June 8, 2015

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**AOA Issues New Action Alert to Urge Congress to Repeal IPAB**

On June 2, the House Ways & Means Committee voted to repeal the Independent Payment Advisory Board (IPAB). Created under the Affordable Care Act, the IPAB is charged with finding cost-savings in Medicare, and it would have unprecedented power to cut physician payments if spending in the program becomes too high. The legislation to repeal the IPAB is now expected to go to a vote by the full House of Representatives next week.

[Click here](#) to send a letter to your Members of Congress urging them to vote YES next week to repeal the IPAB and prevent indiscriminate cuts to Medicare physician payments.

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**Ways & Means Committee Recognizes Past President Norman Vinn, DO as a Pioneer During IAH Debate**

On June 2, the House Ways & Means Committee also voted on S. 971, the Medicare Independence at Home (IAH) Medical Practice Demonstration Improvement Act. This bipartisan legislation would extend the IAH demonstration an additional two years, allowing Medicare beneficiaries with two or more chronic conditions to receive home-based primary care.

During the discussion of this bill and the IAH program, Rep. Mike Thompson (D-CA-05) noted AOA’s Immediate Past-President Norman Vinn, DO as a pioneer and leader in the delivery of home-based primary care. Dr. Vinn’s advocacy for seniors and homebound patients is well-established, as is his dedication to the osteopathic profession.

[Click here](#) to view a video of Rep. Thompson’s remarks that begin at the 22:28 marker.

*Ryan McBride, Congressional Lobbyist, Government Relations, rmcbride@osteopathic.org*

**AOA Participates in the White House Summit on Antibiotic Stewardship**

On June 2, the American Osteopathic Association (AOA) joined the Department of Health and Human Services at the White House for the first-ever health forum on antibiotic stewardship, committing its support for improving antibiotic use.
Robert Orenstein, DO, editor-in-chief of The Journal of the American Osteopathic Association (JAOA), was invited to attend the White House event as a representative of the AOA and the osteopathic medical community. The AOA made three commitments to combating misuse of antibiotics by:

- Engaging DOs in discussion about recommendations for antibiotic use;
- Providing continuing medical education focused on antibiotic stewardship, and;
- Providing easy-to-understand patient educational materials highlighting the importance of maintaining standards for prescribing antibiotics.

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Congress Continues Examination of Veterans’ Care
On June 3, the House Veterans’ Affairs Committee Subcommittee on Health held a hearing titled “Assessing VA’s Ability to Promptly Pay Non-VA Providers,” continuing a larger effort to examine the issues surrounding the effective and efficient delivery of care to our nation’s veterans.

The broader discussion centered around the VA’s ongoing struggles to coordinate with non-VA providers and its poor performance in comparison with private insurance or even Medicare.

During the hearing, Committee members noted that the VA’s inability to promptly pay affects all stakeholders in the health care system, but especially impacts individual providers and smaller practices. Questions surrounding interoperability problems between VA and non-VA providers were also addressed.

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CMS Releases Final Rule on Accountable Care Organizations; Addresses AOA Concerns
Last week, The Centers for Medicare and Medicaid Services (CMS) issued a final rule on accountable care organizations (ACO) and addressed several concerns raised by the AOA in our original comments submitted on the proposed rule in February 2015.

At that time, CMS contended in its proposal that certain specialties that rarely provide primary care services should be excluded from the ACO beneficiary assignment process. The AOA urged CMS not to exclude primary care physicians who offer OMT services, nor Osteopathic Manipulative Medicine (OMM) specialists. The AOA also noted that the agency incorrectly used "Osteopathic Manipulative Therapy" as the specialty designation, instead of OMM.

In the final rule released last week, CMS stated, "Because we agree that osteopaths frequently provide primary care services, we agreed with commenters that specialty code 12 (osteopathic manipulative medicine) should be included in Step 2 assignment. As requested, we have also corrected the specialty name in this final rule for specialty code 12."

Unfortunately, CMS used the term “osteopath” to describe osteopathic physicians in this directive. The AOA will continue to work with CMS staff to educate them on the various terms and practices specific to osteopathic medicine.

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Senators Introduce Legislation to Increase Accountability for Foreign Medical Schools
Last month, Senators Dick Durbin (D-IL) and Bill Cassidy (R-LA) introduced legislation that would increase accountability for offshore medical schools that receive federal
dollars. The “Foreign Medical School Accountability Fairness Act of 2015” eliminates special treatment under the law and brings fairness to the eligibility requirements for these offshore medical schools to better protect students and taxpayers.

This bill applies current standards to all medical schools outside of the United States and Canada, and closes the loophole that allows these schools to receive federal funding without meeting the same requirements as other foreign medical schools.

If you are a member of the osteopathic medical community living in Illinois or Louisiana, the AOA encourages you to send a message thanking these senators for their commitment to fairness and accountability.

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CMS Creates Email Address to Report EHR Vendors Who Block Information

The Centers for Medicare and Medicaid Services (CMS) Acting Administrator Andy Slavitt vowed to be more transparent and share additional provider data with the general public more frequently during a meeting last week.

At the Health Datapalooza meeting, Administrator Slavitt said that CMS will begin to release the results of the agency’s most recent data dump quarterly rather than annually. Additionally, he promised to make the data more machine-readable and more readily available to interested parties. Finally, Slavitt announced a new email address that providers can use to report vendors who attempt to block information. Providers can send an email to noinformationblocking@cms.hhs.gov to report vendors, and an investigation will be launched by CMS.

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