



Health Policy Briefing

August 7, 2023

Congress on Recess as September 30 Deadlines Approach

When Congress returns from recess in September, lawmakers will begin work to reconcile the differences between the two versions of the must-pass \$886 billion **National Defense Authorization Act** (NDAA) advanced by each chamber earlier this summer. The Senate-passed annual defense authorization bill ([S. 2226](#)) does not include several contentious provisions attached to the House legislation. The House-passed defense policy bill ([H.R. 2670](#)) would prohibit time off and travel allowances for service members seeking abortions. It would also block military health insurance from covering gender hormone treatments or sex reassignment surgeries for transgender individuals.

The Senate is scheduled to reconvene on September 5, and the House is scheduled to return on September 12. In addition to passing the Pentagon spending measure, Congress has a lengthy list of other expiring programs and must-pass legislation to complete before September 30, including fiscal year (FY) 2024 government funding, the **Pandemic and All-Hazards Preparedness Act** (PAHPA) reauthorization, animal drug user fee reauthorization, President’s Emergency Plan for AIDS Relief (PEPFAR) reauthorization, and funding for public health programs (community health centers, National Health Service Corps, Children’s Hospitals Graduate Medical Education, etc.).

Wyden Issues Letters on ADHD Medication Shortages

Senate Finance Committee Chairman Ron Wyden (D-Ore.) has sent a [letter](#) scolding on makers of ADHD medication to either increase manufacturing or relinquish their remaining federal quota allotment to permit other manufacturers to produce more than their allotted quota of amphetamine and amphetamine products. According to a joint statement from the Food and Drug Administration and Drug Enforcement Administration (DEA), manufacturers are on track to fall one billion doses below quota. “The following actions are urgently needed,” Wyden argues. “Companies with spare quota allotments should relinquish them to the DEA so the DEA can approve applications from companies that have requested an increase; companies with excess production capacity that have met their quota allotment should apply for an increase; and manufacturers should sufficiently report voluntary and required information on their production, so the agencies have a complete understanding of how the shortage is being resolved and potential future shortages.”

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Select Coronavirus Panel to Probe Vaccine Mandates

The House Oversight and Accountability Select Subcommittee on the Coronavirus Pandemic has [launched](#) an investigation into the development and implementation of vaccination policies and mandates. The panel plans to explore whether regulations stemming from the U.S. Department of Health and Human Services, the Department of Defense, and the Department of Labor stopped the spread and transmission of the coronavirus. According to Chairman Brad Wenstrup, DPM (R-Ohio), the panel will explore how the mandates came to be to inform congressional action in the case of a future pandemic.

Dr. Jeanne Marrazzo Named New Head of NIAID

Dr. Jeanne Marrazzo has been named the new director of the National Institute of Allergy and Infectious Diseases (NIAID). Dr. Marrazzo is currently the director of the Division of Infectious Diseases at the University of Alabama at Birmingham. She is expected to begin her role as NIAID Director in the fall. She will replace Hugh Auchincloss, Jr., M.D., who has served as acting director of NIAID after long-time director Anthony S. Fauci, M.D., stepped down in December 2022. Dr. Marrazzo's research has focused on the human microbiome, specifically as it relates to female reproductive tract infections and hormonal contraception; prevention of HIV infection using biomedical interventions; and the pathogenesis and management of bacterial vaginosis, sexually transmitted diseases in HIV-infected persons, and management of antibiotic resistance in gonorrhea. Dr. Marrazzo is a Fellow of the American College of Physicians and of the Infectious Diseases Society of America and is board certified in infectious diseases.

White House Launches New Pandemic Preparedness Office

The White House announced the launch of the Office of Pandemic Preparedness and Response (OPPR) Policy last week. It will be a permanent office in the Executive Office of the President charged with leading, coordinating, and implementing actions related to preparedness for, and response to, known and unknown biological threats or pathogens that could lead to a pandemic or to significant public health-related disruptions in the US. OPPR will take over the duties of the current COVID-19 Response Team and Mpox Team at the White House and will continue to coordinate and develop policies and priorities related to pandemic preparedness and response. Major General (ret) Paul Friedrichs has been selected as the office's inaugural director. Friedrichs previously served as Joint Staff Surgeon at the Pentagon and as medical adviser to the Department of Defense Covid-19 Task Force.

HHS Announces Formation of Long COVID Office

The U.S. Department of Health and Human Services (HHS) has launched a new Office of Long COVID Research and Practice. The office will coordinate the federal government's response to the long-term effects and associated conditions of COVID-19. The Office of Long COVID Research will be located within HHS's Office of the Assistant Secretary for Health under the leadership of the HHS Assistant Secretary for Health, Admiral Rachel Levine. The Office is charged with on-going coordination of the whole-of-government response to the longer-term effects of COVID-19, including Long COVID and associated conditions and the implementation of the National Research Action Plan on Long COVID and the Services and Supports for Longer-Term Impacts of COVID-19. Fourteen federal departments currently engage on long COVID, including over a dozen HHS Operating and Staff Divisions with the goal of reducing the impacts of long COVID by improving quality of life for people living with long COVID and reducing disparities related to long COVID.

March of Dimes Releases New Data on Maternal Care Deserts

The nation saw a 4% decline in the number of hospitals offering labor and delivery services between 2019 and 2020, according to new [data](#) from the March of Dimes. This figure captures significant disparities across the nation – with Alabama and Wyoming losing nearly 25% of their birthing hospitals during this time, and Idaho, Indiana, and West Virginia losing nearly 10%. Approximately 5.6 million women currently reside in counties with no access to maternity care, while 32 million women are at risk of poor health outcomes because of a lack of nearby maternity care options. The March of Dimes characterizes more than one-third of all U.S. counties as maternal care deserts because of their lack of access to reproductive health services. The problem is particularly acute in rural areas and states that have not expanded their Medicaid programs. The U.S. currently has the worst maternal mortality rate among developed nations. The impact of the Supreme Court’s overturning of *Roe v. Wade* on maternal health remains unclear, as the report relies on data gathered in 2020 and 2021 prior to the Supreme Court’s ruling.

Recently Introduced Health Legislation

H.R.5074 — To amend the American Taxpayer Relief Act of 2012 to delay implementation of the inclusion of oral-only ESRD-related drugs in the Medicare ESRD prospective payment system. Sponsor: Carter, Earl L. “Buddy” [Rep.-R-GA-1]; Committees: House - Energy and Commerce; Ways and Means

H.R.5076 — To clarify that, in awarding funding under title X of the Public Health Service Act, the Secretary of Health and Human Services may not discriminate against eligible States, individuals, or other entities for refusing to counsel or refer for abortions. Sponsor: Cole, Tom [Rep.-R-OK-4]; Committees: House - Energy and Commerce

H.R.5077 — To establish the National Artificial Intelligence Research Resource, and for other purposes. Sponsor: Eshoo, Anna G. [Rep.-D-CA-16]; Committees: House - Science, Space, and Technology

H.R.5080 — To amend the Internal Revenue Code of 1986 to exclude certain Nurse Corps payments from gross income. Sponsor: Fitzpatrick, Brian K. [Rep.-R-PA-1]; Committees: House - Ways and Means

H.R.5093 — To amend title XVIII of the Social Security Act to preserve sole community hospital determinations made by the Secretary of Health and Human Services, and for other purposes. Sponsor: Waltz, Michael [Rep.-R-FL-6]; Committees: House - Ways and Means

H.Res.639 — Supporting the goals and ideals of “Minority Mental Health Awareness Month” and recognizing the disproportionate impacts of mental health conditions and struggles on minority populations and communities; Sponsor: Crockett, Jasmine [Rep.-D-TX-30]; Committees: House - Energy and Commerce

H.Res.640 — Addressing the national crisis of suicide among minority adolescents; Sponsor: Espaillat, Adriano [Rep.-D-NY-13]; Committees: House - Energy and Commerce; Education and the Workforce

H.R.5116 — To amend the Public Health Service Act to extend health information technology assistance eligibility to behavioral health, mental health, and substance abuse professionals and facilities, and for other purposes; Sponsor: Matsui, Doris O. [Rep.-D-CA-7]; Committees: House - Energy and Commerce

H.R.5128 — To amend title XVIII of the Social Security Act to ensure stability in payments to home health agencies under the Medicare program; Sponsor: Sewell, Terri A. [Rep.-D-AL-7]; Committees: House - Ways and Means; Energy and Commerce