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In this issue:

- [Congress Passes Short-Term Funding Deal, New Shutdown Deadline December 21](#)
- [Senators Introduce Bipartisan to Prevent Medicaid Drug Misclassifications](#)
- [Meeting the New Members of the 116th Congress](#)
- [Trump Administration Releases Health Sector Reform Recommendations](#)

Congress Passes Short-Term Funding Deal, New Shutdown Deadline December 21

On Thursday, the House and Senate passed a temporary two-week continuing resolution (CR), extending the government funding deadline to December 21, and President Trump signed the stopgap measure on Friday morning. While legislators had originally been scheduled to debate a funding package this week, Congress delayed consideration of the matter in order to pay respects following the passing of former President George H.W. Bush.

Congress was able to pass five of the twelve annual appropriations bills earlier this year, so the two-week CR funds the departments whose appropriations bills have not yet been passed, including the Department of Transportation, Department of Justice, and others. Reports indicate that legislators are keen on avoiding a partial shutdown right before Christmas, but President Trump has also stated he is firm on securing funding for a border wall in any year-end deal and is willing to shut down the government over the matter.

While some would prefer an omnibus package that provides funding for the remaining departments through the end of the 2019 fiscal year, others suggest another stopgap bill providing funding through March 2019 is a more likely outcome. ACEP will continue to monitor and provide updates as the congressional negotiations continue.

Senators Introduce Bipartisan to Prevent Medicaid Drug Misclassifications

On Monday, Senators Chuck Grassley (R-IA) and Ron Wyden (D-WA) introduced legislation targeting drug manufacturers who intentionally misclassify drugs under Medicaid for the purpose of improving their reimbursement. The legislation comes in the wake of an Office of the Inspector General (HHS-OIG) investigation that found U.S. taxpayers may have overpaid for Mylan's EpiPen by \$1.27 billion over ten years as a result of Mylan classifying the branded EpiPen as a generic product.

The bill, the "Right Rebate Act of 2018," would expand Medicaid's ability to demand that manufacturers reclassify incorrectly listed drugs in the Medicaid drug rebate program, and would also impose capped civil monetary penalties for misclassifications.

The legislation also offers some insight into the priorities for the Senate Finance Committee in the upcoming 116th Congress, as Sen. Grassley will be the new Finance Chairman and Sen. Wyden will remain the Ranking Member. Drug pricing, as well as general federal health program oversight, are expected to remain top issues for both the Administration and Congress well into the next year.

Meeting the New Members of the 116th Congress

ACEP is mounting an aggressive push throughout the next two months to meet as many of the new

members as possible before or just after they are sworn in. Although we supported quite a few in their election bids, there may be more than 100 new members coming to Congress. We will be setting up local meetings between ACEP 911 Network members and the new members to introduce them to emergency medicine and our role in the health care delivery system and to establish a local contact in the health care space. The meetings will most likely be 30 minutes or less and we will provide tips for hosting ACEP members as well as a fact sheet for the new member. If you live or work in a congressional district of a new member of congress and are interested in hosting or participating in one of these meetings, please contact [Jeanne Slade](#) or [Caitlin Demchuk](#) in the ACEP Washington DC office for more details.

Trump Administration Releases Health Sector Reform Recommendations

On Monday, December 3rd, the Secretaries of three Departments, Health and Human Services, Labor, and Treasury, issued a joint [report](#) outlining policy areas they say inhibit choice and competition in healthcare. The report also includes numerous recommendations that address these shortcomings. Accomplishing the recommendations included in the report would require both state and federal action.

Some of the major recommendations include:

- Barriers to Entry — The report recommends that states and the federal government relax scope-of-practice restrictions and allow any provider who can “safely and effectively” provide care to do so. The report also recommends easing restrictions on foreign-trained doctors practicing in the United States. Under the recommendations, foreign-trained doctors who completed a program that HHS deems to be substantially equivalent to an American program would be given an expedited path to a medical license.
- Network Adequacy Requirements — The report advocates loosening network adequacy requirements in Medicare Advantage and Medicaid and call for states to “avoid stringent requirements” for network adequacy
- ACA Reforms —The report reaffirms the Administration’s commitment to promoting association health plans and short-term limited-duration insurance, saying that such plans boost consumer choice.
- Delivery System Reforms — The report emphasizes that the Administration should develop delivery models in Medicare and Medicaid that “allow free markets and patients to define value, rather than rely on technical and burdensome definitions from Washington.” The report also recommends that providers be paid based on a patient’s condition rather than the setting of service.
- Price Transparency — The report states that the federal government should prioritize price transparency and should make it easier for patients to pay for healthcare directly instead of always paying using health insurance.



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