



Health Policy Briefing

September 18, 2017

House Dems Request Market Stabilization Hearing

Democrats on the House Ways and Means Committee are requesting that the panel hold a hearing on the stabilization of the health insurance exchanges. In a [letter](#) to Chairman Kevin Brady (R-Texas), the Democratic members of the Committee cite the bipartisan hearings underway in the Senate Health, Education, Labor, and Pensions (HELP) Committee as an example. “We request that the Committee on Ways and Means, especially our Subcommittee on Health, likewise hold bipartisan hearings to set the course for expeditious action to stabilize individual insurance markets and lower costs,” they write. House Republicans, however, are generally seen as less open than their Senate colleagues to a bipartisan effort to stabilize the individual health insurance market.

HELP Leadership Continues Work on Bipartisan ACA Fix

Chairman Lamar Alexander (R-Tenn.) has said that he hopes to present draft legislation to stabilize the individual exchange markets by the end of this week to Majority Leader Mitch McConnell (R-Ky.) and Minority Leader Chuck Schumer (D-N.Y.) so that they can work to schedule a vote on the measure during the last week of the month. The plan would likely fund cost-sharing reduction (CSR) payments for two years, allow people to buy catastrophic health care plans, and loosen restrictions for states seeking 1332 waivers. Sen. Rand Paul (R-Ky.) has already expressed opposition to any legislation that would provide funding to support the Affordable Care Act (ACA), though he believes that it will be possible to reach a bipartisan deal. Insurance companies have until September 27 to decide whether to participate in the exchanges next year.

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Graham/Cassidy Unveil Final Repeal/Replace Effort

Sens. Lindsey Graham (R-S.C.), Bill Cassidy (R-La.), Dean Heller (R-Nev.), and Ron Johnson (R-Wis.) unveiled their legislation to repeal and replace the Affordable Care Act (ACA) on Wednesday. The proposal would convert \$1.18 trillion in federal funding for Obamacare over the next seven years into block grants to states, while repealing the individual and employer mandates and the medical device tax. States would have the flexibility to waive some insurance regulations as a part of the block grant program, such as rules mandating coverage of essential health benefits (EHBs). Sen. Rand Paul (R-Ky.) has already come out in opposition to the Graham/Cassidy/Heller plan, arguing that it does not go far enough to repeal the 2010 health care law. While the legislation has received a strong endorsement from the White House, the chances of the measure passing before September 30 remain slim, with Republican leadership hesitant to endorse the plan and eager to move on to tax reform. Senate Finance Committee Chairman Orrin Hatch (R-Utah) believes the bill lacks strong enough support to warrant a vote on the floor. Fast-track budget reconciliation authority expires in 12 days, after which point Republicans would need a super majority of 60 votes, to pass Obamacare repeal. According to Sen. Graham, however, they are only three or four votes shy of the 51 votes required for passage, and are currently working to persuade Sens. Susan Collins (R-Maine) and Lisa Murkowski (R-Alaska), who were critical no votes in the earlier attempt to repeal Obamacare. Additionally, GOP leadership has already asked the Congressional Budget Office (CBO) to prioritize a score of the legislation which is necessary before consideration by the full Senate.

Energy and Commerce to Hold Hearing on Opioid Epidemic, New Funding Announced

Chairman of the House Energy and Commerce Committee Greg Walden (R-Ore.) announced plans to hold a full committee hearing on the opioid epidemic the week of October 23rd. This would be the first full committee hearing on the subject in the 115th Congress. During the hearing Committee members will receive an update on the implementation of the Comprehensive Addiction and Recovery Act (CARA), and will hear from agency officials on the front lines of addressing the epidemic. In related news, the U.S. Department of Health and Human Services (HHS) announced \$200 million in new grants from the Health Resources and Services Administration (HRSA) to address the current opioid abuse and addiction crisis as well as \$144 million from the Substance Abuse and Mental Health Services Administration (SAMHSA) for opioid treatment and prevention and \$8.8 million from a Patient-Centered Outcomes Research Institute (PCORI) study related to chronic pain. The HRSA awards will be directed to approximately 1,200 health centers for the purpose of expanding access to mental health and substance misuse treatment services. Secretary Tom Price also indicated that he is “working with staff” related to an official declaration of a national emergency.

Finance Reaches Deal on CHIP Funding

The Senate Finance Committee has reached a deal to extend financing for the Children’s Health Insurance Program (CHIP). The agreement would transition CHIP back to the traditional federal-state partnership over the next five years. The Affordable Care Act’s (ACA) 23 percent increase in federal funding would be maintained in 2018-2019, followed by a reduction to 11.5 percent in 2020, then zero percent in 2021 and 2022. The deal also includes increased flexibility for states to implement their CHIP programs. Ranking Member Ron Wyden (D-Ore.) has said that negotiations are still underway on how to pay for the \$8 billion deal. Current authorization for CHIP expires on September 30.

Sanders Introduces Single Payer Medicare-for-All Legislation

Sen. Bernie Sanders (I-Vt.) has formally introduced his long awaited “Medicare-for-All” legislation that would transition the nation into a single-payer health care system. The plan currently has the support of 15 Democratic senators, many of whom are expected to run in the next presidential election. The list includes Sens. Cory Booker (D-N.J.), Richard Blumenthal (D-Conn.), Kirsten Gillibrand (D-N.Y.), Kamala Harris (D-Calif.), Mazie Hirono (D-Hawaii), Jeff Merkley (D-Ore.), Brian Schatz (D-Hawaii), Tom Udall (D-N.M.), Elizabeth Warren (D-Mass.), Al Franken (D-Minn.), and Tammy Baldwin (D-Wis.). The bill would end the private insurance industry and be implemented over a period of four-years. Children younger than age 18 would be immediately and automatically eligible for coverage. The plan would be paid for through a tax increase on both individuals and employers. Senator John Barrasso (R-Wyo.) wrote the Congressional Budget Office (CBO) requesting a full cost estimate of the bill saying “it is imperative that the public understand the cost.”

CBO Releases New Analysis of ACA Exchanges

The Congressional Budget Office (CBO) expects premiums on the Affordable Care Act (ACA) exchanges to rise by 15 percent next year. CBO blames growing uncertainty about the future of Obamacare and the continuation of cost-sharing reduction (CSR) payments, in addition to diminishing competition in many areas, for the spike in premiums. The new CBO analysis estimates that enrollment, however, will increase from 10 million this year to 11 million next year. This limited growth is attributed to both premium increases and the Trump Administration’s cuts to Obamacare advertising and outreach funding.

Upcoming Congressional Hearings and Meetings

House Veterans’ Affairs Subcommittee on Oversight and Investigations Field Hearing titled “An Assessment of Leadership Failures at the Manchester, NH VA Medical Center;” 10:30 a.m. local time; New Hampshire National Guard Edward Cross Training Complex, Pembroke, NH; September 18

Senate Special Committee on Aging hearing to examine disaster preparedness and response, focusing on the special needs of older Americans; 9:00 a.m., 562 Dirksen Bldg.; September 20

House Veterans’ Affairs Subcommittee on Health Legislative Hearing on: H.R. 93; H.R. 501; H.R. 1063; H.R. 1066; H.R. 1943; H.R. 1972; H.R. 2147; H.R. 2225; H.R. 2327; and, a draft bill to make certain improvements in VA’s Health Professionals Educational Assistance Program; 10:00 a.m., 334 Cannon Bldg.; September 26

Recently Introduced Health Legislation

S.1771 (introduced by Sen. Roy Blunt): Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2018; Appropriation

S.1782 (introduced by Sen. Susan M. Collins): A bill to amend the Internal Revenue Code of 1986 to modify the definition of full-time employee for purposes of the employer mandate in the Patient Protection and Affordable Care Act; Finance

H.R.3692 (introduced by Rep. Paul Tonko): To amend the Controlled Substances Act to provide for additional flexibility with respect to medication-assisted treatment for opioid use disorders, and for other purposes; Energy and Commerce, Judiciary

H.R.3696 (introduced by Rep. Matt Cartwright): To require the Secretary of Veterans Affairs to award grants to establish, or expand upon, master’s degree programs in orthotics and prosthetics, and for other purposes; Veterans’ Affairs

H.R.3713 (introduced by Rep. Janice D. Schakowsky): To amend the Public Health Service Act to support geriatrics education and training to address the elder care workforce shortage, promote interdisciplinary team-based care, educate and engage family caregivers, and improve the quality of care delivered to older adults, and for other purposes; Energy and Commerce

H.R.3725 (introduced by Rep. Patrick J. Tiberi): To amend the Internal Revenue Code of 1986 to repeal the individual health insurance mandate; Ways and Means

H.R.3726 (introduced by Rep. Kenny Marchant): To amend title XVIII of the Social Security Act to create alternative sanctions for technical noncompliance with the Stark rule under Medicare, and for other purposes; Energy and Commerce, Ways and Means

H.R.3727 (introduced by Rep. Diane Black): To amend title XVIII of the Social Security Act to include additional telehealth services for purposes of MA organization bids, and for other purposes; Ways and Means, Energy and Commerce

H.R.3728 (introduced by Rep. Michael Burgess): To amend title VII of the Public Health Service Act to reauthorize certain programs relating to the health professions workforce, and for other purposes; Energy and Commerce

H.R.3729 (introduced by Rep. Devin Nunes): To amend titles XI and XVIII of the Social Security Act to facilitate provider and supplier cost reporting of ambulance services under the Medicare program, and for other purposes; Ways and Means, Energy and Commerce

H.R.3730 (introduced by Rep. Lee M. Zeldin): To amend title XVIII of the Social Security Act to provide for the non-application of Medicare competitive acquisition rates to complex rehabilitative manual wheelchairs and accessories; Energy and Commerce, Ways and Means

H.R.3748 (introduced by Rep. Brian Higgins): To amend title XVIII of the Social Security Act to provide for an option for individuals who are ages 50 to 64 to buy into Medicare, to provide for health insurance market stabilization, and for other purposes; Energy and Commerce, Ways and Means

H.R.3752 (introduced by Rep. Donald Norcross): To direct the Secretary of Veterans Affairs to develop and implement plans to improve the safety of medical facilities of the Department of Veterans Affairs, and for other purposes; Veterans' Affairs

H.R.3756 (introduced by Rep. Lisa Blunt Rochester): To amend title XVIII of the Social Security Act to exclude MA quality rating bonuses for certain new entrant Medicare Advantage plans from benchmark cap; Ways and Means, Energy and Commerce

H.R.3767 (introduced by Sen. Billy Long): To amend the Public Health Service Act to provide for the participation of pediatric subspecialists in the National Health Service Corps program, and for other purposes; Energy and Commerce

H.R.3770 (introduced by Rep. Elise M. Stefanik): To amend the Public Health Service Act to reauthorize and extend funding for community health centers; Energy and Commerce

H.Res.518 (introduced by Rep. Erik Paulsen): Expressing support for the designation of September 2017 as "Pulmonary Fibrosis Awareness Month"; Energy and Commerce

S.1803 (introduced by Sen. Orrin G. Hatch): A bill to improve medical research on marijuana; Judiciary

S.1804 (introduced by Sen. Bernard Sanders): A bill to establish a Medicare-for-all health insurance program; Finance

S.Res.252 (introduced by Sen. Marco Rubio): A resolution designating September 2017 as "National Spinal Cord Injury Awareness Month"; submitted, considered, and agreed to without amendment and with a preamble by Unanimous Consent.

H.R.3780 (introduced by Rep. Richard Hudson): To amend title XVIII of the Social Security Act to provide under the Medicare program for conditions of participation, reporting requirements, and a quality program with respect to air ambulance services; Energy and Commerce, Ways and Means

H.R.3782 (introduced by Rep. Matt Cartwright): To direct the Secretary of Health and Human Services to develop a national strategic action plan and program to assist health professionals in preparing for and responding to the public health effects of climate change, and for other purposes; Energy and Commerce

H.R.3789 (introduced by Rep. Cedric L. Richmond): To direct the Secretary of Health and Human Services, acting through the Director of the Centers for Disease Control and Prevention, and in consultation with the Secretary of Education and the President's Council on Fitness, Sports, and Nutrition, to conduct a study on the causes of deaths related to high school football and formulate recommendations to prevent such deaths; Energy and Commerce, Education and the Workforce

H.R.3798 (introduced by Rep. Jackie Walorski): To amend the Internal Revenue Code of 1986 to repeal the 30-hour threshold for classification as a full-time employee for purposes of the employer mandate in the Patient Protection and Affordable Care Act and replace it with 40 hours; Ways and Means

S.1807 (introduced by Sen. Edward J. Markey): A bill to direct the Secretary of Health and Human Services to develop a national strategic action plan and program to assist health professionals in preparing for and responding to the public health effects of climate change, and for other purposes; Health, Education, Labor, and Pensions