



## Health Policy Briefing

September 6, 2016

### Lawmakers Turn to Funding the Federal Government

Now that Congress has returned from a long summer recess, lawmakers' focus will be on moving a stopgap-spending bill before the new fiscal year (FY) begins on October 1. Conservative members of the House Freedom Caucus are pushing for a continuing resolution (CR) that funds the government through the beginning of 2017, in order to avoid policy compromises and bargaining on a large spending deal during the lame-duck session following the November elections. Some Freedom Caucus members have voiced concerns about the lack of accountability during lame duck sessions of members who are retiring or have been voted out of office. But Republican leadership, along with congressional Democrats, appear more likely to support a short-term CR followed by a bipartisan budget deal negotiated before the end of the calendar year. Because there is the chance that the GOP could lose their majority in one or both chambers, leadership would prefer to control the negotiation process during lame-duck than leave it to the 115th Congress after the new year. And Democrats want the option of a clean slate should Democratic presidential nominee Hillary Clinton win the election, so that she does not have to negotiate funding for the federal government during her first days in office. Issues likely to arise during the formulation of a CR include funding to combat the Zika virus and the opioid abuse crisis. While the President has issued an official notification that he plans to submit the Trans-Pacific Partnership (TPP) trade deal for a vote in Congress, prospects of passage remain bleak. Progressive members of Congress remain staunchly opposed to the agreement, and a number of Republicans have also signaled their opposition. Democrats, however, have echoed the above concerns about lawmaker accountability during a lame-duck session regarding the TPP if it is brought for a vote after the general election. Congress is scheduled to be in session through the first week of October, though it is possible that the chambers could recess earlier to allow time for campaigning in home districts.

#### Inside

Zika Update.....	2
Administration Announces New Funding for Opioid Abuse Epidemic.....	2
Whitfield to Resign this Week.....	2
Mylan Announces Generic Version of EpiPen.....	2
Upcoming Congressional Hearings and Markups.....	3

### ***Zika Update***

In a revision of previous agency guidance, the Food and Drug Administration (FDA) announced last week that all donated blood in the United States should be screened for the Zika virus, not only blood that is donated in areas of active transmission. The decision reflects concerns about increases in travel-related cases and sexual transmission of the virus. There are currently no known cases of the virus being spread through blood transfusion at this time. The 11 states with the highest risk of local transmission (Alabama, Arizona, California, Georgia, Hawaii, Louisiana, Mississippi, New Mexico, New York, South Carolina, Texas) have four weeks to initiate testing, while all other states have 12 weeks to begin screening. Director of the Centers for Disease Control and Prevention (CDC) Thomas Frieden has begun the push for inclusion of Zika funding in the spending bill to prevent a government shutdown at the start of the new fiscal year (FY) starting October 1. He emphasized that a continuing resolution (CR) without additional Zika funding would delay long-term projects necessary to federal Zika response. Research initiatives, support to states with local transmission, mosquito control infrastructure, and the development of diagnostic tests could be negatively impacted. The Senate is scheduled to vote again this week on the \$1.1 billion Republican Zika spending bill, which Democrats remain in opposition to because of restrictions placed on Planned Parenthood funding.

### ***Administration Announces New Funding for Opioid Abuse Epidemic***

The White House has announced \$53 million in new grants to 44 states to fight the opioid abuse and addiction crisis. The grants will be administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Centers for Disease Control and Prevention (CDC). The 11 states with the highest rates of primary care admissions to treat opioid abuse will receive \$11 million to expand access to medication-assisted treatment (MAT). An additional 12 states will receive up to \$11 million to increase the availability of naloxone among first responders. \$9 million in grants across 21 states will be used to raise awareness about the harm of sharing prescription medications and the dangers of overprescribing. Additional funds will help expand prescription drug monitoring programs (PDMPs). Administrators stressed that this funding would not adequately address the epidemic, and urged Congress to approve additional funding for addiction treatment.

### ***Whitfield to Resign this Week***

Retiring Rep. Ed Whitfield (R-Ky.) announced that he would be resigning from the House this week instead of serving out the rest of his term, which ends in January 2017. The announcement will set in motion a special election, to be held on the same day as the November general election, for a successor to serve the remaining months of Whitfield's term. Whitfield serves on the House Committee on Energy and Commerce, including the Subcommittee on Health. He is also a member of the Deadliest Cancers Caucus, the Diabetes Caucus, the House Rural Health Care Coalition, the Nurses Caucus, and the Rare Diseases Caucus.

### ***Mylan Announces Generic Version of EpiPen***

Amidst criticism for significant price hikes, makers of the epinephrine auto-injector EpiPen announced the launch of a cheaper, generic version of its own device last week. The generic version will be identical to the brand product in both the device and the drug itself, but with a list price of \$300, more than 50 percent less than the branded EpiPen. Mylan expects the product to be launched in several weeks, following completion of changes to the drug label. The decision did not succeed in appeasing lawmakers, who continue to call for a more permanent solution to the problems surrounding competition and affordability of prescription medications.

## Upcoming Congressional Hearings and Markups

*House Committee on the Budget hearing titled “Center for Medicare and Medicaid Innovation: Scoring Assumptions & Real-World Implications;” 10:00 a.m., 210 Cannon Bldg.; September 7*

*House Committee on Veterans’ Affairs hearing titled “From Tumult to Transformation: The Commission on Care and the Future of the VA Healthcare System;” 10:30 a.m., 334 Cannon Bldg.; September 7*

*House Ways and Means Health Subcommittee hearing titled “The Evolution of Quality in Medicare Part A;” 2:00 p.m., 1100 Longworth Bldg.; September 7*

*House Energy and Commerce Subcommittee on health hearing titled “Examining Legislation to Improve Public Health,” which includes H.R. 3119, the Palliative Care and Hospice Education and Training Act; 10:00 a.m., 2322 Rayburn Bldg.; September 8*

*House Energy and Commerce Subcommittee on Health hearing titled “An Examination of Federal Mental Health Parity Laws and Regulations;” 9:00 a.m., 2322 Rayburn Bldg.; September 9*