

## **HALL RENDER'S THIS WEEK IN WASHINGTON - APRIL 5, 2019**

### **HEALTH COST REDUCTION PACKAGE SLATED FOR SUMMER RELEASE**

Speaking on the Senate floor on Thursday, Sen. Lamar Alexander (R-TN), Chairman of the Health, Education, Labor, and Pensions ("HELP") Committee, said he plans to move a wide-ranging legislative package through his panel seeking to curb health care costs. Sen. Alexander, along with HELP ranking member Sen. Patty Murray (D-WA), will work with Senate Finance Committee leaders Sen. Charles Grassley (R-IA) and Sen. Ron Wyden (D-OR) to craft legislation to lower health care costs since the two panels share jurisdiction over health issues. The lawmakers will take into account more than 400 recommendations submitted to the HELP Committee from outside groups for lowering health care costs.

In his remarks on the Senate floor, Chairman Alexander praised calls to increase price transparency and access to claims data. Several policy proposals were referenced as part of this initiative, such as one that would prevent patients from receiving surprise medical bills. He also plugged recent interoperability proposals by CMS and the Office of the National Coordinator for Health IT as ways to help open the "black box" of health care costs. Additionally, he referenced plans such as allowing people with health savings accounts to use money in those tax-free accounts to cover direct primary care fees or extending a proposed Trump administration rule to pass prescription drug rebates on to consumers.

Along with Finance Committee-passed legislation, Alexander said he plans to ask Senate leadership "to put the package on the Senate floor, and then work with the House to send legislation to the president's desk." Senate Majority Leader Mitch McConnell (R-KY) said earlier this week that the Senate would not consider a "comprehensive" health overhaul this year. However, he offered support for the efforts of Chairman Alexander and Chairman Grassley on tackling prescription drug prices.

### **ENERGY AND COMMERCE COMMITTEE ADVANCES LEGISLATION TO STRENGTHEN ACA**

On Wednesday, the House Energy and Commerce Committee advanced six measures intended to bolster the Affordable Care Act ("ACA"). The measures include more funding for state-based ACA marketplaces, federal navigator programs and a reinsurance bill intending to lower ACA premiums (see [H.R. 1385](#), [H.R. 1386](#), and [H.R. 1425](#)). The three other measures passed are focused on Trump administration policies aimed at changing the ACA: [H.R. 1010](#) reverses the administration's expansion of short-term health plans; [H.R. 986](#) requires the administration to rescind guidance that made it easier for plans to soften protections for pre-existing conditions; and [H.R. 987](#) that would restore ACA outreach and enrollment funding.

This legislation was advanced hours after the House passed a resolution condemning the Trump administration's decision to support a federal court case in Texas that repeals the ACA. In a 240 to 186 vote, the House passed a resolution calling on the Justice Department to "halt its new advocacy for abolishing the Affordable Care Act," which the measure calls 'an unacceptable assault' on Americans' health care. The resolution is largely symbolic, as the Republican-led Senate will not advance the measure. President Trump also announced the intention for lawmakers to hold off voting on any Republican-led health care plan until after the 2020 election, which effectively eliminates any effort to repeal the ACA in this session of Congress.

### **HOUSE PANEL FINDS SURPRISE (BILLING) BIPARTISAN SUPPORT**

During the House Education & Labor's hearing on surprise medical billing in health care, lawmakers from both sides of the aisle said they want to pass legislation that shields patients from unexpected medical bills. Education & Labor does not typically lead on most hot topic health care issues, compared to the two other health committees of jurisdiction; however, it does have jurisdiction over ERISA, employers and brokers, all of which are a significant part of planning how to curb surprise medical bills. A bipartisan group of senators is also working on the issue and is expected to release updated draft legislation in the coming months.

There is a general agreement among lawmakers and industry groups that patients should be held harmless from surprise medical bills, but there is not a consensus yet on how to solve the issue. When discussing potential fixes, lawmakers took interest in state surprise billing laws, but noted that state legislation cannot regulate ERISA plans; therefore, a federal fix is needed. Other solutions discussed include the government setting a payment rate or implementing a "baseball-style" arbitration method when surprise medical bills occur. No hospital or

industry representatives testified at this hearing, but both providers and insurers have been negotiating with lawmakers to reach a compromise.

## HEALTH-RELATED BILLS INTRODUCED THIS WEEK

Sen. Todd Young (R-IN) introduced [S. 1045](#) to amend the Public Health Service Act to expand the authority of the Secretary of Health and Human Services to permit nurses to practice in health care facilities with critical shortages of nurses through programs for loan repayment and scholarships for nurses.

Rep. Mark DeSaulnier (D-CA) introduced [H.R. 2095](#) to direct the Secretary of Health and Human Services, for the purpose of addressing public health crises, to require the manufacturers of covered products to develop, maintain and update a plan to mitigate the effects of such products on public health.

Rep. Jan Schakowsky (D-IL) introduced [H.R. 2085](#) to amend the Public Health Service Act to establish a public health insurance option. Sen. Sheldon Whitehouse (D-RI) introduced the Senate version, [S. 1033](#).

Sen. John Barrasso (R-WY) introduced [S. 1037](#) to amend Title VIII of the Social Security Act to modernize provisions relating to rural health clinics under Medicare.

Rep. Earl Blumenauer (D-OR) introduced [H.R. 2062](#) to amend the Public Health Service Act to protect the confidentiality of substance use disorder patient records. Sen. Joe Manchin (D-WV) introduced the Senate version, [S. 1012](#).

## NEXT WEEK IN WASHINGTON

Congress is back to work next week to finish business before the two-week April recess. The House Ways and Means Committee will mark up drug pricing bills on Tuesday. The bills are largely bipartisan and are expected to be relatively noncontroversial. Legislation to be marked up includes: a bill ([H.R. 2069](#)) to require drug manufacturers to publicly justify large price increases and launch prices for high-cost drugs; a proposal to push for more clarity on pharmaceutical benefit managers' rebates; the Samples Act ([H.R. 2064](#)), which would require drug and device companies to report the value of free samples they give to health care providers; and legislation ([H.R. 2087](#)) to improve drug manufacturers' reporting of average sales price data, which is used to calculate Medicare Part B drug payments.

Also on Tuesday, the Senate Finance Committee will focus on drug pricing in their [hearing](#) "Drug Pricing in America: A Prescription for Change, Part III." The committee will hear from witnesses on the role of pharmacy benefit managers in drug price increases. The Bipartisan Policy Center on Tuesday hosts a [discussion](#) on "Comparative Effectiveness Research: Recent Applications and Future Investments," focusing on patient-centered health care decisions.

## THIS WEEK IN WASHINGTON IN HISTORY

**1917, 102 years ago this week:** Jeannette Pickering Rankin, the first woman ever elected to Congress, takes her seat in the U.S. Capitol as a representative from Montana. Following her election as a representative, Rankin's entrance into Congress was delayed for a month as congressmen discussed whether a woman should be admitted into the House of Representatives.

**1792, 227 years ago this week:** President George Washington exercises the first presidential veto of a Congressional bill. The bill introduced a new plan for dividing seats in the House of Representatives that would have increased the amount of seats for northern states. Washington ultimately decided that the plan was unconstitutional because, in providing for additional representatives for some states, it would have introduced a number of representatives higher than that proscribed by the Constitution.

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