

FEDERAL HEALTH UPDATE

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

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Congressional Schedule

- The House passed H.R. 976, the *Children's Health Insurance Program Reauthorization Act*, on Sept. 25, 2007. The bill includes amendments passed in the Senate on Aug. 2, 2007.
- The House Veterans Affairs subcommittee on Oversight and Investigations held an oversight hearing on Sept. 25, 2007, on Department of Veterans Affairs (VA) Polytrauma Rehabilitation Centers (PRCs). The hearing focused primarily on problems identified at the Palo Alto PRC, which has 12 polytrauma beds. Representatives from VA Palo Alto Health Care System testified, including Elizabeth Joyce Freeman, the director of the VA Palo Alto Health Care System, as well as William F. Feeley, deputy undersecretary of Veterans Affairs for health for operations and management, and other directors of VA Polytrauma Rehabilitation Centers.
- The House Veterans' Affairs Committee held an oversight hearing on Sept. 25, 2007, to review research and treatment of Gulf War Illnesses (GWI) and the individuals suffering from them. Committee members questioned whether Departments of Defense and Veterans Affairs are properly addressing, researching and

treating GWI.

- On Sept.27, 2007, President Bush signed H.R. 3580, the *Food and Drug Administration Amendments Act of 2007*. This legislation reauthorizes a number of Food and Drug Administration programs including the Prescription Drug User Fee Act and Medical Device User Fee and Modernization Act; extends and modifies authorities related to pediatric uses of drugs and medical devices; and expands current authority related to post marketing surveillance of drugs.
- On Sept.26, 2007, the House passed H. J. Res. 52, making continuing appropriations for the fiscal year 2008, and for other purposes. This would allow the federal government to continue to run after Oct. 1, 2007, when appropriations from fiscal year 2007 would end. Congress has not passed any of the 12 appropriation bills for fiscal year 2008.

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Military Health Care News

- The Department of Defense (DoD) recently sent Congress a corrective [action plan](#) to improve mental health care for service members and their families. The plan addresses findings and recommendations presented to DoD by the Task Force on Mental Health in a June 12, 2007, [report](#).

The DoD plan addresses six broad categories of recommendations in the Mental Health Task Force's report, including:

- Leadership, culture and advocacy;
- Access to care;
- Quality of care;
- Resilience building and stigma reduction;
- Surveillance, research and evaluation; and
- Care transition and coordination.

The department is working to provide a comprehensive integrated system of excellence in prevention and care, to meet the needs of individual service members and their families throughout the military lifecycle.

The Task Force on Mental Health was congressionally directed and organized in June 2006 to assess and recommend actions for improving the efficacy of mental health services provided to service members and their families. It includes seven DoD members and seven non-DoD members.

<http://www.defenselink.mil/releases/release.aspx?releaseid=11356>

- TRICARE Management Activity published a final rule in the *Federal Register*, which implements section 702 of the John Warner National Defense Authorization Act for Fiscal Year 2007, Public Law 109-364. The rule provides coverage of contracted medical care with respect to dental care beyond that care required as a necessary adjunct to medical or surgical treatment. The entitlement of institutional and anesthesia services is authorized in conjunction with non-covered dental treatment for patients with

developmental, mental, or physical disabilities or for pediatric patients age 5 or under. This final rule does not eliminate any contracted medical care that is currently covered for spouses and children. The entitlement of anesthesia services includes general anesthesia services only. Institutional services include institutional benefits associated with both hospital and in-out surgery settings. Patients with developmental, mental, or physical disabilities are those patients with conditions that prohibit dental treatment in a safe and effective manner. Therefore, it is medically or psychologically necessary for these patients to require general anesthesia for dental treatment.

- TRICARE Management Activity published the final rule in [Federal Register](#) implementing section 713 of the National Defense Authorization Act for Fiscal Year 2006 (NDAA for FY06), Public Law 109-163. The rule, effective Sept. 20, 2007, provides eligibility for survivor benefits under the TRICARE Dental Program (TDP) to include the active duty spouse of a member who dies while on active duty for a period of more than 30 days who subsequently separates from active duty during the three-year transitional survivor period.
- The Department of Defense (DoD) awarded the TRICARE Retiree Dental Program (TRDP) contract to Delta Dental of California, of Rancho Cordova, Calif. Delta Dental of California has the current contract for TRDP. The new contract was effective September 21, 2007.

TRDP was first authorized by Congress in 1997 and is a voluntary, all-enrollee paid dental program serving the nation's Uniformed Services' retirees and their family members. It is a single, separate vehicle for dental insurance coverage, customer service activities that support enrollment, network provider locator, claims processing and other administrative services for more than one million beneficiaries.

The program offers coverage for dental services rendered in the United States, the District of Columbia, Puerto Rico, Guam, the U.S. Virgin Islands, American Samoa, the Commonwealth of the Northern Mariana Islands, and Canada.

TRDP is available to eligible personnel retired from the uniformed services, to unremarried surviving spouses, eligible dependents, former members of the Armed Forces who are Medal of Honor recipients and their immediate dependents. <http://www.tricare.mil/pressroom/news.aspx?fid=320>

- The Department of Defense announced that Rear Adm. (lower half) Matthew L. Nathan is being assigned as commander, Navy Medicine East / commander, Naval Medical Center, Portsmouth, Va. Nathan is currently serving as fleet surgeon, U.S. Fleet Forces Command, Norfolk, Va.

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Veterans Health Care News

- A Department of Veterans Affairs (VA) employee in Boston, Dr. Jonathan Shay, has been awarded the so-called "Genius Award" from the MacArthur Foundation. Shay, the author of two popular books about post-traumatic stress disorder (PTSD), has been a VA staff psychiatrist treating combat veterans with

PTSD since November 1987.

Dr. Shay was one of 24 Americans who each recently received a \$500,000 grant from the John D. and Catherine T. MacArthur Foundation, one of the nation's largest philanthropic organizations, for "exceptional merit and promise of continued creative work." Shay combines a study of classic literature with 20 years of experience treating veterans in Boston to explain PTSD to both the public and health care professionals.

In addition to publications in professional journals, he is the author of *Achilles in Vietnam* and *Odysseus in America*, two widely regarded books that helped spread the understanding that PTSD is an age-old battlefield injury by comparing the works of the ancient Greek poet Homer to the experiences of modern combat veterans.

He also pioneered the use of certain anti-depression medicine, called "selective serotonin reuptake inhibitors," for combat trauma, a treatment that now has broad endorsement for veterans with psychological injury.

Besides working for VA, Shay has also worked with the military services and the Defense Department in a variety of capacities to foster an understanding of PTSD, improve military leadership and strengthen ethics training for the military.

Shay received his bachelor's degree from Harvard College, and his M.D. and Ph.D. in neuropathology from the University of Pennsylvania. <http://www1.va.gov/opa/pressrel/pressrelease.cfm?id=1388>

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Health Care News

- Dr. Steven Galson was appointed to be the acting surgeon general of the United States, effective Oct. 1, 2007. As a Rear Admiral in the U.S. Public Health Service, Galson has a life-long commitment to the advancement of public health. Since joining FDA in 2001, he has provided exemplary leadership to one of FDA's busiest centers—the Center for Drug Evaluation and Research.
- The Department of Health and Human Services has awarded \$8.8 million in grants to help states provide more affordable choices to individuals struggling to remain in their homes and communities as they age.

Congress included authority for these nursing home diversion grants in the most recent reauthorization of the Older Americans Act (OAA) signed into law by President Bush in October 2006. These new provisions in the OAA complement the changes occurring in Medicare and Medicaid, including the provisions in the Deficit Reduction Act of 2005, reflecting seniors' desire to receive and direct their personal care at home.

A total of \$5.7 million in federal funding was awarded to 12 states for grants that will improve state efforts to assist individuals avoid unnecessary nursing home placement, impoverishment and spend-down to Medicaid. The states will contribute more than \$3 million to support the effort.

The Nursing Home Diversion Modernization Grants Program will help enable states to use existing OAA and state revenue funds in a more flexible manner so that a greater range of support options can be made available to individuals who are at high risk of nursing home placement. These grants will also enable states to give consumers a greater role in determining the types of services and the manner in which they receive them. To view the list of states that received federal funding, please visit

<http://www.hhs.gov/news/press/2007pres/09/pr20070924a.html>

- The Centers for Medicare and Medicaid Services (CMS) announced that seven health plan sponsors may resume marketing their Private-Fee-For-Service (PFFS) plans. These sponsors were found compliant with Medicare requirements through a comprehensive marketing review. The approvals allow the sponsors, as well as all other Medicare Advantage organizations, to market to newly eligible Medicare beneficiaries through Oct. 1, 2007. The plans may also market to those beneficiaries with special enrollment periods.

The United Health Group, Blue Cross Blue Shield of Tennessee, Humana Inc., and Sterling Life Insurance Co. represent four of the seven sponsors that voluntarily suspended marketing PFFS plans earlier this year that are now approved. CMS completed a similar review of and approved PFFS-plan marketing by the three other sponsors, Coventry Health Care Inc., Universal American Financial Corp., and WellCare Health Plans Inc., in August.

Any plan that is found to be in violation of CMS requirements can be subject to a full range of available penalties, which can include suspension of marketing and/or enrollment, suspension of payment for new enrollees, civil-monetary penalties, and termination from the Medicare program.

The suspensions of the plan sponsors' PFFS market activities were lifted only after CMS verified that each organization had the systems and management controls in place to meet all of the conditions specified in the 2008 Call Letter and the May 25, 2007 guidance issued by CMS. [CMS NR 09-24-2007](#)

- The White House announced that President Bush has nominated Christina H. Pearson, of Maryland, to be Assistant Secretary of Health and Human Services (Public Affairs) and upon nomination designate Acting. Ms. Pearson currently serves as Deputy Assistant Secretary for Public Affairs (Media) at the Department of Health and Human Services. Prior to this, she served as Director of Media Affairs in the Office of Public Affairs at the Department of Health and Human Services. Earlier in her career, she served as Senior Associate Director of Media Relations at the American Hospital Association. Ms. Pearson received her bachelor's degree from Hamilton College.

- The Substance Abuse and Mental Health Services Administration (SAMHSA) awarded 55 grants totaling approximately \$21 million over three years to help states and territories enhance their capacity to record and report on the performance of their mental health services. A [Uniform Reporting System \(URS\)](#) will be used to ensure program consistency and thoroughness among state grantees.

Grantees receiving these awards will be able to implement the following activities and special initiatives:

- Collect and report the URS measures, including National Outcome Measures (NOMs);
- Improve state and local data infrastructure to ensure accurate record and report URS and NOMs

measures;

- Collaborate with State Mental Health Planning Councils on setting targets for service provision and consumer outcomes, using the URS/NOMs as a framework;
- Implement data quality initiatives including efforts to reduce missing, incomplete or incorrect data; and
- Develop Web-based systems or approaches for improved URS reporting;
- State grantees meeting all URS reporting requirements may propose additional activities, which include addressing development and refinement of client level reporting as well as working with state and local entities to develop electronic health records and personal health records.

Each state and the District of Columbia will receive up to \$142,200 per year in total costs. U.S. Territories will receive up to \$71,100 per year in total costs. Continuation of these grants is subject to the availability of funds and progress achieved by the grantees. Total funding for year one is \$7.2 million. To view the entire list of grants, please visit <http://www.samhsa.gov/newsroom/advisories/0709265213.aspx>

- Enhanced and systematic efforts to identify and treat depression in the workplace significantly improves employee health and productivity, likely leading to lower costs overall for the employer, according to a National Institutes of Health's National Institute of Mental Health (NIMH) study published Sept. 26, 2007, in the *Journal of the American Medical Association*.

Philip Wang, M.D., Dr.P.H., director of NIMH's Division of Services and Intervention Research, and colleagues conducted a trial with 604 employees enrolled in a managed behavioral health care plan, all of whom were identified as having clinically significant depression during a Web-based and telephone screening process. Half of the participants were randomly assigned to an intervention that included telephone support from a care manager and their choice of telephone psychotherapy, in-person psychotherapy or antidepressant medication. The other half of the participants were assigned to usual care, which included feedback about their screening results, and advice to seek care from their usual provider.

After 12 months, those in the intervention group were 40 percent more likely to have recovered from their depression compared to those in usual care. Participants in the intervention group also were 70 percent more likely to stay employed, and worked an average of two more hours per week than those in usual care.

Although the data did not lend themselves to a comprehensive cost/benefit analysis, the researchers noted that just the value of more hours worked among those in the intervention group who were employed, estimated at \$1,800 per employee per year, far exceeds the \$100-\$400 per person costs associated with the type of outreach and intervention program used in the study. <http://www.nih.gov/news/pr/sep2007/nimh-25.htm>

- The Association for the Accreditation of Human Research Protection Programs (AAHRPP) has awarded full accreditation to four universities and nine Veterans Affairs medical centers.

Full accreditation has been awarded to:

- Harvard University Faculty of Medicine;
- Marshall University;

- The Board of Regents of the University of Oklahoma;
- University of Kansas Medical Center;
- Department of Veterans Affairs Huntington VA Medical Center;
- Edith Nourse Rogers Memorial Veterans Hospital;
- Edward Hines Jr. VA Hospital and North Chicago, VA Medical Center;
- Manchester Veterans Affairs Medical Center;
- Department of Veterans Affairs New York Harbor Healthcare System;
- Memphis Veterans Affairs Medical Center;
- VA Sierra Nevada Health Care System;
- Veterans Affairs Caribbean Healthcare System; and
- Veterans Affairs Medical Center, Oklahoma City.

Accreditation is valid for three years. Thirty-two states now have AAHRPP-accredited research institutions. The AAMC is a founding member of AAHRPP.

<http://www.aahrpp.org/www.aspx?PageID=227>

- The Department of Health and Human Services (HHS) announced that more than 90 percent of Medicare beneficiaries in a stand-alone Part D prescription drug plan (PDP) will have access to at least one plan in 2008 with premiums lower than they are paying this year. The open enrollment period for 2008 begins Nov. 15 and ends Dec. 31.

In every state, beneficiaries will have access to at least one prescription drug plan with premiums of less than \$20 a month, and a choice of at least five plans with premiums of less than \$25 a month. The national average monthly premium for the basic Medicare drug benefit in 2008 is projected to average roughly \$25.

Beneficiaries who qualify for extra help through Medicare's Low-Income Subsidy (LIS) will also have a range of options available for comprehensive coverage. Those who qualify for the full Medicare subsidy will pay no premiums or deductibles in these plans.

In 2008, 17 organizations will offer [stand-alone prescription drug plans](#) nationwide (in all 50 states plus Washington, D.C.). Beneficiaries will have a wide range of plans to choose from that have zero deductibles, some of which also offer other enhanced benefits, such as reduced deductibles and lower cost sharing.

Beneficiaries will continue to have access to Medicare Advantage health plans that offer lower premiums and enhanced drug coverage. The premiums for Medicare Advantage plans with prescription drug coverage (MA-PDs) continue to be lower than premiums for PDPs.

The Medicare prescription drug benefit continues to enjoy widespread popularity among people with Medicare. Surveys continue to show that upwards of 80 percent of Medicare beneficiaries are satisfied with their current coverage.

Details about the specific plans available in every region will be released in mid-October. Beneficiaries who want to review their current coverage as well as the other options available to them will have access to

information and assistance from many sources including:

- A notice of any coverage changes from their current prescription drug plan, coming by Oct. 31;
- The enhanced Medicare Drug Plan Finder, available in mid-October;
- Toll free information available 24/7 at 1-800-MEDICARE (1-800-633-4227);
- The annual *Medicare & You 2008* handbook that explains Medicare coverage, to be mailed in October; and
- Local organizations such as the State Health Insurance Assistance Programs and thousands of other Medicare partner organizations that will provide personalized assistance throughout the fall.

<http://www.hhs.gov/news/press/2007pres/09/pr20070927f.html>

- The Department of Health and Human Services (HHS) announced health care facilities partnership program grants to eleven health care partnerships totaling \$18.1 million. Selected through a competitive process each grantee presented a program designed to enhance community and hospital preparedness for public health emergencies.

The projects selected to receive grants are focused on:

- Planning for the surge of patients and its regional impact during major public health emergencies
- Improving regional public health emergency coordination through innovative approaches to training, communications and new software; or
- Developing and conducting functional public health emergency exercises to evaluate community and hospital preparedness.

To view the list of facilities who received grants, please visit
<http://www.hhs.gov/news/press/2007pres/09/pr20070927b.html>.

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Reserve/Guard

- The total number of Guard and Reserve currently on active duty has **decreased** by 1,718 from the last report to 95,405. The totals for each service are Army National Guard and Army Reserve, 74,574; Navy Reserve, 5,758; Air National Guard and Air Force Reserve, 7,954; Marine Corps Reserve, 6,807; and the Coast Guard Reserve, 312. www.defenselink.mil

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Reports/Policies

- The Institute of Medicine (IOM) published “*Review of the DoD-GEIS Influenza Programs: Strengthening Global Surveillance and Response*,” on Sept. 25, 2007. This report assesses the effectiveness of the Department of Defense Global Emerging Infections Surveillance and Response Program (DoD-GEIS), which maintains a global influenza surveillance network. <http://www.iom.edu/CMS/3783/38416/46343.aspx>
- The GAO released “*DoD and VA: Preliminary Observations on Efforts to Improve Health Care and Disability Evaluations for Returning Service members*,” (GAO-07-1256T) on Sept. 26, 2007. <http://www.gao.gov/new.items/d071256t.pdf>
- The GAO released “*Influenza Pandemic: Opportunities Exist to Clarify Federal Leadership Roles and Improve Pandemic Planning*,” (GAO-07-1257T) on Sept. 26, 2007. The report addresses federal leadership roles and responsibilities for preparing for and responding to a pandemic, our assessment of the Strategy and Plan; and opportunities to increase clarity of federal leadership roles and responsibilities and improve pandemic planning. GAO used its characteristics of an effective national strategy to assess the Strategy and Plan. <http://www.gao.gov/new.items/d071257t.pdf>
- The GAO released “*Medicare Inpatient Hospital Payments: CMS Has Used External Data for New Technologies in Certain Instances and Medicare Remains Primary Data Source*,” (GAO-07-46) on Sept. 26, 2007. The GAO examined to what extent CMS has used external data in determining payments for inpatient stays involving new technologies and to what extent can external data from other government agencies be used by CMS in determining DRG payments for inpatient stays involving new technologies. <http://www.gao.gov/new.items/d0746.pdf>
- The GAO released “*Veterans Affairs: Sustained Management Commitment and Oversight Are Essential to Completing Information Technology Realignment and Strengthening Information Security*,” (GAO-07-1264T) on Sept. 26, 2007. The report examines VA's realignment effort as well as actions to improve security over its information systems. To prepare this testimony, GAO reviewed its past work on the realignment and on information security, and it updated and supplemented its analysis with interviews of VA officials. <http://www.gao.gov/new.items/d071264t.pdf>
- The Office for the Under Secretary of Defense for Personnel and Readiness issued “Change in Policy for Administration of Anthrax and Smallpox Vaccines,” on Sept. 11, 2007. The new policy expands the time that anthrax and smallpox vaccinations can be given to units deploying overseas in designed regions from 60 days to 120 days. <http://www.ha.osd.mil/policies/2007/07-019.pdf>

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Legislation

- **H.R.3635** (introduced Sept. 24, 2007): To amend the Public Health Service Act to establish a National Organ and Tissue Donor Registry Resource Center, to authorize grants for State organ and tissue donor

registries, and for other purposes was referred to the House Committee on Energy and Commerce.
Sponsor: Representative William Lacy Clay [MO-1]

- **H.R.3643** (introduced Sept. 24, 2007): To amend the Public Health Service Act to establish a Coordinated Environmental Public Health Network, and for other purposes was referred to the House Committee on Energy and Commerce.
Sponsor: Representative Nancy Pelosi [CA-8]

- **H.R.3645** (introduced Sept. 24, 2007: To implement recommendations of the President's Commission on Care for America's Returning Wounded Warriors was referred to the Committee on Armed Services, and in addition to the Committees on Veterans' Affairs, Education and Labor, House Administration, and Oversight and Government Reform, 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 Zachary T. Space [OH-18] for consideration of such provisions as fall within the jurisdiction of the committee concerned.

- **H.R.3660** (introduced Sept. 24, 2007): To amend the Internal Revenue Code of 1986 to provide that the deduction for the health insurance costs of self-employed individuals be allowed in determining self-employment tax was referred to the House Committee on Ways and Means.
Sponsor: Representative Ron Kind [WI-3]

- **S.RES.325** (introduced Sept. 21, 2007): A resolution supporting efforts to increase childhood cancer awareness, treatment, and research was agreed to in the Senate.
Sponsor: Senator Johnny Isakson [GA]

- **S.2086** (introduced Sept. 24, 2007): A bill to amend title XXI of the Social Security Act to extend funding for 18 months for the State Children's Health Insurance Program (SCHIP) and for other purposes was referred to the Committee on Finance.
Sponsor: Senator Trent Lott [MS]

- **H.R.3645** (introduced Sept. 24, 2007: To implement recommendations of the President's Commission on Care for America's Returning Wounded Warriors was referred to the Committee on Armed Services, and in addition to the Committees on Veterans' Affairs, Education and Labor, House Administration, and Oversight and Government Reform, 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 Zachary T. Space [OH-18] for consideration of such provisions as fall within the jurisdiction of the committee concerned.

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Hill Hearings

- The House Veterans Affairs Committee will hold a hearing on **Oct. 3, 2007**, to the future of funding of the VA.
- The House Veterans Affairs Subcommittee on Health will hold a hearing on **Oct. 4, 2007**, to examine VA research programs.
- The House Veterans Affairs Subcommittee on Disability Assistance and Memorial Affairs will hold a field hearing on **Oct. 9, 2007**, to examine the personal costs of the VA claims backlog.
- The House Veterans Affairs Committee will hold a hearing on **Oct. 10, 2007**, to examine the findings of the Veterans Disability Benefits Commission.

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Meetings / Conferences

- The National Institutes of Health (NIH) will hold a symposium on cardiovascular regenerative medicine on Oct. **1-2, 2007**, in Bethesda, Md. <http://www.nhlbi.nih.gov/meetings/cv-regen/index.htm>
- The annual General Assembly of the World Medical Association will be held on **Oct. 3-6, 2007**, in Copenhagen, Denmark. www.wma.net
- The American Academy of Family Physicians (AAFP) will host a meeting for family physicians on **Oct. 3-6, 2007**, in Chicago, Ill. www.aafp.org/online/en/home/cme/aafpcourses/conferences.html
- The 14th Annual Meeting of the ACP Navy Chapter will be held on **Oct. 4-6, 2007**, in Portsmouth, Va. www.hjf.org/events
- The 20th Annual Infectious Diseases in Children Symposium will be held on **Oct. 20-21, 2007**, in New York City, N.Y. <http://www.vindicomeded.com/meetings/idc/ny/default.htm>
- The American Association for Clinical Chemistry (AACC) and the National Academy of Clinical Biochemistry (NACB) will hold a one-day conference: “*Making the Case for the New Cancer Diagnostics*,” on **Nov. 2, 2007**, in St. Louis, Mo. <http://www.aacc.org/AACC/events/meetings/NewCancerDetectionTechnologies.htm>
- The 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.

<http://www.aamc.org/meetings/annual/2007/start.htm>

- The American Public Health Association 135th Annual Meeting will be held on **Nov. 3-7, 2007**, in Washington, D.C. <http://apha.confex.com/apha/135am/techprogram/>
- The FDA's conference: "*Anthrax Vaccines -- Bridging Correlates of Protection in Animals to Immunogenicity in Humans*," will be held on **Nov. 8-9, 2007**, in Gaithersburg Md. <http://www.fda.gov/OHRMS/DOCKETS/98fr/E7-11613.htm>
- The AMSUS 113th Annual Meeting will be held **Nov. 11-16, 2007**, in Salt Lake City, Utah. <http://www.amsus.org/convention/>
- The 27th AMEDD Neurology Meeting will be held on **Nov. 14-16, 2007**, in Washington, D.C. www.hjf.org/events
- The 2007 meeting of the Army and Air Force Chapters of the ACP will be held on **Nov. 14-18, 2007**, in San Antonio, Texas. www.hjf.org/events
- The 47th ASCB Annual Meeting will be held on Dec. 1-5, 2007, in Washington D.C. <http://www.ascb.org/meetings/>
- The Special Operations Medical Conference will be held on **Dec. 10-13, 2007**, in Tampa, Fla. <http://www.trueresearch.org/soma/2007/attendee-registration.aspx>
- The State of the MHS - The 2008 Annual TRICARE Conference will be held on **Jan. 28-31, 2008**, in Washington D.C. <http://www.tricare.mil/conferences.cfm>
- The 5th Annual World Healthcare Congress will be held on **April 21-23, 2008**, in Washington D.C. <http://www.worldcongress.com/email/HR08000/HR08000-9-11-07Online.htm>
- The 13th International Congress on Infectious Diseases will be held **June 19-22, 2008**, in Kuala Lumpur, Malaysia. http://www.isid.org/13th_icid/

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