



Policy Brief

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Work Requirements Gaining Steam

Despite a [lack of historical success](#), the idea of integrating work requirements into social support programs—housing, nutrition and health care—continues to gain traction as a way to promote self-sufficiency. This could lead to a loss of coverage, which would have public health consequences. Below are some recent developments promoting work requirements.

- **CMS has approved Medicaid 1115 waivers that include work requirements.** These waivers allow states to rescind coverage for adults who do not meet work and "work-related activity" requirements. [Ten states](#) are currently pursuing the waivers, which would impact approximately 1.7 million people.
- **The USDA has [proposed](#) limiting states' use of work requirement waivers in the Supplemental Nutrition Assistance Program (SNAP).** Although SNAP contains work requirements, these waivers allow exemptions for states with high unemployment rates.
- **The House of Representatives recently released a [Farm Bill](#) that expands SNAP work requirements.** The bill raises the age threshold for its work rules from 49 to 59 years old, extends the mandate to parents of minor children and enforces [three-year lockout periods](#).
- **President Trump expressed support for work requirements in social service programs.** The President's latest Executive Order gives federal agencies 90 days to review their social service programs and propose new reforms. In the Order, President Trump specifically named work requirements as a useful tool in promoting economic prosperity.



What Facebook's Congressional Hearing Can Tell Us About the Future of Health Care

Last week, Facebook CEO Mark Zuckerberg testified in Congressional hearings regarding the [Cambridge Analytica scandal](#). Questions posed by Congress reveal concerns reflective of today's health care environment. Health care apps and social media have proliferated but the current lack of regulatory guardrails could jeopardize patient security. Discussions surrounding this issue may lead to greater protections for the exchange of health data. Below are the key takeaways from the hearings.

- **Consumer privacy may be compromised by regulatory loopholes.** Current privacy laws, like the Health Insurance Portability and Accountability Act (HIPAA), only apply to entities that collect information on behalf of a provider, health plan or health care clearinghouse. This means that entities such as Facebook do not have to comply with these consumer protections. Legislators [intend to address](#) this loophole and implement greater protections for the exchange of health information.
- **Balancing consumer-centric features and security may be tough.** The infrastructure necessary to create a transparent, interconnected and convenient user experience often counter the systems essential to create a secure environment. In an era of health apps, video chats and social media networks, promoting consumer-centric health care and preserving patient privacy will be critical.
- **Social media will play an increasing role in health care.** Last month, [Facebook asked](#) various hospitals and medical groups for access to their patient data. The project, which is now on hold, would have matched hospitals' medical records with patients' Facebook profiles to help identify patients that might need additional clinical support. Other [technology giants](#), such as Google and Apple, are also considering engaging in the health care sector.



Can the New CMMI Director Transform Health Care?

Adam Boehler, the [newly appointed](#) Center for Medicare and Medicaid Innovation (CMMI) Director, brings a young and new entrepreneurial perspective into the world of value-based payments. While Boehler doesn't have any government experience, his successful career in venture capital, health startups and managing the care of chronically ill patients may help drive innovative solutions. [READ MORE](#) about this rising star who was identified by [Patrick Conway](#) and how his background aligns with the vision of CMMI as a health care disrupter.

While little is known about Boehler's views on health care, his experience echoes HHS Secretary Alex Azar and CMS Administrator Seema Verma's [desire to disrupt health care](#). As the former CEO of Landmark Health, Boehler pioneered a patient-centric model to deliver at-home care to patients with multiple chronic conditions. As an Operating Partner at Francisco Partners, he worked to increase the value of health care technology and services. Boehler also founded Accumen, the largest provider of comprehensive laboratory services to health systems. Boehler's ability to be a health care disruptor is reflected in his other top leadership positions in companies working with health care investments, analytics and venture capital.

Boehler's appointment confirms Azar and Verma's desire for CMMI to lead the [shift to value-based care](#). As noted by Seema Verma, "Adam is widely regarded as an innovative leader in the private sector and in him we are lucky to have someone who has designed and implemented new, patient-focused approaches to health care delivery."



A Look At The Federal Register

Notice of Insurance Benefit and Payment Parameters for 2019 Impacts Essential Health Benefits. The Trump Administration finalized a [rule](#) that would allow states to select the essential health benefits offered in the Health Insurance Exchanges. The Affordable Care Act (ACA) requires the coverage of 10 essential health benefits, including maternity and newborn care. Under the new rule, states can select from a larger list of benefits. That could lead to less generous coverage in some states.

Methods for Assuring Access to Covered Medicaid Services: Exemptions for States with High Managed Care. CMS has [proposed a rule](#) that would exempt states with a Medicaid population that is predominantly served through Managed Care (85% or above) from submitting an [Access Monitoring Review Plan \(AMRP\)](#). Comments on this rule are due by May 22nd. If interested in commenting, please contact us.

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