



## H&K Health Dose May 10, 2022

A weekly dose of healthcare policy news

### Legislative Updates

#### **E&C Leadership Introduces Bipartisan Mental Health Package**

This week, the House Energy and Commerce Subcommittee on Health will consider a bipartisan package of mental health legislation. H.R. 766, the *Restoring Hope for Mental Health and Well-Being Act of 2022* package, includes provisions to reauthorize key Substance Abuse and Mental Health Administration (SAMHSA) and Health Resources and Services Administration (HRSA) programs to address mental health and substance abuse disorders. Specifically, the bill would reauthorize the Garrett Lee Smith Memorial Act Suicide Prevention Program; the Maternal Mental Health Screening and Treatment Grant Program; grants to support American Indian and Alaska Native communities with mental health and substance use disorder prevention, treatment, and recovery services; and the Behavioral Health Workforce Education and Training Program. Additionally, the legislation would require self-funded, non-federal government plans to comply with mental health parity laws and improve the integration of evidence-based behavioral health care into primary care settings for mental health and substance abuse disorders.

The legislative text is available [here](#), and a section-by-section can be found [here](#).

#### **House Unveils Bipartisan FDA User Fees Package**

On May 4, House Energy & Commerce Committee Chair Frank Pallone, Jr. (D-NJ), Ranking Republican Cathy McMorris Rodgers (R-WA), Health Subcommittee Chair Anna G. Eshoo (D-CA), and Health Subcommittee Ranking Republican Brett Guthrie (R-KY) introduced the *Food and Drug Amendments of 2022*, legislation that would reauthorize the Food and Drug Administration (FDA) user fee program. The package extends the Prescription Drug User Fee Act (PDUFA), the Biosimilar User Fee Act (BsUFA), and the Generic Drug User Fee Act (MDUFA), each of which must be renewed every five years. The Health Subcommittee is scheduled to mark up the legislation tomorrow, with the full committee mark up expected on Wednesday, May 18th, with a goal of completing action prior to the August recess. Legislative text can be found [here](#) and section-by-section [here](#). A draft of the Senate Health, Education, Labor and Pensions (HELP) Committee User Fee Act is expected imminently.

#### **Funding for COVID Response Stalled**

Lawmakers remain at an impasse on how to get the latest tranche of COVID response funding through Congress. President Biden and Democratic leadership have reportedly agreed to disentangle the COVID-19 response package from a separate supplemental request for military and humanitarian aid to Ukraine, so the latter can move more quickly. At the same time, House and Senate Democrats have upped the price tag on the Ukraine package by \$6.8 billion above Biden's initial \$33 billion request. Negotiations have also been complicated by the Senate's shift to focus on a vote on abortion-related legislation.

#### **China Competition Bill Moves to Conference Committee**

Last week, the Senate made headway, in coordination with the House, to advance into a formal conference on the "Bipartisan Innovation Act" (BIA), merging the House-passed America COMPETES Act with the Senate-passed United States Innovation and Competition Act (USICA). The final piece of legislation will need to be agreed to by both chambers before it is sent to the President for his signature. Timing of completion remains uncertain, and there is growing concern that the final bill may not come to fruition by Memorial Day. Congressional staff has indicated that closing the conference by even the end of summer is a significant lift and this could slide into next year.



## **Baldwin Urges Passage of Workplace Violence Prevention for Health Care and Social Service Workers Act**

Sen. Tammy Baldwin (D-WI) held a press conference last week calling on her colleagues to fast-track legislation aimed at preventing health care workplace violence. The *Workplace Violence Prevention for Health Care and Social Service Workers Act* ([H.R. 1195](#)) would require the Department of Labor to issue a standard for health care employers (e.g., hospitals) to develop workplace violence prevention plans. The bill was passed by the House of Representatives with bipartisan support last year.

### **Regulatory Updates**

#### **New Commissioners Named to MACPAC**

The Government Accountability Office [announced](#) the appointment of four new members and reappointments to the Medicare and CHIP Payment and Access Commission (MACPAC). Medicare Payment Advisory Commission (MedPAC) appointments are expected shortly. The new members named to the MACPAC are below. Their terms will expire in April of 2024.

- Heidi L. Allen, an associate professor at Columbia University School of Social Work, where she studies the impact of social policies on health and financial well-being
- Robert Duncan, executive vice president of Children’s Wisconsin, where he oversees the strategic contracting for Children’s systems of care, population health, and the development of value-based contracts
- Laura Herrera Scott, vice president of clinical strategy and product at Anthem, where she has developed payer and data alignment policies to support efforts that advance population health
- Verlon Johnson, senior vice president, corporate strategy at CNSI, a Virginia-based health IT firm that works with state and federal agencies to design healthcare technology-driven products and solutions that improve health outcomes and reduce healthcare costs

#### **Public Health Emergency (PHE) Status**

Under current extensions, the PHE declaration will expire on July 16, 2022. A PHE lasts for 90 days and must be renewed to continue. The Administration has committed to providing a 60-day notice before ending the PHE, and therefore stakeholders should expect to learn whether the PHE will be renewed by May 16, 2022. The expiration of the PHE does not automatically end all related waivers/flexibilities. Some expire immediately upon the end of the PHE, while others, such as copays for COVID-19 vaccines, testing, and treatments, end on the last day of the calendar quarter in which the PHE ends. Certain others expire 151 days after the PHE ends under the *Consolidated Appropriations Act of 2022*, including, but not limited to, expansion of the telehealth originating site definition to include any site at which the patient is located and delay of the 6-month in-person requirements for furnishing mental health services through telehealth.

#### **Big Week for Maternal Health Coverage Following Mother’s Day**

On Friday, May 6, HHS launched a new maternal mental health hotline with an initial \$3 million investment. The hotline continues the Administration’s continued focus on mental health and stands to be expanded under the FY 2023 budget. More information can be found in this HHS [press release](#).



CMS [approved](#) Tennessee's and South Carolina's requests to extend their Medicaid and CHIP coverage from 60 days to 12 months post-pregnancy in other maternal health news. The change is expected to benefit approximately 38,000 individuals. Tennessee and South Carolina join five other states that offer post-partum coverage for a full year. CMS is also working with an additional nine states to extend post-partum coverage.