

# FEDERAL HEALTH UPDATE

September 22, 2006

*Produced by Kate Connelly Theroux in collaboration with the U.S. Medicine Institute for Health Studies*

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*"You make a great difference in the tone and tenor of our country. We are at war in two theaters and still have responsibilities globally. Our men and women in uniform are performing their duty magnificently. They are coming home with the simple expectation that we will be there for them."* -House Veterans Affairs Chairman Steve Buyer praising the leaders of the military and veterans' service organizations during a Sept. 20 hearing.

## **Congressional Schedule**

- The Senate HELP Committee approved the nomination of Dr. Andrew von Eschenbach to be Commissioner of the Food and Drug Administration (FDA) on Sept. 20, 2006, and to send the nomination for further action by the full Senate.
- The House passed S. 418, the Military Personnel Financial Services Protection Act, on Sept. 21, 2006. The legislation will protect U.S. military personnel from abusive sales of overpriced life insurance and investments.
- The House Veterans Affairs Committee held oversight hearings on Sept. 20 and 21, 2006, to review the previous fiscal year and look ahead to the upcoming year. Representatives from the military and veterans service organizations testified. The recent computer thefts, the Sept. 20 GAO report on VA funding and the

efforts towards DoD/VA health records' interoperability were among the topics discussed.

- The Senate Veterans Affairs Committee held a hearing on Sept. 20, 2006, to examine the legislative presentation of the American Legion. Paul A. Morin, the American Legion's newly elected national commander, called for full funding for the CARES program, as well as all current and future VA programs. He also encouraged both the House and Senate to return to the holding joint hearings as it had over past 55 years during which The American Legion has testified annually before both the House and Senate Veterans' Affairs Committees together. The House Veterans Affairs Committee is holding separate hearings this week.

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## **Military Health Care News**

- Assistant Secretary of Defense for Health Affairs Dr. William Winkenwerder Jr. announced the selection of Chief Master Sergeant Manuel Sarmina, U.S. Air Force, as senior enlisted advisor for Health Affairs. In this position, Sarmina will provide the Health Affairs (HA) and TRICARE Management Activity (TMA) leadership with valuable insights on the day-to-day operations of TRICARE. Sarmina will serve as one of Winkenwerder's principal advisors and as an advocate for the active duty, National Guard and Reserve enlisted community in matters affecting health care policy and operations. He will represent the concerns of more than 9.2 million beneficiaries to Defense Department leadership regarding health care delivery to service members and their families and act as liaison to his counterparts at the surgeons general and TRICARE regional offices; plan, and facilitate the senior enlisted panel at the annual Military Health System Conference; partner with beneficiary organizations; communicate efforts under way at TRICARE to beneficiary and professional groups; and provide advice to leadership on enlisted and beneficiary issues. The senior noncommissioned officer, Sarmina previously served as chief, Enlisted Medical Issues in the Office of the Air Force Surgeon General and chief, Medical Enlisted Operations, Air Force Medical Operations Agency, Bolling AFB, Washington D.C.

<http://www.tricare.osd.mil/pressroom/news.aspx?fid=231>.

- Walter Reed Army Medical Center (WRAMC) is the first military hospital to offer its women patients the new Food and Drug Administration-approved "breakthrough" vaccine against certain subtypes of the virus that can lead to cervical cancer - a deadly cancer in women. The vaccine can be administered to women ages 11 to 26 to protect them against HPV type 6, 11, 16 and 18; and will be available in the Pediatric Clinic and the Allergy and Immunology Clinic. Type 16 and 18 account for approximately 70 percent of all cancers of the cervix, and type 6 and 11 account for about 90 percent of all human papilloma virus related vulvar condyloma also known as genital warts. Studies suggest that three out of four people will get an HPV infection during their lifetime, according to the American College of Obstetrics and Gynecologists. Women who have had three sexual partners in one year's time are likely to currently have or have had at one time during that year an HPV infection. The HPV vaccine is only effective for patients who don't have an active ongoing HPV infection in one of the effected strains. Vaccinating against HPV type 6, 11, 16 and 18 is a three-step process given over a six-month period.

## Veterans Health Care News

- The White House announced that President Bush intends to designate Paul J. Hutter, of Virginia, to be Acting General Counsel of the Department of Veterans Affairs. Mr. Hutter currently serves as Assistant General Counsel of the Department of Veteran Affairs. Prior to this, he served on detail at the Department of Defense as the Chief Operations Officer of the Interagency Transition Planning Team in Iraq. Earlier in his career, he was the Assistant Regional Counsel at the Department of Veterans Affairs.

## Health Care News

- On Sept 15, 2006, the Department of Health and Human Services (HHS) awarded nearly \$20 million in grants to states to develop programs for people with disabilities or long term illnesses. The "Real Choice Systems Change Grants for Community Living" will help states and territories "rebalance" their long-term support programs to help people with chronic illness or disabilities to reside in their homes and participate fully in community life. Under this initiative 10 federal agencies have collaborated to remove barriers to community living. The additional funding for "Real Choice Systems Change Grants for Community Living" approved by Congress for 2006 will augment efforts begun in FY 2001 to help states improve their community-based services. For this round of grant awards, CMS will require states receiving grant money to address at least three of the six goals necessary to transform Medicaid program incentives away from institutional care with options for care at home and in the community. The goals include improving access to information regarding the full range of community-based services available; encouraging more self-directed service delivery systems; implementing a comprehensive quality management system; developing IT to support community living; developing flexible financing arrangements and long-term supports that promote community living options in affordable and accessible housing. This demonstration provides up to \$1.75 billion to eligible states to transition individuals from institutions who want to live in the community and rebalance their entire long-term care system to ensure individuals have a choice of where they want to live and receive services. <http://www.hhs.gov/news/press/2006pres/20060915.html>

- Dr. Robert Kolodner was appointed to the Department of Health and Human Services (HHS) as the Interim National Coordinator for Health Information Technology. Dr. Kolodner comes from the Veterans Health Administration (VA), where he has been serving as Chief Health Informatics Officer and has been involved with the oversight and development of My HealtheVet and VistA -- the VA's electronic health records systems.

- According to a report commissioned by the Commonwealth Fund, a non-profit and non-partisan health think tank, the U.S. health-care system is doing poorly by virtually every measure. The national report card

on the U.S. health-care system, released Sept. 20, gave the U.S. system low grades on outcomes, quality of care, access to care, and efficiency, compared to other industrialized nations or generally accepted standards of care with an overall grade of 66 out of 100. The survey was carried out by 18 academic and private-sector health-care leaders, who rate the system on 37 different measures. The U.S. ranks at the bottom among industrialized countries for life expectancy both at birth and at age 60. It is also last on infant mortality, with 7 deaths per 1,000 live births, compared with 2.7 in the top three countries. There are dramatic gaps within the U.S. as well, according to the study. The average disability rate for all Americans is 25 percent worse than the rate for the best five states alone, as is the rate of children missing 11 or more days of school. The report found that quality of care and access to care varied widely across the country, and it noted substantial gaps between national averages and pockets of excellence. The authors concluded that, if the U.S. improved and standardized health-care performance and access, approximately 100,000 to 150,000 lives could be saved annually, along with \$50 billion to \$100 billion a year.

[http://www.cmwf.org/publications/publications\\_show.htm?doc\\_id=401577](http://www.cmwf.org/publications/publications_show.htm?doc_id=401577)

- On Sept. 21, 2006, the U.S. Centers for Disease Control and Prevention (CDC) published "Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health Care Settings." In its report, the CDC recommended that voluntary HIV screening a routine part of medical care for all patients aged 13 to 64. The recommendations aim to simplify the HIV testing process in health care settings and increase early HIV diagnosis among the estimated more than 250,000 HIV-positive Americans who are unaware of their infection. The recommendations also include new measures to improve diagnosis among pregnant women and further reduce mother-to-child HIV transmission.

<http://www.cdc.gov/od/oc/media/pressrel/r060921.htm>

- The Centers for Medicare and Medicaid Services (CMS) announced that as part of the My Health. My Medicare. initiative, beneficiaries and those who are assisting them will have access to new and enhanced tools to help them get the most out of their Medicare benefits in mid-October. These tools, available at [www.mymedicare.gov](http://www.mymedicare.gov) and [www.medicare.gov](http://www.medicare.gov), will make it possible for beneficiaries to compare the costs, benefits and other information about Medicare health and drug plans in their community; track the status of Medicare claims; learn about the many preventive benefits and screenings people with Medicare are eligible to receive; find physicians and specialists; and compare the quality of health care providers, including hospitals, nursing homes, and other providers.

<http://www.cms.hhs.gov/apps/media/press/release.asp?Counter=1969>

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## **Reserve/Guard**

- The total number of Guard and Reserve currently on active duty has decreased by 1,834 from the last report to 108,286. The totals for each service are Army National Guard and Army Reserve, 87,291; Navy Reserve, 6,155; Air National Guard and Air Force Reserve, 7,175; Marine Corps Reserve, 7,348; and the Coast Guard Reserve, 317.

[www.defenselink.mil](http://www.defenselink.mil)

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## Contracts/Procurements

- The U.S. Army Health Care Acquisition Activity (HCAA), Center for Health Care Contracting (CHCC), Fort Sam Houston, Texas intends to award the contract to provide HIV-1 antibody testing and reporting for the U.S. Army (USA) Military Treatment Facilities (MTFs), U.S. Army Reserve (USAR), Physical Examination Sites (PES), Veterans Affairs (VA), Federal Occupational Health (FOH), and U.S. Coast Guard (USCG) sites. The government intends to award an interim contract on a sole source basis to ViroMed Laboratories, of Minnesota. This requirement is for a three-month period from Oct. 1, 2006 through Dec. 31, 2006. The requirement will also include a three-month option period. The Contracting Officer is Mrs. Sylvia F. Flores, (210) 295-4357, e mail [sylvia.flores@amedd.army.mil](mailto:sylvia.flores@amedd.army.mil). The Contracting Specialist is Ms. Yesenia C. Rodriguez, (210) 221-3703, email [yesenia.rodriguez@amedd.army.mil](mailto:yesenia.rodriguez@amedd.army.mil). <http://www.fbo.gov/spg/USA/MEDCOM/DADA10/W81K04%2D06%2DR%2D0028/SynopsisP.html>

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## Reports/Policies

- The Institute of Medicine (IOM) released "Dietary Reference Intakes: The Essential Guide to Nutrient Requirements," on Sept. 15, 2006. In this report, the IOM, in partnership with Health Canada, has updated what used to be known as Recommended Dietary Allowances (RDAs) and renamed their new approach to these guidelines [Dietary Reference Intakes](#) (DRIs). Since 1998, the Institute of Medicine has issued eight exhaustive volumes of DRIs that offer quantitative estimates of nutrient intakes to be used for planning and assessing diets applicable to healthy individuals in the United States and Canada. <http://www.iom.edu/CMS/3788/29985/37065.aspx>

- The Institute of Medicine (IOM) released "Preventing HIV Infection among Injecting Drug Users in High Risk Countries: An Assessment of the Evidence," on Sept. 15, 2006. The report, commission by the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the Bill & Melinda Gates Foundation evaluated strategies for preventing HIV transmission among injecting drug users. The report found that several key approaches can reduce the use and injection of illegal drugs, and also curb other drug- and sex-related risk behavior that increases the risk of HIV infection. It also provides evidence-based recommendations regarding drug dependence treatment, sterile needle and syringe access, and outreach and education; and urges high-risk countries to take immediate steps to make effective HIV prevention strategies widely available. <http://www.iom.edu/CMS/3783/30188/37071.aspx>

- The GAO issued "VA Health Care: Budget Formulation and Reporting on Budget Execution Need Improvement," (GAO-06-958) on Sept. 20, 2006. The report examined how the President's budget requests for VA medical programs were formulated; how VA monitored and reported to Congress on its budget execution; and which key factors in the budget formulation process contributed to requests for additional funding for fiscal years 2005 and 2006. <http://www.gao.gov/new.items/d06958.pdf>

- The Congressional Budget Office released "The Sustainable Growth Rate Formula for Setting Medicare's Physician Payment Rates," on Sept. 7, 2006. The report describes the Sustainable Growth Rate (SGR) mechanism used to adjust physicians' rates annually for the Supplemental Medical Insurance program (Part B of Medicare). It also presents the potential budgetary effects of several other approaches. Many of the possible alternatives would be costly. For example, overriding the formula with a one percent rate increase in 2007 would raise outlays by \$6 billion over the next 10 years. Replacing the formula with an inflation index would cost more than \$200 billion over the coming decade.

<http://www.cbo.gov/ftpdocs/75xx/doc7542/09-07-SGR-brief.pdf>

- The Institute of Medicine (IOM) released "Rewarding Provider Performance: Aligning Incentives in Medicare," on Sept. 21, 2006. The report analyzes the promise and risks of instituting a pay-for-performance program within Medicare to encourage a more effective health care system. The options and recommendations presented by the committee discuss the staged implementation of such a program with the goal of improving the value of health care investments through mechanisms such as quality improvement and care coordination. Although focused on Medicare, this report also has significant implications for payers and purchasers in the private sector.

<http://www.iom.edu/CMS/3809/19805/37232.aspx>

- The GAO issued "Reserve Forces: Army National Guard and Army Reserve Readiness for 21st Century Challenges," (GAO-06-1109T) on Sept. 21, 2006. This report focuses on the challenges in sustaining Army reserve component equipment and personnel readiness while supporting ongoing operations; and the extent to which the Army's planned transformation initiatives will alleviate equipment and personnel shortages and enhance readiness. <http://www.gao.gov/new.items/d061109t.pdf>

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## Legislation

- **H.CON.RES.476** (introduced Sept. 19, 2006): Supporting the observance of Breast Cancer Awareness Month and for other purposes was referred to the House Committee on Energy and Commerce. Sponsor: Representative Katherine Harris [FL-13]

- **H.R.6098** (introduced Sept. 19, 2006): To amend title XXI of the Social Security Act to eliminate funding shortfalls for the State Children's Health Insurance Program (SCHIP) for fiscal year 2007 was referred to the House Committee on Energy and Commerce. Sponsor: Representative John Barrow [GA-12]

- **H.R.6105** (introduced Sept. 19, 2006): To amend the Indian Health Care Improvement Act to help ensure that no Service hospital or outpatient health facility is closed unless Congressional reporting requirements regarding the hospital or facility are current was referred to the Committee on Resources, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.



Sponsor: Representative Stephanie Herseth [SD]

- **H.R.6109** (introduced Sept. 19, 2006): To amend title 38, United States Code, to provide for enhanced protection of sensitive personal information processed or maintained by the Secretary of Veterans Affairs was referred to the House Committee on Veterans' Affairs.

Sponsor: Representative Tim Murphy [PA-18]

- **H.R.6118** (introduced Sept. 20, 2006): To amend title XVIII of the Social Security Act to permit a physician assistant, when delegated by a physician, to order or provide post-hospital extended care services, home health services, and hospice care under the Medicare Program was referred to the Committee on Ways and Means, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

Sponsor: Representative J.D. Hayworth [AZ-5]

- **H.R.6123** (introduced Sept. 20, 2006): To include costs incurred by the Indian Health Service, a federally qualified health center, an AIDS drug assistance program, certain hospitals, or a pharmaceutical manufacturer patient assistance program in providing prescription drugs toward the annual out of pocket threshold under part D of title XVIII of the Social Security Act and to provide a safe harbor for assistance provided under a pharmaceutical manufacturer patient assistance program was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

Sponsor: Representative Rush D. Holt [NJ-12]

- **H.R.6125** (introduced Sept. 20, 2006): To prohibit discrimination by group health plans and employers based on genetic information was referred to the Committee on Government Reform, and in addition to the Committees on Education and the Workforce, Energy and Commerce, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

Sponsor: Representative Ron Paul [TX-14]

- **S.3906** (introduced Sept. 15, 2006): A bill to amend chapter 89 of title 5, United States Code, to make individuals employed by the Roosevelt Campobello International Park Commission eligible to obtain Federal health insurance was referred to the Committee on Homeland Security and Governmental Affairs.

Sponsor: Senator Susan M. Collins [ME]

- **S.3913** (introduced Sept. 19, 2006): A bill to amend title XXI of the Social Security Act to eliminate funding shortfalls for the State Children's Health Insurance Program (SCHIP) for fiscal year 2007 was referred to the Committee on Finance.

Sponsor: Senator John D. Rockefeller, IV [WV]

- **S.3914** (introduced Sept. 20, 2006): A bill to establish an Advisory Committee on Gestational Diabetes, to provide grants to better understand and reduce gestational diabetes, and for other purposes was referred to the Committee on Health, Education, Labor, and Pensions.  
Sponsor: Senator Hillary Rodham Clinton [NY]

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## Hill Hearings

- The Senate Veterans Affairs Committee will hold a hearing on Sept. 26, 2006, to examine the nomination of Robert T. Howard, of Virginia, to be an Assistant Secretary of Veterans Affairs (Information and Technology).
- The House Veterans Affairs Subcommittee on Health will hold an oversight hearing: "Post Traumatic Stress Disorder (PTSD) and Traumatic Brain Injury (TBI): Emerging Trends in Force and Veteran Health," on Sept. 28, 2006.

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## Meetings / Conferences

- The Air & Space Conference 2006 and Technology Exposition will be held Sept. 24-27, 2006 in Washington D.C. [www.afa.org](http://www.afa.org)
- The 2006 AUSA Annual Meeting & Exposition will be held Oct. 9 -11, 2006, in Washington D.C. [www.ausa.org](http://www.ausa.org)
- The Combined Forces Pharmacy Seminar 2006 will be held in Atlanta Ga. on Oct. 23-26, 2006. [www.cfpsinfo.org](http://www.cfpsinfo.org)
- The AMSUS 112th Annual Meeting: "Health 2015: Actionable Strategies for Caring for Our Warriors, Veterans and Country" will be held Nov 5-10, 2006, in San Antonio, Texas. [www.amsus.org](http://www.amsus.org)
- The State of the MHS - The 2007 Annual TRICARE Conference will be held Jan. 29 to Feb. 1, 2007, in Washington D.C. <http://www.tricare.osd.mil/conferences.cfm>
- The 2007 HIMSS will be held Feb. 25 to March 1, 2007, in New Orleans, La. <http://www.himss07.org/>

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*If you need further information on any of the items in the Federal Health Update, please contact Kate*



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