HLB Weekly Newsletter

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EDITION: September 5, 2018





CONGRESSIONAL

Senate Passes Health Spending Bill

On August 23, the Senate passed the <u>Department of Defense</u> and <u>Labor</u>, <u>Health and Human Services</u>, and <u>Education</u>

<u>Appropriations Act. 2019 (H.R. 6157)</u>, funding these agencies for FY 2019 with an aim of avoiding a government shutdown if Congress does not act by September 30. The legislation includes an additional \$2.3 billion increase for the Department of Health and Human Services (HHS) and a 5.4 percent increase for the National Institutes of Health. In addition, an amendment was included allowing for \$1 million in funding for HHS to implement regulations requiring drug companies to list their prices in TV ads. The House has not yet passed their

MACRA HIGHLIGHTS

CMS will host a All-Payer Combination Option Overview Webinar on September 12. Click <u>here</u> to register.

HEALTH CARE ACTIVITIES ON THE HILL

House Energy and Commerce Committee

9/6 at 10:15am: Oversight and Investigation Subcommittee hearing on Examining Federal

version of the Labor-HHS-Education bill. There are no fewer than 10 days left in session for Congress to pass and conference differences between their appropriations bills before the end of the fiscal year.

ADMINISTRATION

FY 2019 IPPS/LTCH Final Rule Posted

On August 2, the Centers for Medicare & Medicaid Services (CMS) issued updates to Fiscal Year (FY) 2019 Medicare payment policies and rates under the Inpatient Prospective Payment System (IPPS) and the Long-Term Care Hospital (LTCH) Prospective Payment System (PPS) <u>final rule</u>. The IPPS rule provides a 1.85 percent update for 2019 and the LTCH rule provides a 1.0 percent payment update.

CMS Releases Risk Adjustment Proposed Rule

On August 8, CMS released the Methodology for the HHSoperated Permanent Risk Adjustment Program for 2018
Proposed Rule, which proposes to adopt the risk adjustment
methodology that HHS previously established for the 2018
benefit year that uses the statewide average premium in the
payment transfer formula. CMS is accepting comments on the
proposal through September 7.

MSSP Proposed Rule Posted

On August 17, CMS released a long anticipated <u>proposed rule</u> revamping the Medicare Shared Savings Program (MSSP) and Accountable Care Organization (ACO) program. The <u>proposed rule</u> seeks to transition ACOs into taking on more risk over time and proposes a glide path for organizations to take on risk based on their experience in the program and amount of revenue. CMS will accept comments through October 16.

New Children's Health Model Announced

On August 23, the Centers for Medicare and Medicaid

Efforts to Ensure Quality of Care and Resident Safety in Nursing Homes.

House Ways and Means Committee

9/5 at 2:00pm: Full Committee markup of health legislation.

MedPAC

9/6-9/7: September Public

Meeting.

WEEKLY TRIVIA

How Many U.S. Presidents were left-handed?

Click <u>here</u> to find the answers.

Innovation (CMMI) announced the Integrated Care for Kids (InCK) Model. The new model is a child-centered local service delivery and state payment model aimed at reducing costs and increasing quality care for children covered by Medicaid and the Children's Health Insurance Program (CHIP) through prevention, early identification, and treatment of priority health concerns like behavioral health challenges and physical health needs. The application process is expected to open this upcoming winter.

OIG Releases RFI on Anti-Kickback Rules

On August 27, the HHS Office of Inspector General (OIG) issued a <u>request for information</u> on changes to the anti-kickback statute and exceptions in order to allow for care coordination, particularly in value-based care models. Comments on the <u>RFI</u> will be accepted through October 26.

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