



August 24, 2018

The Senate is back Monday, Aug. 27; the House returns in September after Labor Day for legislative business.

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Capital Minute

Here's a new edition of ACEP's Capital Minute for the third week of August, 2018:

<https://www.youtube.com/watch?v=suncZvhQTLs>



Senate Advances FY 19 Funding for Health Programs

On Thursday by a vote of 85 to 7, the Senate approved a package that combined FY 2019 funding for the Departments of Defense and Labor, Health and Human Services, and Education (H.R. 6157). This marks the first time in 11 years the Senate has passed a standalone bill or "minibus" to fund the departments instead of approving their funding as part of a larger spending package. The bill, which includes \$854 billion in funding overall, would provide \$90 billion to HHS and boosts funding for NIH by \$5 billion and efforts to combat the opioid epidemic by \$3.51 billion. The Senate has now passed nine of 12 appropriations bills. With the fiscal year ending on September 30, funding for the remaining three programs and agencies will likely be temporarily extended until after the November midterm elections.

The House has yet to approve its version of the FY 2019 Labor-HHS-Education Appropriations bill (H.R. 6470) and that chamber will not return from recess until after Labor Day. This leaves less than

a dozen legislative days for the two chambers to reconcile their differences, approve the final version of the bill, and receive the president's signature before funding expires on Sept. 30.

CMS Releases the Medicare Shared Savings Program Proposed Rule

On Thursday, August 9, the Centers for Medicare & Medicaid Services (CMS) released a [proposed rule](#) related to the Medicare Shared Savings Program (MSSP), the national Accountable Care Organization (ACO) Program. In this 600-page rule, CMS proposes significant changes to the program, including:

- Transitioning ACOs into downside risk on a much faster timeline than the current program allows;
- Incorporating regional costs into an ACO's initial benchmark;
- Expanding the ability of Medicare beneficiaries to "voluntary" align to ACOs by allowing them to designate a physician regardless of specialty as their primary doctor;
- Waiving the originating site requirement for Medicare telehealth services for certain ACOs that are in a downside risk track;
- Expanding the eligibility criteria for ACOs to receive a waiver to the Skilled Nursing Facility (SNF) 3-day Rule; and
- Creating a Beneficiary Incentive Program to encourage patient engagement.

ACEP's full summary of the proposed rule is found [here](#).

NEMPAC News

Earlier this week you received the latest edition of the [NEMPAC Pulse newsletter](#). We'd appreciate any feedback you have on this new NEMPAC initiative – please contact Jeanne Slade at jslade@acep.org with comments.

Keep an eye on your inbox for invites to the [NEMPAC donor events at ACEP18](#) in San Diego. Be sure to make your contribution by September 30th so you can join us in celebrating ACEP's 50th anniversary and another year of NEMPAC's success.

For more information, go to www.acep.org/nempac.



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