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 Senate is in recess until June 4, 2012.

  
  Key personnel provisions include establishing a commission to review military pay and benefits, including the retirement benefit; and blocking a controversial proposal by the DoD to establish enrollment fees for TRICARE Standard and TRICARE for Life, or to increase TRICARE deductibles or the annual catastrophic cap.

- The House Veterans Affairs Subcommittee on Oversight & Investigations held a hearing to review the VA’s purchasing of prosthetics and related equipment.
  
  During the hearing Assistant Deputy Under Secretary for Health for Administrative Operations, Philip Matkovsky testified that the VA is shifting responsibility for ordering some prosthetics, including artificial limbs, from medical personnel to contracting staff. It’s also requiring more documentation on the spending. The changes are designed to reduce prosthetic costs, which have jumped 80 percent in the past four years, according to the VA inspector general.
The Department of Defense and developer Northrop Grumman Information Systems have agreed to provide a version of the military’s Electronic Health Record software to the Open Source Electronic Health Record Agent (OSEHRA), a nonprofit organization established to support advancements in EHR and health care information technology.

Known as Open AHLTA, the software is similar to that used for troops on the battlefield and will be available on the OSEHRA website for free download and use.

The release of Open AHLTA follows the recent release of the Department of Veterans Affairs’ VistA software into the open-source environment, where it is also available for download through OSEHRA.

Open AHLTA, similar to AHLTA-Theater, can run on a laptop or a server. AHLTA is the DoD EHR, used in military hospitals and treatment facilities, and currently supports more than 9.7 million U.S. Service members, retirees, family members and other dependents. AHLTA-Theater is fully compatible with AHLTA, is deployable, has a similar look and feel, and retains much of the same functionality as the main system.

According to the agreement, Open AHLTA will be available via the Apache 2.0 open-source license. Users will be able to download and use the code and developers will be able to review and modify the program for their own needs. Open AHLTA, which can run on a smaller platform, is a perfect complement to VA’s VistA release, which can support a larger hospital or hospital system.

Adding Open AHLTA to the open-source EHR offerings is expected to have a positive effect on spurring continued innovation, while also enabling others to benefit from the government’s investment in IT solutions.

The Department of Veterans Affairs and Department of Defense (DoD) Post-traumatic Stress Disorder (PTSD) coach mobile application marked its first anniversary, winning an award for innovation in the advancement of telemedicine from the American Telemedicine Association.

PTSD coach, collaboratively developed by VA’s National Center for PTSD and DoD’s National Center for Telehealth & Technology, provides education, symptoms-tracking tools, self-assessment and connections to support individuals with PTSD. Since its public release on April 11, 2011, the app has been downloaded more than 53,000 times in over 60 countries. It is available for free download for both iPhone and Android devices.

The ATA Innovation Award is presented for ideas that “save and improve countless lives, whether their patients are young children, Soldiers on the battlefield, returning veterans or the average American health care consumer,” said ATA President Bernard Harris, Jr., MD, MBA.

For more information on the PTSD Coach app, visit the VA’s National Center for PTSD Website: [http://www ptsd va gov/public/pages/PTSD Coach asp](http://www.ptsd.va.gov/public/pages/PTSDCoach.asp).

TRICARE Management Activity (TMA) has awarded LongView International Technology Solutions a prime contract to develop new information technology systems for the Military Health System’s Pacific Joint Information Technology Center (JITC) on Maui.
The five-year, multi-award, indefinite-delivery/indefinite-quantity (ID/IQ) contract has a total ceiling value of $300 million.

The Pacific Joint Information Technology Center, based in Kihei, Hawaii, supports the Defense Department's medical readiness requirements and IT modernization needs through rapid prototyping and advanced concept development.

Other companies that were awarded the indefinite-delivery/indefinite-quantity contract for this program include: Ke'aki Technologies, Smartronix, Northrop Grumman Systems Corp., Eleu Pacific Partners, Akimeka and ASM Research.

- **The Department of Defense recently released a mobile application to help service members reacclimate to life at home after returning from combat.**

  **Positive Activity Jackpot**, developed by the National Center for Telehealth and Technology, uses augmented reality with a smart phone’s GPS to help find nearby activities and diversions for someone accustomed to the high tempo of combat life.

  The center used a behavioral therapy called pleasant event scheduling as the basis for design of the application. The therapy encourages a daily schedule of enjoyable activities to improve moods and overcome depression.

  The application, available for Android systems, has an extensive list of pre-programmed activities. Users select their activities and friends to accompany them from the phone’s contacts. Users can also let the application randomly choose an activity and friends by “pulling the lever” from the application’s slot-machine screen.

  While pleasant event scheduling is commonly used in behavior therapy, Stewart said the app can be used by anyone, but should not be used as a substitute for professional treatment.

  The National Center for Telehealth and Technology, located at Joint Base Lewis-McChord, WA, serves as the primary Department of Defense office for cutting-edge approaches in applying technology to psychological health.

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**VETERANS AFFAIRS NEWS**

- **The Department of Veterans Affairs and the American Heart Association have partnered to raise awareness of heart disease and strokes among women veterans and service members, and wives of veterans and military members.**

  VA and the American Heart Association's “Go Red For Women” are working together to raise awareness among America's female veterans of heart disease – the number one killer of women. The two organizations share a common priority to reach women with important information about heart

  VA will focus on educating women veterans about their risks for cardiovascular disease through the use of “Go Red For Women” online resources. These include “Go Red BetterU,” a free online nutrition and fitness program and “Go Red Heart Match,” a database that allows women to connect with others who share similar experiences. VA and “Go Red For Women” hope to increase consumers’ sensitivity to issues that military women face, especially as it pertains to putting their health first.

  For more information, call the VA at 1-800-827-1000 or visit: [www.womenshealth.va.gov](http://www.womenshealth.va.gov), or call 1-888-MY-HEART (1-888-694-3278) or visit GoRedForWomen.org ([http://www.goredforwomen.org](http://www.goredforwomen.org)).
The Department of Veterans Affairs (VA) is conducting its third study of Gulf War-era veterans as a part of a long-term study of their health.

For the “Follow-up Study of a National Cohort of Gulf War and Gulf Era Veterans,” researchers want to learn about how the health of these veterans has changed over time, and about the natural history of long-term conditions like unexplained multisymptom illnesses. Researchers will begin contacting participants at the end of May 2012. Veterans were previously contacted for a baseline survey in 1995 and a follow-up survey in 2005.

This continuing VA effort studies a group of approximately 15,000 Gulf War veterans and 15,000 veterans who served elsewhere during the Gulf War. The study group includes all branches of service, representing active, Reserve, and National Guard members. Women are being oversampled to make sure they are represented, making up 20 percent of the study sample. Veterans will respond via a paper or online survey, and researchers will also review medical records from a sample of study participants.

Veterans will be asked about health issues that affect them, including chronic medical conditions such as cancer, neurological, respiratory and immunological conditions, as well as general health perceptions, functional status, chronic fatigue syndrome-like illness, unexplained multi-symptom illness and women’s health. Veterans will be queried about their level of physical activity and their use of alcohol and tobacco. They also will be asked about their use of VA health care and satisfaction with their care.

More than a dozen scientific articles have been published from the two earlier surveys in the study. This work has investigated multi-symptom illnesses, chronic diseases, and environmental exposures associated with military deployment. These findings, other ongoing studies, and future research efforts will help VA to better understand the health consequences of deployment and guide care delivery.

VA is funding the new study by a team from the Post-Deployment Health Epidemiology Program, Office of Public Health. VA is working towards improving care, services, and benefits for Veterans of all eras. Additional information about this study can be found at http://www.publichealth.va.gov/epidemiology/studies/gulf-war-follow-up.asp

The Dept. of Veterans Affairs is launching an initiative aimed at studying the benefits of using mobile technology to coordinate care among physicians, veterans and their caregivers.

The “Clinic-in-Hand” pilot program as part of the mobile health initiative. One thousand family caregivers of veterans will be given Apple iPads loaded with apps to help them provide care and communicate with the veterans’ physicians. The caregivers will test the usability and utility of VA-developed mobile apps.

The iPads and their loaded apps are “designed to increase the convenience of health care management and strengthen communication among veterans, family caregivers and clinicians. The technology will include secure, two-way exchange of health data among all three parties as well as health care management tools to facilitate administrative needs and patient education.

Apps developed as part of the pilot program, as well as additional apps that are not part of it, will be made available at the VA’s app store for download on any smartphone or tablet. Apps also will be developed and launched during a phase of the program that will give physicians mobile access to some of the same functions available to them on the VA’s electronic health record system.
The VA awarded a 12-month, $350,000 contract to District Communications Group, a veterans-owned communications consulting firm based in Washington, to carry out the mobile health initiative.

**GENERAL HEALTH CARE NEWS**

- Genetics can help determine whether a person is likely to quit smoking on his or her own or need medication to improve the chances of success, according to research published in *American Journal of Psychiatry*.

  Researchers say the study moves health care providers a step closer to one day providing more individualized treatment plans to help patients quit smoking.

  The study, supported by the National Institutes of Health, focused on specific variations in a cluster of nicotinic receptor genes, CHRNA5-CHRNA3-CHRNB4, which prior studies have shown contribute to nicotine dependence and heavy smoking.

  Using data obtained from a previous study supported by the National Heart Lung and Blood Institute, researchers showed that individuals carrying the high-risk form of this gene cluster reported a two-year delay in the median quit age compared to those with the low-risk genes. This delay was attributable to a pattern of heavier smoking among those with the high risk gene cluster.

  Researchers then conducted a clinical trial, which confirmed that persons with the high-risk genes were more likely to fail in their quit attempts compared to those with the low-risk genes when treated with placebo. However, the study revealed that medications approved for nicotine cessation (such as nicotine replacement therapies or bupropion) increased the likelihood of abstinence in the high risk groups. Those with the highest risk had a three-fold increase in their odds of being abstinent at the end of active treatment compared to placebo, indicating that these medications may be particularly beneficial for this population.

- The Department of Health and Human Services (HHS) announced $25 million in funding to help states strengthen and expand their ability to help seniors and people with disabilities access home and community-based long-term services and supports.

  Each year, more seniors, people with disabilities and their families are confronted with often challenging decisions about how to obtain the long-term services and supports they need. Choices range from care in their home to care in a nursing home; social supports for daily living to home health care; transportation to physical therapy to name a few. ADRCs will make it easier for people to learn about and access the services that are available in their communities and best meet their needs.

  The initiative, known as the Aging and Disability Resource Center Program, is established through a partnership between the Administration for Community Living (ACL), the Centers for Medicare & Medicaid Services (CMS), and the Department of Veterans Affairs’ Veterans Health Administration (VHA).

  The VA will make an additional $27 million available over three years in ADRC-funded states through the VA Medical Centers. This funding will increase access to home and community-based services for veterans through ADRC programs.

  The ADRC Program will help state agencies administer and better coordinate state and federal long-term service and support programs for older adults, people with disabilities, and veterans with disabilities. Approximately eight states will be competitively selected to
accelerate the development over a three-year period of the creation of single entry point models, which provides one-on-one options counseling to streamline the intake and eligibility determination processes for consumers accessing long-term service and support programs.

GUARD/RESERVE

- As of May 29, 2012, the total number of Guard and Reserve currently on active duty has decreased by 707 to 67,487. The totals for each service are Army National Guard and Army Reserve, 778; Navy Reserve, 4,386; Air National Guard and Air Force Reserve, 9,950; Marine Corps Reserve, 4,545, and the Coast Guard Reserve, 828. [www.defenselink.mil](http://www.defenselink.mil)

REPORTS/POLICIES


- The GAO published “VA Administrative Investigations: Improvements Needed in Collecting and Sharing Information,” (GAO-12-483) on May 30, 2012. In this report, GAO examines the process VA uses to convene and conduct administrative investigation boards (AIB) investigations, the extent to which VA collects data on AIB investigations and how VA has used the results of its AIB investigations. [http://www.gao.gov/assets/600/590546.pdf](http://www.gao.gov/assets/600/590546.pdf)

HILL HEARINGS

- The House Veterans' Affairs Subcommittee on Disability Assistance and Memorial Affairs will hold a hearing on June 6, 2012, to discuss pending legislation.

- The Senate Veterans' Affairs Committee will hold a hearing on June 13, 2012, to examine economic opportunity and transition legislation.

- The Senate Veterans' Affairs Committee will hold a hearing on June 27, 2012, to examine health and benefits legislation.

LEGISLATION
- **H.R.5856** (introduced May 25, 2012): the Department of Defense Appropriations Act, 2013 was placed on the Union Calendar. Sponsor: Representative C.W. Bill Young [FL-10]

- **H.R.5858** (introduced May 25, 2012): To amend the Internal Revenue Code of 1986 to improve health savings accounts, and for other purposes was referred to the House Committee on Ways and Means. Sponsor: Representative Wally Herger [CA-2]

### MEETINGS


- 2012 American College of Oncology Administrators (ACOA) Oncology Update will be held on **June 20 - 22, 2012**, in Chicago, Ill. [http://www.aameda.org/Conference/ACOA/ACOAMain.html](http://www.aameda.org/Conference/ACOA/ACOAMain.html)


- CFHA’s 14th Annual Conference: will be held on **Oct. 4-6, 2012**, in Austin, Texas [http://www.cfha.net/?page=2012Austin](http://www.cfha.net/?page=2012Austin)

- 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)


- The 118th AMSUS Annual Continuing Education Meeting will be held **Nov. 11-15, 2012**, in Phoenix, Ariz. [http://amsusmeeting.org](http://amsusmeeting.org)

- 2012 American Academy of Medical Administrators (AAMA) Annual Conference will be held on **Nov. 13 - 16, 2012**, San Antonio, Texas [http://www.aameda.org/Conference/Annual/AnnualMain.html](http://www.aameda.org/Conference/Annual/AnnualMain.html)

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