“We remember the many medics, and corpsmen who ran to the sound of the guns. …And in their name I promise you that we will do all that is humanly possible to provide healthcare that is worthy of heroes.” — Assistant Secretary of Defense for Health Affairs, S. Ward Casscells remembering military medical personnel who have died serving the Nation.

**Congressional Schedule**

- The Senate and House are in recess until June 4, 2007.

- On May 25, 2007, the President signed into law: H.R. 2206, the "U.S. Troop Readiness, Veterans' Care, Katrina Recovery, and Iraq Accountability Appropriations Act, 2007," which provides $120 billion -- in FY 2007 supplemental appropriations for the Global War on Terror (GWOT), hurricane disaster relief and recovery, and for other purposes.

- On May 25, 2007 President Bush nominated Dr. James W. Holsinger, Jr., to serve as the 18th Surgeon General of the United States. Dr. Holsinger is an accomplished physician who has led one of our Nation's
largest healthcare systems, the State of Kentucky's healthcare system, and the University of Kentucky's medical center. He also has taught at several American medical schools, and he served more than three decades in the United States Army Reserve, retiring in 1993 as a Major General.

• On May 25, 2007, the Senate confirmed Dr. Michael J. Kussman as Under Secretary for Health, and Thomas E. Harvey as Assistant Secretary for Congressional and Legislative Affairs.

Military Health Care News

• On May 30, 2007, TriWest Healthcare Alliance for the received the TRICARE Management Activity's "Contractor of the Year" award for outstanding and sustained anti-fraud performance. This prestigious award recognizes TriWest's successful efforts in detecting and deterring fraud and abuse during 2005-2006.

TriWest also received the TRICARE award for submitting the "Case of the Year." Both of these awards are the highest recognition issued by the TRICARE Management Activity Program Integrity Office to any of the TRICARE contractors.

These awards were presented to representatives of TriWest's Program Integrity Department at the TRICARE Management Activity Healthcare Anti-Fraud Conference in Nashville, Tenn., attended by more than 400 TRICARE managers, contractors, federal law enforcement and criminal investigators, as well as state and federal prosecutors.

The "Case of the Year" award was for the widely publicized federal case against a Seattle psychologist who agreed to pay $510,000 to the government and was sentenced to 12 months in prison. The individual pleaded guilty to filing bogus claims for reimbursement with TRICARE according to the Seattle Times, April 7, 2007 edition.

John Taylor, Director of Program Integrity at TriWest, will participate in several roundtable discussions during the three-day Nashville conference concerning the "Case of the Year," how it developed and its successful resolution, as well as participating with other Program Integrity managers to discuss meritorious case development and referrals to TRICARE for

TriWest Healthcare Alliance, the Defense Department’s managed care contractor that administers TRICARE, the military's healthcare program throughout California and 20 other states in the West Region. http://www.earthtimes.org/articles/show/news_press_release,113819.shtml

• Following the death of a newborn in 2000, the Beth Israel Deaconess Department of Obstetrics & Gynecology in Boston, refocused on improving patient care by adopting the Crew Resource Management (CRM) principles, which military and commercial aviation have used for more than 20 years to prevent errors.

Since implementing CRM principles, Beth Israel Deaconess hospital has had fewer complications with mothers and babies during childbirth and the lowest adverse event score of comparable hospitals reporting to
the National Perinatal Information Center, a nonprofit organization collecting national data.

Beth Israel Deaconess Medical Center also partnered with the Military Health System and Agency for Healthcare Research and Quality to develop the Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS) Program for improving patient safety culture in hospitals and other health care settings. Today, there are service-wide initiatives to introduce TeamSTEPPS into obstetrics, operating rooms, intensive care units, ambulatory medicine, and other clinics and service lines. TeamSTEPPS is an evidence-based teamwork system for improving patient safety through better communication and teamwork skills among health care professionals. It includes a comprehensive suite of ready-to-use materials and training materials to integrate teamwork principles into all areas of health care systems. http://www.tricare.mil/pressroom/news.aspx?fid=286

• A Department of Defense funded peer-to-peer campaign to increase awareness of the problems associated with overindulging in alcohol has won a 2007 Webby Award for its Web site at www.thatguy.com, and some impressive test results to go with it.

The www.thatguy.com Web site, designed by consultant Fleishman-Hillard Inc. after extensive research, won a Webby Award from among five finalists in the health Web site category. Other competitors included www.webMD.com, a popular and widely used health information site. Webby’s are similar to Oscars, only for the Internet. A panel of celebrities and industry experts determined the 2007 winners from more than 8,000 nominations received worldwide.

The “That Guy” alcohol counter-marketing effort is a key element in TRICARE’s Healthy Choices campaign, which also tackles the issues of obesity and smoking. That Guy has captured the attention of organizations ranging from the New York City Police Department, to universities and colleges, to the Air Force Air Mobility Command. Media attention has come from the New York Times and the Portland Oregonian.

In addition to the Web site, “That Guy” messages were used on advertising on billboards, newspapers, and TV and radio at four test sites: Fort Bragg, Pope Air Force Base, and Camp LeJeune, N.C., and at Pensacola Naval Air Station, Fla. Drink coasters with humorous messages and small posters designed to hang in offices and dorms were also an integral part of the campaign at the test sites.

The videos and campaign promotional materials on the award-winning “That Guy” Web site will soon be made available for downloading to installation Safety, Drug and Alcohol Abuse Prevention, and Health Promotion points of contact and the campaign will expand to more test sites. http://www.tricare.mil/pressroom/news.aspx?fid=285

• According to the American Forces Information Service, the Department of Defense is using an ongoing health study to help evaluate the impact of future deployments on long-term health. The Millennium Cohort Study is a joint-service study established to evaluate the health risks of military deployments, occupational exposures, and general military service,

Since program enrollment began in July 2001, about 108,000 service members have volunteered to participate. Among those who volunteered, about forty percent have been deployed to one of the recent
operations--either in Iraq or Afghanistan or surrounding regions--in support of the global war on terrorism. The study will evaluate the participants' health is evaluated over a 21-year period.

The study is providing valuable data that will help military epidemiologists understand possible cause-and-effect relationships between combat-zone deployments and problems such as post-traumatic stress disorder. 

Veterans Health Care News

• On May 30, 2007, the Department of Veterans Affairs (VA) announced plans to open 38 new community-based clinics in 22 states. With 153 hospitals and about 700 community-based clinics, VA operates the largest integrated health care system in the country. VA’s health care budget of more than $34 billion this year will provide health care to about 5.5 million people during nearly 800,000 hospitalizations and 60 million outpatient visits.

The new facilities, called community-based outpatient clinics, or CBOCs, will become operational by October 2008. Local VA officials will keep communities and their veterans informed of milestones in the creation of the new CBOCs.

The list of the VA’s Proposed Sites for New Outpatient Clinics:

  o Alabama – Childersburg
  o Arkansas -- Pine Bluff
  o Florida -- Jackson and Putnam
  o Georgia -- Camden and Stockbridge
  o Idaho -- North Idaho
  o Indiana -- Elkhart County and Knox
  o Iowa -- Carroll, Cedar Rapids, Marshalltown and Shenandoah
  o Kansas – Hutchison
  o Kentucky -- Berea, Daviess and Grayson County
  o Maryland -- Andrews Air Force Base and Ft. Detrick
  o Michigan -- Alpena County and Clare County
  o Missouri -- Branson and Jefferson City
  o Montana -- Cut Bank and Lewistown
  o Nebraska – Bellevue
  o South Carolina -- Aiken and Spartanburg
  o South Dakota -- Wagner and Watertown
  o Ohio -- Hamilton and Parma
  o Tennessee -- Hawkins and Madison
  o Utah -- Western Salt Lake Valley
  o Virginia – Charlottesville
  o Washington – Northwest
  o West Virginia -- Monongalia
**President Bush announced the recipients of the 2005 Medal of Science, America's highest honor for scientific achievement on May 29, 2007. The National Medal of Science honors individuals for pioneering scientific research in a range of fields, including physical, biological, mathematical, social, behavioral, and engineering sciences, that enhances our understanding of the world and leads to innovations and technologies that give the United States its global economic edge. The National Science Foundation administers the award, which was established by the Congress in 1959.**

The 2005 National Medal of Science Laureates:

- Jan D. Achenbach, Northwestern University – Evanston, IL
- Ralph A. Alpher, The Dudley University – Austin, TX
- Gordon H. Bower, Stanford University – Stanford, CA
- Bradley Efron, Stanford University – Stanford, CA
- Anthony S. Fauci, National Institute of Health – Washington, DC
- Tobin J. Marks, Northwestern University – Evanston, IL
- Lonnie G. Thompson, Ohio State University – Columbus, OH
- Torsten N. Wiesel, The Rockefeller University – New York, NY

*According to the Associated Press, Pfizer Inc., the world's largest drug maker, and Express Scripts Inc. announced that they reached an improved rebate agreement that will allow the cholesterol drug Lipitor onto the pharmacy benefits manager's preferred list of drugs. The rebate agreement was instrumental in including Lipitor onto Express Script’s preferred list of drugs as of June 1.*

The addition of Lipitor signals a sea-change at Express Scripts, which started a campaign in January 2006 to get clients to shift toward lower-priced generic cholesterol drugs. The company announced in April that benefit plan sponsors and patients saved $230 million on cholesterol drugs as a result. Sales of generic cholesterol drugs noticeably picked up when Merck & Co.’s Zocor lost patent protection last June.

Lipitor, the world's best-selling prescription drug, generated sales of $12.89 billion in 2006, but has consistently lost market share to lower-priced generic cholesterol drugs over the past year.

Express Scripts’ preferred list of drugs already includes Pfizer's glaucoma treatment Xalatan, and its arthritis treatment Celebrex. In 2006, Pfizer reported $1.45 billion in sales of the glaucoma treatments Xalatan and Xalacom, and $2.03 billion in sales of
The U.S. Food and Drug Administration (FDA) approved Torisel (temsirolimus) for the treatment of a certain type of advanced kidney cancer known as renal cell carcinoma on May 30, 2007. Torisel, manufactured by Philadelphia-based Wyeth Pharmaceuticals, Inc., was approved based on a study that showed use of the drug prolonged survival of patients with renal cell carcinoma. The drug is an enzyme inhibitor, a protein that regulates cell production, cell growth and cell survival.

The approval of Torisel follows the December 2005 approval of Nexavar (sorafenib), which was based on a delay in progression of disease. In January 2006, Sutent (sunitinib) received accelerated approval based on durable response rate, or tumor size reduction and was later demonstrated to delay tumor progression.

The safety and effectiveness of Torisel were shown in a clinical trial of 626 patients divided into three groups. One group received Torisel alone, another received a comparison drug called Interferon alfa and a third received a combination of Torisel and interferon.

The group of patients who received Torisel alone showed a significant improvement in overall survival. The median overall survival was 10.9 months for patients on Torisel alone versus 7.3 months for those treated with the interferon alone. Progression-free survival (when the disease does not get worse) increased from 3.1 months on the interferon alone arm to 5.5 months on the Torisel alone arm. The combination of Torisel and interferon did not result in a significant increase in overall survival when compared with interferon alone.

Renal cell carcinoma, diagnosed in about 51,000 people annually in the United States, accounts for about 85 percent of all U.S. adult kidney cancer.

HHS' Agency for Healthcare Research and Quality has developed a new Web tool demonstrating a variety of approaches for health quality report cards. The new Health Care Report Card Compendium is a searchable directory of more than 200 samples of report cards produced by a variety of organizations. The samples show formats and approaches for providing comparative information on the quality of health plans, hospitals, medical groups, individual physicians, nursing homes, and other providers of care.

The purpose of the AHRQ Health Care Report Card Compendium is to inform and support the various organizations that develop health care quality reports; to provide easy access to examples of different approaches to content and presentation; and to meet the needs of health services researchers. It also provides related Web sites and sample pages where available.

AHRQ is providing this compilation of report card samples as a service to report developers, researchers, and other users. AHRQ makes no judgment concerning the effectiveness or value of reports in the compendium but offers them to users for their consideration. Inclusion of a report in the compendium does not constitute an endorsement of the report in its entirety, or of any element in the report, by AHRQ. The compendium was developed as a resource for report sponsors to supplement guidance provided on AHRQ's TalkingQuality Web site. TalkingQuality informs and supports current and potential sponsors of health care performance reports by sharing the lessons learned by researchers and experienced report developers.
This resource was developed by AHRQ's Consumer Assessment of Healthcare Providers and Systems User Network to give sponsors and researchers access to examples of quality reports and to enable them to locate and network with each other on related issues. http://www.ahrq.gov/news/press/pr2007/compendpr.htm

• The U.S. Food and Drug Administration (FDA) issued final recommendations to increase the supply of safe and effective influenza vaccines for both seasonal and pandemic use. FDA's goal with the guidances is to outline the regulatory pathways for the rapid development and approval of these products.

In March 2006, FDA issued two draft guidance documents for public comment — one for seasonal influenza vaccines and another for pandemic influenza vaccines. The draft documents outline specific approaches for manufacturers to develop new vaccines that are safe, pure, and potent. The final guidances reflect public input, including vaccine companies and public health officials. Both recommend using recent technologies such as cell culture and recombinant manufacturing to enhance the development and evaluation of vaccines. They also recommend adding substances that improve the immune response from the vaccine (novel adjuvants).

The guidances describe conventional and accelerated approval pathways to vaccine licensure and reflect the FDA's ongoing efforts under its Critical Path Initiative to translate scientific advances, such as cell-culture derived and recombinant vaccine technologies, into new medical products with shorter approval timeframes. http://www.fda.gov/bbs/topics/NEWS/2007/NEW01645.html

Reserve/Guard

• The total number of Guard and Reserve currently on active duty has increased by 2,730 from the last report to 86,348. The totals for each service are Army National Guard and Army Reserve, 67,769; Navy Reserve, 5,391; Air National Guard and Air Force Reserve, 6,181; Marine Corps Reserve, 6,651; and the Coast Guard Reserve, 356. www.defenselink.mil

Contracts/Procurements

• The US Army Medical Materiel Agency issued a Request For Information (RFI) on the behalf of the Deputy, Chief Medical Officer, TRICARE Management Activity (TMA) to determine all interested and available vendors capable of completing a comprehensive, independent, academic review of the DoD medical quality program and interested in sharing information about their capabilities in completing the review. The result of this market research may result in a future synopsis announced in the FEDBIZ OPS as a request for proposal or request for quote. Submission packages shall be identified and marked with the RFI number and all submissions shall be received by June 7, 2007. http://www.fbo.gov/spg/USA/USAMRAA/DAMD17/USA%2DSNOTE%2D070531%2D003/Synopsis.html
Reports/Policies


• The GAO published “Military Pay: Processes for Retaining Injured Army National Guard and Reserve Soldiers on Active Duty Have Been Improved, but Some Challenges Remain,” (GAO-07-608) on May 29, 2007.  This is a follow-up report to the 2005 report that examined the Army's Active Duty Medical Extension (ADME) process and found that it caused injured and ill Army National Guard and Reserve (reserve component) soldiers to experience gaps in pay and benefits.  As a result, the Army implemented the Medical Retention Processing (MRP) program and Community-Based Health Care Initiative (CBHCI).  The GAO examined whether the MRP has resolved the pay issues previously identified with ADME and if the Army has the metrics it needs to determine whether it is effectively managing CBHCI program risks.  

• The Institute of Medicine published “Long-term Health Effects of Participation in Project SHAD (Shipboard Hazard and Defense),” on May 30, 2007.  The report, sponsored by the U.S. Department of Veterans Affairs, compared the health of veterans who participated in SHAD with the health of a similar group of veterans who did not participate and found no clear evidence that specific long-term health effects are associated with participation in Project SHAD.  
  http://www.iom.edu/CMS/3795/4909/43349.aspx

• The GAO issued “Armed Forces Retirement Home: Health Care Oversight Should Be Strengthened,” (GAO-07-790R) on May 30, 2007.  The GAO assessed the regulatory oversight and monitoring of health care and nursing home care services provided by AFRH by reviewing the standards that could be used to monitor health care provided by AFRH; and the adequacy of DoD oversight of AFRH health care.  
  http://www.gao.gov/new.items/d07790r.pdf

• The GAO issued “Military Health Care: TRICARE Cost-Sharing Proposals Would Help Offset Increasing Health Care Spending, but Projected Savings Are Likely Overestimated,” (GAO-07-647) on May 31, 2007.  In this report, the GAO evaluated the likelihood that DoD would achieve its estimated savings from the proposed enrollment fee and deductible increases for retirees and dependents under age 65; the likelihood that DoD would achieve its estimated savings from the proposed pharmacy co-payment increases for all beneficiaries except active duty personnel; and the factors identified by DoD as contributing to increased TRICARE spending from 2000 to 2005.  

• The GAO issued “Retiree Health Benefits: Majority of Sponsors Continued to Offer Prescription Drug Coverage and Chose the Retiree Drug Subsidy,” (GAO-07-572) on May 31, 2007.  The GAO examined which MMA prescription drug coverage options sponsors selected, the factors they considered in selecting these options, and the effect these decisions may have on the provision of employment-based health benefits for retirees.  GAO identified options that sponsors selected using data from employer benefit surveys and the Centers for Medicare & Medicaid Services (CMS), the federal agency that administers
Legislation

- No legislation was proposed this week.

Hill Hearings

- The House Committee on Government Oversight and Reform will hold a hearing on **June 6, 2007**, to examine the FDA’s role in the evaluation of diabetes drug Avandia’s safety.

- The Veterans Affairs committees for the Senate and House will hold a joint hearing on **Sept. 20, 2007**, to hear the American Legion's legislative presentation.

Meetings / Conferences


- The Global Medical Readiness Conference will be held **June 25 – 28, 2007**, in Orlando, Fl. [https://secure.giuffrida.org/airforce/index.html](https://secure.giuffrida.org/airforce/index.html)

- The Society of Ghana Women's Medical and Dental Practitioners, the 27th International MWIA Congress is scheduled for **July 31 to Aug. 4, 2007** in Accra, Ghana. [www.mwiainghana.org](http://www.mwiainghana.org)


- The 2007 Advance Technology Applications for Combat Casualty Care (ATACCC) Conference will be held on **Aug. 13-15, 2007** in St Petersburg Beach, Fla. [http://www.usacc.org/ATACCC/index.htm](http://www.usacc.org/ATACCC/index.htm)

- 46th Annual Research in Medical Education (RIME) Conference will be held **Nov. 2-7, 2007**, in conjunction with the AAMC Annual Meeting in Washington, D.C.
The 13th International Congress on Infectious Diseases will be held **June 19-22, 2008**, in Kuala Lumpur, Malaysia.  [http://www.isid.org/13th_icid/](http://www.isid.org/13th_icid/)

*If you need further information on any of the items in the Federal Health Update, please contact Kate Connelly Theroux at (703) 447-3257 or by e-mail at kate@usminstitute.org. To subscribe, please visit [http://usminstitute.org/subscriber.cfm](http://usminstitute.org/subscriber.cfm). To unsubscribe, please send an email to update@usminstitute.org with UNSUBSCRIBE as the subject.*