

EDITION: May 18, 2017

GOVERNMENT RELATIONS & PUBLIC POLICY

Your weekly dose of health care policy

CONGRESSIONAL

House Subcommittee Passes FDA User Fee Legislation

Earlier this afternoon, the House Energy and Commerce Health Subcommittee passed the [FDA Reauthorization Act](#) (H.R.2430). This legislation updates the U.S. Food and Drug Administration (FDA) user fee agreements related to drugs and devices, and makes changes to FDA approvals and priorities. Amendments were added during the markup related to medical devices, drug safety, and generic drug approval time. The full committee is expected to mark up the legislation next week in order to stay on track with the Senate to pass this summer.

MACRA HIGHLIGHTS

CMS will be hosting a overview webinar on the participation criteria used to determine inclusion in the Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (APMs) on Monday, May 22 at 1:00 EST. Register [here](#).

UPCOMING HEALTH CARE ACTIVITIES ON THE HILL

During the markup, the Subcommittee also passed the [Sickle Cell Disease Research, Surveillance, Prevention, and Treatment Act](#) (H.R. 2410) and the [Congenital Heart Futures Reauthorization Act](#) (H.R. 1222).

Senate Committee Passes Chronic Care Legislation

Earlier today, the Senate Finance Committee voted unanimously to pass the [Creating High-Quality Results and Outcomes Necessary to Improve Chronic \(CHRONIC\) Care Act](#) (S. 870). This [legislation](#) expands access to telehealth, provides care coordination, and updates government programs through new payment models and Medicare Advantage to address the needs of individuals with chronic conditions. The bipartisan legislation comes after over two years of work and stakeholder feedback and is fully offset by utilizing money in the Medicare Improvement Fund. The legislation will now have to be voted on by the full Senate.

ADMINISTRATION

HHS Further Delays 340B and EPM

This week, the Department of Health and Human Services (HHS) further delayed two Final Rules for programs set to change this year. First, the Health Resources and Services Administration (HRSA) is delaying the effective date of the changes to the 340B Drug Pricing Program to October 1, 2017. This rule includes changes on ceiling price and manufacturer civil monetary penalties. The effective date is extended from its previous delay through May 22, 2017.

Additionally, the Centers for Medicare and Medicaid Services (CMS) [further delayed](#) the start date of the Advancing Care Coordination Through Episode Payment Models (EPMs) and Cardiac Rehabilitation Incentive Payment Model until January 1, 2018. CMS also delayed the changes to the Comprehensive Care for Joint Replacement Model (CJR)

House Energy and Commerce Committee

5/18 at 10:30am: Health Subcommittee hearing on "[H.R. 1222, H.R. 2410 and H.R. , FDA Reauthorization Act of 2017](#)".

Senate Finance Committee

5/18 at 10:30am: [Open Executive Session to Consider The Creating High-Quality Results and Outcomes Necessary to Improve Chronic \(CHRONIC\) Care Act of 2017](#).

House Ways and Means Committee

5/18 at 2:00pm: Health Subcommittee Hearing on the "[Current Status of the Medicare Program, Payment Systems, and Extenders](#)."

House Energy and Commerce Committee

5/23 at 10:00am: Oversight and Investigations Subcommittee hearing on the "[U.S. Public Health Response to the Zika Virus: Continuing Challenges](#)".

House Appropriations Committee

5/25 at 10:00am: Subcommittee hearing on the "[Budget - Food and Drug Administration](#)".

WEEKLY FUN FACT

Of the 16 senators who have also served as President of the United

to January 1, 2018 in order to align with the other models.

CMS Releases State Waiver Checklist

On Tuesday, CMS released [resources](#) for states to seek Section 1332 waivers from requirements in the Affordable Care Act (ACA). The waivers are intended to pursue innovative strategies for states to promote quality and insurance access.

The new checklist is intended to help states complete waiver applications for purposes of establishing high-risk pools, reinsurance programs, and other programs.

CMS Opens CPC+ Round 2

On Tuesday, CMS reopened the [second round of applications](#) for the Comprehensive Primary Care Plus (CPC+) with 4 additional regions including:

- Louisiana: Statewide,
- Nebraska: Statewide,
- North Dakota: Statewide,
- New York: Greater Buffalo Region (Erie and Niagara Counties).

CMS will accept applications for these regions between now and July 13, 2017. Tracks 1 and 2 of the CPC+ model are considered Advanced Alternative Payment Models (AAPMs) under the [Quality Payment Program](#).

States, how many senators moved directly from the U.S. Senate to the White House and who are they?

[Click here to find the answer.](#)

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