor: Representative Matt Cartwright [D-PA-17]

MEETINGS

- HIMSS 2018 Annual Conference will be held on **March 5-9, 2018**, in Las Vegas Nev. <http://www.himssconference.org/>
- The 8th Annual Traumatic Brain Injury Conference will be held on **May 16-17, 2018**, in Washington DC. <http://tbiconference.com/home/>

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.