Welcome to Federal Health Update. This newsletter, produced by Kate Connelly Theroux in collaboration with the Institute of Federal Health Care, is a compilation of the latest news in the federal health care sector.

Executive and Congressional News

- The House and Senate are in recess until April 16, 2012.

Military Health Care News

- The Army Times reports that the TRICARE Assistance Program for behavioral health counseling is being shut down due to lack of use.

  The $3 million demonstration program, launched in August 2009, was designed to test use of Web-based video conferencing for mental health counseling.

  The instant messaging and Web-based chat program facilitated communications with patients and counselors on non-medical concerns ranging from deployment anxiety and work stress to family and relationship issues.

  The program logged 5,109 calls during a two-year period, with 89 percent coming from the TRICARE West region, according to Tricare spokesman Austin Camacho.

  Only 1,188 were initial calls, while the rest were follow-ups, he added.
The Military OneSource is similar to TRIAP, offering confidential, anonymous counseling. TRICARE also offers tele-mental health services for beneficiaries in certain circumstances.

- Harris & Ruble, a class-action law firm based in Los Angeles, announced their filing of a class-action lawsuit against Science Applications International Corporation (SAIC), a TRICARE contractor.

  In its filing, the firm alleges the company did not properly safeguard medical information for an estimated 4.9 million military clinic and hospital patients affected by the mid-September 2011 theft of computer backup tapes from the unattended personal vehicle of an SAIC employee.

  Filed in the United States District Court for the Northern District of California, the class-action lawsuit alleges that SAIC was negligent in protecting patient information stored on backup tapes and that SAIC failed to properly notify patients within the timeframe required by law.

  In September 2011, backup tapes with unencrypted patient data were stolen when left in an SAIC employee’s personal vehicle parked in an unattended public garage. SAIC has already had six prior security breaches concerning sensitive private information—one being a similar security breach in which computer backup tapes were stolen. Patients only learned of the security breach two months after the release of information, when notices were belatedly sent by SAIC in November 2011.

  The backup tapes contained electronic healthcare records used in the military health system to capture patient data from 1992 through September 7, 2011. The stolen data includes personal health information consisting of patient information for filling pharmacy prescriptions, laboratory workups, Social Security numbers, addresses, telephone numbers, and some personal health data, such as clinical notes, laboratory tests, prescriptions, and other health information.

- A new smartphone app has been released for iPhone and Android devices, which provides wounded service members with a comprehensive mobile resource guide.

  Based on “The Wounded, Ill and Injured Compensation and Benefits Handbook” that was released November by the Department of Defense (DoD), the free app gives wounded and ill service members and their families access to vital information on the go.

  The app was designed and developed for the DoD through the Combined Arms Support Command Technology Integration Branch’s SCoE mobile team.

  The electronic version of the compensation and benefits handbook includes details seriously ill and injured soldiers and their families may need during recovery, rehabilitation and reintegration, including recovery coordination, medical care, DoD pay and allowances during recovery and Veterans Affairs benefits.

  The app also lists toll-free numbers for TRICARE regional contractors, behavioral healthcare providers and other Tricare programs.

  The handbook and app were compiled in cooperation with the DoD, departments of Veterans Affairs, Labor, Health and Human Services, and Education and the Social Security Administration.

  The app can be downloaded for free on the Android Market and iTunes Store.
Warrior Resiliency Conference IV was held in Washington, D.C. on March 29.

This year’s conference, sponsored by the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE), was attended by members of both military medical and non-medical communities, the conversation revolved around building total force fitness.

Dr. Jonathan Woodson, assistant secretary of defense for health affairs and Navy Capt. Paul Hammer, director of DCoE opened the conference by emphasizing the importance of resilience for the military community as a whole.

Several speakers at the conference stressed that Total Force Fitness and troop readiness is more than a medical issue and that every member of the military, especially leaders, are charged with the care and support of the rest of the community. In response to this need, the conference featured a panel of the senior enlisted leadership of each service branch.

A common theme was the changing nature of the nation’s defense networks and the need to build synergy across the services, medically and otherwise. And, each panelist reaffirmed the commitment to care for service members and their families, “from cradle to grave.”

VETERANS AFFAIRS NEWS

- African American veterans with hard-to-control diabetes made significant gains in keeping their blood sugar under control after working with “mentors” with similar health problems, according to a recent study by the Department of Veterans Affairs.

Results of the study by the Philadelphia Veterans Affairs Center appear in the March 20 Annals of Internal Medicine. About one in five veterans who receives care from VA has diabetes. The study included 118 African American veterans, all of whom were having trouble controlling their diabetes.

Because the study lasted only six months and the study population of 118 people was relatively small, the authors say further research is needed. The new results confirm past studies in which mentoring helped patients with diabetes—particularly minorities—improve their medication adherence, diet, exercise, blood glucose monitoring, and glucose control.

The study was conducted by researchers with VA’s Center for Health Equity Research and Promotion, based in Philadelphia and Pittsburgh, along with colleagues from the University of Pennsylvania and Carnegie Mellon University. Funding was provided by VA and the National Institute on Aging.

For more information on VA research, visit www.research.va.gov.

- The Department of Veterans Affairs (VA) received a second- and third-place ranking in the annual Human Capital Management for Defense Awards.

  - VA’s Veteran Employment Services Office (VESO), which operates the VA for Vets platform to help Veterans with their job searches, received second and third place for being a finalist in two categories. Only four months after it was
established, VA for Vets was recognized as the “Most Innovative Recruitment Program” for attracting top talent and demonstrating improvements in the hiring process; and for “Best Implementation of an Enterprise Technology System” aimed at streamlining a personnel process to drive down costs and improve efficiency and productivity.

- VA’s Learning University (VALU), which operates a wide range of training and development courses for employees, was also recognized as finalists in two categories: “Best Leadership Development Program,” focused on training and preparing future leaders; and the Deloitte Public Sector Innovation Award for the 21st Century for innovative yet practical approaches to transforming the way government delivers services and prepares for future challenges.

Both VESO and VALU are within the Office of Human Resources and Administration (HRA). “VESO and VALU are great examples of VA’s investment into the transformation of human capital,” said Assistant Secretary for HRA, John U. Sepúlveda.

The Awards were established six years ago to honor and promote successful human capital initiatives implemented throughout the federal government.

GENERAL HEALTH CARE NEWS

- The Department of Health and Human Services (HHS) announced the winners of a contest to find innovative technology applications to help solve tough health IT problems on March 25, 2012.

- Overall, the U.S. population has good levels of vitamins A and D and folate in the body, but some groups still need to increase their levels of vitamin D and iron, according to the Second National Report on Biochemical Indicators of Diet and Nutrition.

The report, released by the Centers for Disease Control and Prevention, offers a limited but generally favorable review of the nation’s nutrition status although the findings do not necessarily indicate that people consume healthy and balanced diets.

CDC’s Division of Laboratory Sciences in the National Center for Environmental Health measured these indicators in blood and urine samples collected from participants in CDC’s National Health and Nutrition Examination Survey. Data are presented for the years 1999-2006, with emphasis on newly available data for 2003-2006.

The report also found that deficiency rates for vitamins and nutrients vary by age, gender, or race/ethnicity and can be as high as 31 percent for vitamin D deficiency in non-Hispanic blacks.

CDC’s Second Nutrition Report establishes blood and urine reference levels for 58 biochemical indicators; more than twice as many indicators as its first report, published in 2008. The report includes first-time data for a new indicator of iron deficiency and for 24 healthy and unhealthy fatty acids.

- The report found that the fortification of cereal-grain products with folic acid, which began in 1998, has had a sustained positive impact on blood folate levels. The report shows folate deficiency dropped to less than one percent after fortification. The report also shows that blood folate levels in all race/ethnic groups are 50 percent higher since fortification began.

- The report found the highest rates of vitamin D deficiency in non-Hispanic blacks (31 percent) despite clinical data showing greater bone density and fewer fractures in this group. Further research is needed to explain why non-Hispanic
blacks have better bone health but yet have a higher rate of vitamin D deficiency.

- Findings were not as encouraging with regard to the iodine status in young women (20-39 years of age). This age group had iodine levels that were just above iodine insufficiency. Young women also had the lowest iodine levels among any age group of women. Iodine is an essential component of thyroid hormones that regulate human growth and development. Iodine is especially important in women during childbearing years to ensure the best possible brain development of the fetus during pregnancy.

- Using a new marker of iron status, the report indicates higher rates of iron deficiency in Mexican-American children aged 1 to 5 years (11 percent) and in non-Hispanic black (16 percent) and Mexican-American women (13 percent) of childbearing age (12 to 49 years) when compared to other race/ethnic groups.

- The report provides first-time data on blood levels of fatty acids in the U.S. population. These include heart healthy polyunsaturated fatty acids as well as saturated fatty acids that increase risk of heart disease. The report found heart healthy polyunsaturated fatty acid levels in plasma differ by race/ethnicity. These first time measurements provide a baseline that will allow CDC to track fatty acid levels over time, which will evaluate our nation’s progress toward heart healthy diets.

CDC’s report is a detailed biochemical assessment of the nutrition status of the U.S. population. It is the second in a series of publications that provide an ongoing assessment of the U.S. population’s nutrition status.

For more information on the nutrition report, visit http://www.cdc.gov/nutritionreport/.

- The Department of Health and Human Services awarded 10 states grants to provide early childhood supports and home visits to families.

These awards are part of the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) created by the Affordable Care Act. The nearly $72 million in funding announced today will allow states to expand or establish their home visiting program.

The awards include states that have demonstrated a commitment to operating successful early childhood systems for pregnant women, parents, caregivers and children from birth-to-eight years of age. The awards also include states that are developing new home visiting programs, using proven strategies, to support families and improve health and developmental outcomes.

HHS’ Administration for Children and Families (ACF) collaborates with HRSA on the implementation of the home visiting program. The two agencies provide states guidance and assistance in early learning and development, the prevention and identification of child maltreatment, the improvement of maternal and child health outcomes, and family engagement.


- The Centers for Medicare & Medicaid Services (CMS) issued final regulations for Medicare Advantage (MA) and prescription drug benefit (Part D) programs to improve benefits and the quality of care for seniors and people with disabilities enrolled in these programs.

CMS announced the estimated growth rate for 2013 and other policies for its
participating health and drug plans for Payment Year 2013. The Rate Announcement and Final Call Letter are combined into a single guidance document and establish updates to payment methodologies, other policies, and program operations for Part C organizations and Part D sponsors. The policies will become effective Jan. 1, 2013, as required by law.

Highlights of the 2013 Rate Announcement and Final Call Letter include:

- An estimated annual growth rate of 3.07 percent, which will sustain a stable MA landscape for next year (2013);
- 2013 Part D Benefit Parameters, including improved coverage in the coverage gap;
- Guidance on limiting year-over-year cost increases for MA beneficiaries;
- New guidance to strengthen controls against prescription drug abuse.

The drug and health plan program updates, effective Jan. 1, 2013, will help continue the trend of lower premiums and stable or improved benefits that beneficiaries in these programs have experienced over the last two years.

For information on today’s final rule, please go to:

- Three studies published in the journal Nature analyzed the exomes of parents and children with autism and found spontaneous genetic mutations in the exome play a significant role in raising a child’s risk of developing autism.

One study looked at 238 families with one child with autism and one child without autism. "We found ... several sequence changes [mutations] in the base pairs of DNA that are not seen in a parent," says study co-author Dr. Daniel Geschwind, professor of neurology and psychiatry at UCLA School of Medicine. "These mutations are not inherited, but either occur in the mother's egg or father's sperm (before conception) or in the child itself (after conception)."

This new research suggests a child with these mutations "has a much higher chance" of developing a disorder like autism. This research team, led by Dr. Matthew State of Yale University, found at least 14 percent of those with autism had multiple genetic mutations, which is five times the normal rate, according to the NIH.

Another research team headed by Evan Eichler, a professor of genome studies at the University of Washington, found 39 percent of spontaneous mutations were likely to increase the risk of autism because they interfere with biological developments that are important for communication in the brain.

Eichler's research also found these spontaneous mutations were "overwhelmingly paternal in origin," suggesting the origin of these mutations are in a father's sperm. This supports previous research that suggested there’s an increased risk of a child developing autism if the father is older.

The third study in Nature, led by Mark Daly, associate professor at Harvard Medical School, found many mutations seen in children with autism are not necessarily connected to the disorder. His research found that the mutations that are linked to autism are spread over many genes, and so may not be enough to cause the disorder.

In addition to these three studies, an independent study published in Science Translational Medicine, found a non-protein-producing gene can also contribute to the risk of autism.

Looking at this research collectively further supports the notion that autism is a
neurodevelopmental disorder, and that the disruptions in development that lead to autism are laid down very early in brain formation, says Dr. Bryan King, director of the Seattle Children's Autism Center.

Much more research is needed, but ultimately identifying more genetic mutations could pinpoint targets for researchers to focus on to find ways to counteract the developmental disabilities they can cause. Or maybe, in the future, this research could lead to diagnostic tests that could identify children who are at risk for autism so they can get the earliest possible interventions.

### GUARD/RESERVE

- As of April 3, 2012, the total number of Guard and Reserve currently on active duty has decreased by 117 to 71,545. The totals for each service are Army National Guard and 52,095; Navy Reserve, 4,668; Air National Guard and Air Force Reserve, 9,895; Marine Corps Reserve, 4,651, and the Coast Guard Reserve, 800. [www.defenselink.mil](http://www.defenselink.mil).

### REPORTS/POLICIES

- **The GAO published** “*Medicare Secondary Payer: Additional Steps Are Needed to Improve Program Effectiveness for Non-Group Health Plans,*” (GAO-12-333) **on April 5, 2012.** This report examines how the initial implementation of mandatory reporting for NGHPs has affected the workload of and payments to MSP contractors, and Medicare savings, and key challenges within the process for MSP situations involving NGHPs and the steps CMS is taking to address those challenges. [http://www.gao.gov/assets/590/589158.pdf](http://www.gao.gov/assets/590/589158.pdf)

- **The Institute of Medicine published** “*Ensuring Safe Foods and Medical Products Through Stronger Regulatory Systems Abroad,*” **on April 4, 2012.** This report recommends 13 steps that the U.S. Food and Drug Administration and other organizations can take over the next three to five years to bolster the food and drug safety systems in developing nations. [http://www.iom.edu/Reports/2012/Ensuring-Safe-Foods-and-Medical-Products-Through-Stronger-Regulatory-Systems-Abroad.aspx](http://www.iom.edu/Reports/2012/Ensuring-Safe-Foods-and-Medical-Products-Through-Stronger-Regulatory-Systems-Abroad.aspx)


### HILL HEARINGS

- The House Veterans Affairs Subcommittee on Health will be held on **April 5, 2012,** in Modesto, Calif. to examine vet centers and the Veterans Health Administration’s opportunities and challenges.

- The House Veterans Affairs Subcommittee on Health will hold a legislative hearing on **April 16, 2012,** on H.R. 1460, H.R. 3016, H.R. 3245, H.R. 3279, H.R. 3337, H.R.
The Senate Armed Services Subcommittee on Personnel will hold a hearing on April 25, 2012, to examine the Active, Guard, Reserve, and civilian personnel programs in review of the Defense Authorization request for fiscal year 2013 and the Future Years Defense Program.

LEGISLATION

  Sponsor: Representative Howard P. "Buck" McKeon [CA-25]
- **H.R.4315** (introduced March 29, 2012): To amend title 38, United States Code, to provide for unlimited eligibility for health care for mental illnesses for veterans of combat service during certain periods of hostilities and war referred to the House Committee on Veterans' Affairs.
  Sponsor: Representative Russ Carnahan [MO-3]
- **H.R.4324** (introduced March 29, 2012): To amend the Internal Revenue Code of 1986 to expand the credit for employee health insurance expenses of small employers was referred to the House Committee on Ways and Means.
  Sponsor: Representative Ron Kind [WI-3]
- **H.R.4341** (introduced March 29, 2012): To direct the Secretary of Defense to establish a working group to review TRICARE policy with respect to providing health care to children and determine how to improve such policy, and for other purposes was referred to the House Committee on Armed Services.
  Sponsor: Representative Steve Stivers [OH-15]
- **S.2256** (introduced March 29, 2012): Community-Based Mental Health Infrastructure Improvements Act was referred to the Committee on Health, Education, Labor, and Pensions.
  Sponsor: Senator Jack Reed [RI]
- **S.2257** (introduced March 29, 2012): Excellence in Mental Health Act was referred to the Committee on Health, Education, Labor, and Pensions
  Sponsor: Senator Debbie Stabenow [MI].
- **S.2262** (introduced March 29, 2012): Advancing FASD Research, Prevention, and Services Act was referred to the Committee on Health, Education, Labor, and Pensions
  Sponsor: Senator Tim Johnson [SD]
- **S.2281** (introduced March 29, 2012): Expanding and Promoting Expertise in Rare Treatments Act of 2012 was referred to the Committee on Health, Education, Labor, and Pensions.
  Sponsor: Senator Sheldon Whitehouse [RI]

MEETINGS

- Freedom & Recovery—Integrated Mental Health and Addiction Treatment for Veterans
will be held **April 23-26, 2012**, in San Diego, Calif. 

- The 7th Annual Amygdala, Stress and PTSD Conference will be held on **April 24, 2012**, in Bethesda Md. [http://www.amygdalaconference.org/](http://www.amygdalaconference.org/)

- The Conference on Vaccine Research will be held on **May 7–9, 2012**, in Baltimore, Md. [http://immunize.us1.list-manage2.com/track/click?u=69948816469e0f4801f8647ee&id=20e0c08ef8&e=8a0b0385de](http://immunize.us1.list-manage2.com/track/click?u=69948816469e0f4801f8647ee&id=20e0c08ef8&e=8a0b0385de)

- The Weight of the Nation, Moving Forward, Reversing the Trend Conference will be held on **May 7-9, 2012**, in Washington DC [http://www.cdc.gov/won/](http://www.cdc.gov/won/)


- The 28th Annual Meeting of the International Society for Traumatic Stress Studies (ISTSS) will be held **Nov.1-3, 2012**, in Los Angeles, Calif. [http://www.istss.org/Home.htm](http://www.istss.org/Home.htm)

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If you need further information on any of the items in the Federal Health Update, please contact Kate Theroux at (703) 447-3257 or by e-mail at dhkat@aol.com.