

Federal Health Update

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Happy New Year!

EXECUTIVE AND CONGRESSIONAL NEWS

- **The House and Senate passed the conference report the 2013 National Defense Authorization Act on Dec. 20 and 21, 2012, respectively.**

The bill goes to the White House for the President's signature. The White House has indicated the President will veto the bill because of its provisions on detaining terrorist suspects.

- **Sen. Daniel Inouye (D-HI) died on Dec. 17, 2012, at the age of 88 at the Walter Reed National Military Medical Center (WRNMMC).**

Inouye had been admitted to the hospital last week for emphysema and respiratory complications.

The most senior Senator, Inouye was President Pro-Tempore, and third in line for the presidency. Inouye was also the second longest-serving Senator in the country's history (behind his former colleague, the late Sen. Robert Byrd (D-WV)).

Inouye first came to Congress in 1959, as Hawaii's first Representative. He moved to the Senate in 1962, and served nine consecutive terms.

A veteran of WWII, Inouye was a decorated veteran of WWII. His bravery in battle while serving with the Japanese American 442nd Regimental Combat Team was recognized by President Clinton in 2000, who upgraded the Senator's Distinguished Service Cross to the Medal of Honor.

As chairman of the Senate Appropriations Committee's Defense Subcommittee, Inouye often hearkened back to the care and lessons he learned during his own convalescence and rehabilitation.

On Dec. 28, 2012, Hawaii Gov. Neil Abercrombie announced that Lt. Gov. Brian Schatz, (D-Hawaii), will succeed the late Sen. Daniel Inouye.

▪ **The House Armed Services Committee announced the subcommittee chairmen for the next Congress:**

- Rep. Joe Wilson (R-SC) will remain chair of the Personnel subcommittee, and full committee vice chairman.
- Rep. Mac Thornberry (R-TX) will continue to chair the Emerging Threats & Capabilities Subcommittee.
- Rep. Rob Wittman (R-VA) takes over the Readiness Subcommittee.
- Rep. Mike Rogers (R-AL) will lead the Strategic Forces Subcommittee.
- Rep. Mike Turner (R-OH) will chair the Tactical Air & Land Forces Subcommittee.

The chairman of the Oversight and Investigations Subcommittee has yet to be named.

MILITARY HEALTH CARE NEWS

▪ **TRICARE Management Activity (TMA) announced the date of the next Uniform Formulary Beneficiary Advisory Panel Webpage will be held on Jan. 9, 2013, in Washington D.C.**

The panel will review:

- Hepatitis C Agents
- Overactive Bladder Agents
- Gastrointestinal--2 Agents
- Diabetes: Non-Insulin
- Designated Newly Approved Drugs in Already-Reviewed Classes
- Pertinent Utilization Management Issues

For more information about the meeting, please visit:

<http://www.tricare.mil/tma/pharmacy/BAP/>.

▪ **TRICARE Management Activity will stop taking premium payments by mail for the TRICARE Reserve Select and TRICARE Retired Reserve programs at the end of the year.**

Starting Jan. 1, TRICARE will accept only electronic funds transfers or credit and debit cards for the monthly payments, according to a Pentagon release, aligning the military health system's payment procedures and save processing costs, according to TRICARE.

After Jan. 1, nearly all premium payments for TRICARE programs will be electronic, except in the West Region where contract manager TriWest Healthcare Alliance still accepts TRICARE Prime premiums by mail.

TRICARE is urging beneficiaries to verify that their banks make EFT payments or set up a recurring card payment.

Monthly premiums are due by the last day of the month for the following month's coverage. Failure to pay by that day results in termination of coverage, so TRR and TRS beneficiaries will want to ensure their payment is made electronically on or before Dec. 31.

Failure to pay on time could result in a 12-month lockout.

Monthly premiums for TRICARE Reserve Select in 2013 will decline for individual coverage but rise slightly for family coverage. For individuals, the premium will be \$51.62, down from \$54.35 this year. For a family, it will be \$195.81, up from \$192.89 this year.

For TRICARE Retired Reserve, the premiums are set to decline in 2013 for both individual and family coverage. For individuals, the premium will be \$402.11, down from \$419.72 this year. For a family, it will be \$969.10, down from \$1,024.43 this year.

- **Co-chairs of the interagency task force on mental health met on Dec. 13 to sign a charter that will guide their work.**

As co-chairs, Assistant Secretary of Defense for Health Affairs, Dr. Jonathan Woodson; Under Secretary for Health, Veterans Health Administration, Dr. Robert A. Petzel; and, Administrator, Substance Abuse and Mental Health Services Administration, Pamela S. Hyde, J.D. of the Department of Health and Human Services, are leading interagency efforts to expand suicide-prevention strategies and to take new steps to meet the demand for mental health and substance abuse treatment.

The task force was created by a *Presidential Executive Order for Improving Access to Mental Health Services for Veterans, Service Members, and Military Families* issued by President Obama, Aug. 31, 2012.

The order directs the Defense Department, the Department of Veterans Affairs, and other key federal departments to expand suicide-prevention strategies and to take new steps to meet the demand for mental health and substance abuse treatment services.

VETERANS AFFAIRS NEWS

- **On Dec. 20, 2012, the Department of Veterans Affairs announced eliminating the need for veterans to complete an annual Eligibility Verification Report (EVR).**

VA will implement a new process for confirming eligibility for benefits, and staff that had been responsible for processing the old form will instead focus on eliminating the compensation claims backlog.

Historically, beneficiaries have been required to complete an EVR each year to ensure their pension benefits continued. Under the new initiative, VA will work with the Internal Revenue Service (IRS) and the Social Security Administration (SSA) to verify continued eligibility for pension benefits.

VA estimates it would have sent nearly 150,000 EVRs to beneficiaries in January 2013. Eliminating these annual reports reduces the burden on veterans, their families and

survivors because they will not have to return these routine reports to VA each year in order to avoid suspension of benefits. It also allows VA to redirect more than 100 employees that usually process EVRs to work on eliminating the claims backlog.

All beneficiaries currently receiving VA pension benefits will receive a letter from VA explaining these changes and providing instructions on how to continue to submit their unreimbursed medical expenses.

More information about VA pension benefits is available at <http://www.benefits.va.gov/pension>.

- **USA Today reports that half of women sent to Iraq or Afghanistan have been sexually harassed, and nearly one in four say they were sexually assaulted, according to new research by the Department of Veterans Affairs.**

The study suggests a far higher prevalence of sexual misconduct against women in war zones than is reflected by complaints gathered by the various service branches.

In February, more than 20,000 women were serving in Afghanistan. In the preceding year, only 115 reports were filed alleging sexual assault, according to the Pentagon.

In the VA study, researchers mailed survey questions to more than 1,100 women who served in or near Iraq or Afghanistan. More than 48 percent said they had been sexually harassed during their time in a war zone. Sexual assaults during deployment, up to and including rape, were reported by nearly 23 percent of women.

Almost all of the women in the anonymous VA study of Iraq and Afghanistan veterans said the offenders were other service members, in many cases from within their own unit, and 47 percent said that person held a higher rank, according to the findings.

A second research presentation at the Los Angeles conference by the Naval Health Research Center in San Diego cited data from the Millennium Cohort Study, a project that follows the health of thousands of troops over years.

Scientists found that military women who had served between 2001 and 2004, and who had been in direct combat, were 2 1/2 times more likely to say they had been sexually assaulted during those years than female service members who had never been to war.

GENERAL HEALTH CARE NEWS

- **Department of Health and Human Services (HHS) released the *Health IT Patient Safety Action and Surveillance Plan*.**

The plan, which builds on the Department's overall commitment to patient safety, is open for public comment through Feb. 4, 2013, and addresses recommendations made in the 2011 Institute of Medicine (IOM) report, *Health IT and Patient Safety: Building Safer Systems for Better Care*.

Clinicians who report adverse events provide necessary data for developers, providers, researchers and policymakers to improve the safety of health IT and make care safer. The Office of the National Coordinator for Health IT (ONC) will propose using electronic health record certification criteria to make it easier for clinicians to report patient safety events. Working with ONC, the Centers for Medicare & Medicaid Services (CMS) will align its health and safety standards and guidance for providers and suppliers. CMS will also develop training for surveyors that enhances their ability to identify safe and unsafe practices associated with health IT.

The Agency for Healthcare Research and Quality's (AHRQ) Common Formats will give

providers common definitions and reporting formats to improve how they gather, review and report adverse event data. AHRQ will also encourage reporting to Patient Safety Organizations (PSOs) and increase health care provider adoption of the formats.

Please see the plan here: <http://www.healthit.gov/policy-researchers-implementers/health-it-and-patient-safety>.

- **Health and Human Services (HHS) Secretary Kathleen Sebelius announced that three more states are on track to implement the health care law and establish health insurance marketplaces, or Exchanges.**

HHS issued the first conditional approval of a State Partnership Exchange in Delaware and Minnesota and Rhode Island to operate a state-based Exchange. These states join Colorado, Connecticut, the District of Columbia, Kentucky, Massachusetts, Maryland, New York, Oregon, and Washington to operate state-based Exchanges.

The conditional approval provided to Delaware is the first of its kind and shows the vast progress Delaware has made ahead of the Feb. 15, 2013 deadline to apply to operate a State Partnership Exchange. The State Partnership Exchange model is an option provided to states that want to manage part of the Exchange in 2014. A Partnership Exchange allows states to make key decisions and tailor the marketplace to local needs and market conditions. In addition to Delaware, Arkansas, Illinois, Iowa, and North Carolina have also expressed early interest in establishing a State Partnership Exchange.

Because of the Affordable Care Act, consumers and small businesses in every state will have access to a new marketplace starting in 2014 where they can access quality, affordable private health insurance. These are similar to those choices that will be offered to members of Congress.

Consumers in every state will be able to buy insurance from qualified health plans directly through these marketplaces and may be eligible for tax credits to help pay for their health insurance.

To learn more about Exchange conditional approvals, visit: <http://cciio.cms.gov/resources/factsheets/state-marketplaces.html>.

For more information on Exchanges, visit: <http://www.healthcare.gov/exchanges>.

- **Health and Human Services (HHS) Secretary Kathleen Sebelius also announced awards of more than \$80 million to 197 school-based health center programs across the country.**

This funding will allow school-based health centers to serve an additional 384,000 students, expanding preventive and primary health care services.

School-based health centers enable children with acute or chronic illnesses to attend school and improve the overall health and wellness of all children through health screenings, health promotion and disease prevention activities.

Typically, a school-based clinic provides a combination of primary care, mental health care, substance abuse counseling, case management, dental health, nutrition education, health education and health promotion activities.

For a full list of awards, visit: www.hrsa.gov/about/news/2012tables/121218schoolbasedawards.html.

REPORTS/POLICIES

- **The GAO published “Medicare Physician Payment: Private-Sector Initiatives Can Help Inform CMS Quality and Efficiency Incentive Efforts,” (GAO-13-160) on Dec. 26, 2012.** The report provides information on common themes among private entities with payment incentive initiatives, and physician perspectives on those themes; and the extent to which CMS’s financial incentive initiatives for Medicare physicians reflect such themes. <http://www.gao.gov/assets/660/651102.pdf>
- **The GAO published “CMS Innovation Center: Early Implementation Efforts Suggest Need for Additional Actions to Help Ensure Coordination with Other CMS Offices,” (GAO-13-12) on Dec. 17, 2012.** This report describes the center's activities, funding, organization, and staffing as of March 31, 2012; describes the center's plans for evaluating its models and its own performance; and examines whether efforts of the center overlap with those of other CMS offices and how the center coordinates with other offices. <http://www.gao.gov/assets/660/650119.pdf>

HILL HEARINGS

- There are no hearings scheduled this week.

LEGISLATION

- **H.R.6672** (introduced Dec. 17, 2012): Pandemic and All-Hazards Preparedness Reauthorization Act of 2012 was received in the Senate.
Sponsor: Representative Mike J. Rogers [MI-8]
- **H.R.6692** (introduced Dec. 20, 2012): To amend the Balanced Budget and Emergency Deficit Control Act of 1985 to exempt the Substance Abuse and Mental Health Services Administration (SAMHSA) from sequestration was referred to the House Committee on the Budget.
Sponsor: Representative Hansen Clarke [MI-13]
- **S.3684** (introduced Dec. 17, 2012): A bill to amend title XVIII of the Social Security Act to provide for advanced illness care coordination services for Medicare beneficiaries, and for other purposes was referred to the Committee on Finance.
Sponsor: Senator Mark R. Warner [VA]
- **S.3695** (introduced Dec. 19, 2012): A bill to amend section 5000A of the Internal Revenue Code of 1986 to provide an additional religious exemption from the individual health coverage mandate was referred to the Committee on Finance.
Sponsor: Senator Joseph I. Lieberman [CT]
- **S.3699** (introduced Dec. 20, 2012): A bill to amend title XVIII of the Social Security Act to include information on the coverage of intensive behavioral therapy for obesity in the Medicare and You Handbook, to provide written notification to beneficiaries and providers regarding new Medicare coverage of intensive behavioral therapy for obesity, and to provide for the coordination of programs to prevent and treat obesity, and for other purposes was referred to the Committee on Finance.
Sponsor: Senator Thomas R. Carper [DE]

- **S.3702** (introduced Dec. 20, 2012): A bill to provide grants to establish veteran's treatment courts was referred to the Committee on the Judiciary.
Sponsor: Senator John F. Kerry [MA]

MEETINGS

- The International Meeting of Simulation in Healthcare (IMSH) 2013 will be held on **Jan. 26-30, 2013**, in Orlando, Fla. <http://ssih.org/events/imsh-2013-central>
- The 2013 Military Health System Conference will be held **Feb. 11-14, 2013**, in National Harbor, Md. <http://www.health.mil/2013MHSConference/Registration.aspx>
- Digital Health Communication Extravaganza will be held on **Feb. 20-22, 2013**, in Orlando, Fla. <http://dhcx.hhp.ufl.edu/>.
- Annual HIMSS Conference & Exhibition will be held **March 3-7, 2013**, in New Orleans, La. <http://www.himssconference.org/>
- The International Conference on Emerging Infectious Diseases 2013 (ICEID) will be held on **Feb. 15-18, 2013**, in Vienna, Austria. www.imed.isid.org/downloads/IMED2013_FirstAnn.pdf
- Learning in Disaster Health: A Continuing Education Workshop will be held on **April 2-3 2013**, in Washington D.C. <http://www.cvent.com/events/learning-in-disaster-health-a-continuing-education-workshop/event-summary-8688867233a844d3b5a3afeccebbf288.aspx>
- 10th Annual World Healthcare Congress will be held **April 8-10, 2013**, in Washington DC <http://www.worldcongress.com/events/HR13000/>
- AAMA Presents: "3-in-1" Conference - Bringing Together Cardiovascular, Neuroscience & Oncology Leaders will be held on **April 10-12 2013**, in Las Vegas, Nev. <http://www.aameda.org/Conference/ACCA/ACCAMain.html>

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