



Policy Brief

January 11, 2019



Successful Lame Duck Legislation

Several health care bills were passed during last year's Lame Duck Session. Unfortunately, the [ACE Kids Act](#), which would improve how care is delivered to children with medically complex conditions was not among them. Continue reading for a list of health care legislation that became law at the end of 2018.

SOAR to Health and Wellness Act

This [law](#) authorizes a pilot program to address human trafficking in the health care system. It also provides grants to train providers to: (1) Identify potential human trafficking victims; (2) Implement best practices for working with law enforcement and referring victims to health care and other agencies; (3) Provide care that is coordinated, patient centered and evidence-based.

State Offices of Rural Health Reauthorization Act

The [law](#) authorizes grants for state rural health offices to use towards the improvement of health care in rural areas through 2022. It removes a provision that restricts research funds to 10% of the overall grant.

Preventing Maternal Deaths Act

The [law](#) authorizes \$58 million annually through 2023 for data collection, surveillance, research and prevention activities related to maternal mortality. It also enables states to establish maternal mortality review committees.

PREEMIE Reauthorization Act

The [law](#) reauthorizes the Prematurity Research Expansion and Education for Mothers who deliver Infants Early Act through 2023. It also extends the Centers for Disease Control and Prevention's (CDC) authority to study factors relating to prematurity.

Improving Access to Maternity Care Act

The [law](#) amends the Public Health Service Act to deploy maternity care health professionals to target locations that are identified as areas of medical professional shortage.

Action for Dental Health Act

The [law](#) authorizes \$13.9 million annually through 2023 to expand oral health programs for low-income and other underserved individuals.

SUPPORT for Patients and Communities Act

The [law](#) modifies federal programs and policies to help combat the opioid crisis. From fiscal years 2019 to 2023, the law will allow states to provide substance use treatment at an Institution for Mental Diseases (IMD) with the federal government funding only up to 30 days of inpatient care annually per beneficiary. It also introduces new requirements on the Postal Service intended to curb illicit fentanyl shipments.



Health Implications of the Government Shutdown

The new year has arrived, but the federal government is still resolving the partial shutdown of 2018. While several health entities like the Department of Health and Human Services (HHS) and the VA are fully funded, [nine departments](#) currently lack funding. Thanks to complicated funding streams, a handful of public health operations have lapsed. READ BELOW to find out how the shutdown hinders health programs.

Each of the nine departments affected are running on shutdown contingency plans. These plans place most employees on [furlough](#) and require others to work without pay. The Food and Drug Administration

(FDA) technically falls under the HHS umbrella. However, funding for a portion of the FDA that is responsible for food recalls and routine facility inspections comes from the U.S. Department of Agriculture (USDA), which is unfunded due to the shutdown. This means that the routine inspections that the FDA performs on the nation's food supply are not taking place. There is widespread concern regarding the [distribution of SNAP benefits](#) for the month of February. However, the USDA [vowed](#) to work with states to load benefits onto recipients cards by January 20th with or without a budget.

Health services for Native Americans are also on hold as funding for the Indian Health Services (IHS) falls under the Department of the Interior. IHS has been forced to suspend support for tribal health programs, as well as preventive health clinics. The Department of Homeland Security is also affected by the shutdown. Their Office of Health Affairs assesses threats posed by infectious diseases, pandemics and biological and chemical attacks. The Environmental Protection Agency (EPA) has also run out of funding, which has inhibited activities such as water inspections and the regulation of pesticides.



Fact Check: What the Latest ACA Ruling Really Means

A Texas district court [recently ruled](#) the entirety of the Affordable Care Act to be unconstitutional, raising alarms for supporters of the law. The ruling, if allowed to stand, would disrupt the health care system and jeopardize coverage for millions of Americans. While the ruling is worrying, it is *not* the end of the ACA. [READ MORE](#) about the status and next steps for the ACA.

ACA opponents still have a long road to ending the law.

Some legal experts predict that the legality of the ACA will be affirmed when it heads to the Fifth Circuit Court of Appeals and [others believe](#) it will ascend to the Supreme Court. In the meantime, stay calm—the Texas ruling has been put on hold. ACA coverage, subsidies and protections are still in effect.

It's still “business as usual” on the Health Insurance Exchanges.

Despite the ruling, both [Alex Azar](#) and [Seema Verma](#) continued to encourage individuals to sign up on the Health Insurance Exchanges. Although enrollment does [lag](#) behind previous years, over 8.7 million people have gotten coverage for the 2019 plan year.

Bipartisan support remains for many of the ACA’s pivotal components.

There are many provisions of the ACA that have bipartisan support. Maintaining protections for individuals with pre-existing conditions, as well as promoting value-based care, are examples of this and unlikely to be rolled back. Both CMS and the President himself have stated that they are developing contingency plans to maintain protections should the ACA fall.



340B Cuts Reversed



A Look at the Federal Register

Medicare Program: Accrediting Organizations Conflict of Interest and Consulting Services.

CMS issued a [request for information](#) regarding the appropriateness of Medicare-approved Accrediting Organizations (AOs) that provide fee-based consultative services for Medicare-participating providers. CMS wishes to determine whether AO’s consultation services present an actual or perceived conflict of interest. The information received will assist future rulemaking. **Comments are due February 19th.**

Medicare Shared Savings Program (MSSP): Accountable Care Organizations (ACOs)-Pathways to Success and Extreme and Uncontrollable Circumstances Policies for Performance Year 2017. CMS

released a [final rule](#) that changes the MSSP and restructures ACO payment models. The rule creates two tracks (BASIC and ENHANCED) for participants. It allows ACOs to participate in upside-only risk for a maximum of two or three years. The rule also reduces shared savings rates for upside-only models from 50% to 40%. For details on all the finalized changes, [click here](#). **The rule is effective February 14th.**

Medicare Program; Clinical Laboratory Improvement Amendments of 1988 (CLIA) Fees. CMS released a [notice](#) of an increase in CLIA fees to cover the cost of administering the CLIA program. The announcement outlines the methodology for determining fee amounts. The notice also shows the annual budget shortfalls since 2012. The Agency is seeking public comment on the new policy. **Comments are due March 1st.**

AHPA Resources



Modernizing Medicare Reduce Drug Prices Expenses

[Modernizing Medicare Part D Rule Summary](#)

Reducing Regulatory Burden of Health IT and EHRs

[Link to Full Strategy Document](#)

[Strategies and Recommendations Comment Table](#)

IN OTHER NEWS

[After Bristol-Myers Squibb Buys Celgene What's Next?](#) – Forbes

[As Hospitals Post Sticker Prices Online, Most Patients Will Remain Befuddled](#) – Kaiser Health News

[Podcast: What's Ahead for Health Care in 2019](#) – Politico

[Cigna and Express Scripts Seal \\$54 Billion Merger](#) – WSJ

[A \\$20,243 bike crash: Zuckerberg Hospital's Aggressive Tactics Leave Patients with Big Bills](#) – Vox

[Dems Hit GOP on Health Care with Additional ObamaCare Lawsuit Vote](#) – The Hill