

EDITION: October 12, 2022



Congressional

Congress Passes CR with User Fee Extension

Congress passed a [continuing resolution](#) (CR) funding the government through December 16, avoiding a government shutdown prior to the November elections. Among other things, the legislation includes a clean reauthorization of the U.S. Food and Drug Administration (FDA)'s user fee programs for five years, without any additional FDA policy changes. Additionally, the bill extends the low volume hospital (LVH) and Medicare dependent hospital (MDH) programs through December 16. Congress will return in November and have a month to address government funding and likely will look towards a larger end-of-year legislative package.

MA Prior Authorization Bill Passes House

Last month, the House of Representatives passed by voice vote the [Improving Seniors' Timely Access to Care Act](#) (H.R. 3173), legislation with the goal to reduce delays in the Medicare Advantage (MA) prior authorization process by establishing an electronic prior authorization process and other requirements. This legislation seeks to enable real-time decisions for certain routine services. The legislation has overwhelming bipartisan support but is estimated to cost around \$16 billion. Congressional champions and a large group of health care stakeholders are pushing to have this legislation included in end-of-year legislation.

Senate Finance Releases Mental Health Discussion Draft

UPCOMING HEALTH CARE ACTIVITIES ON THE HILL

Due to the November 8 midterm election, both the Senate and the House of Representatives won't return to D.C. for votes until November 14.

The Senate Finance Committee released its third [discussion draft](#) to address mental health. This one is focused on workforce. The bipartisan [legislation](#) would support 400 new Medicare-funded residency slots a year for psychiatry, provide Medicare Part B coverage for family and marriage therapists and mental health counselors, expand social work services and make it easier for patients to see psychologist trainees through the program and expand Medicare's Health Professional Shortage Area Physician Bonus Program to boost the workforce. The discussion draft joins the Committee's other mental health discussion drafts on [telehealth](#) and [youth mental health](#). They continue to work on other areas in mental health and will likely continue their work through 2022 and into the next Congress.

Administration

CMS Releasing RFIs on Efficiency, Equity and Interoperability

The Centers for Medicare & Medicaid Services (CMS) recently released two Requests For Information (RFIs) seeking public input on its programs. The first, the [Make Your Voice Heard](#) request seeks input on efficiency, reducing burden, and advancing equity. It also asks questions related to the impact of waivers and flexibilities provided in response to the COVID-19 Public Health Emergency. Comments are due November 4.

Separately, CMS released an [RFI](#) on the concept of a National Directory of Health Care Providers and Services (NDH) that could help facilitate care coordination, health information exchange, and data reporting efforts. Comments are due December 6.

Surprise Billing Final Rule Released

The Department of Labor (DoL) finalized the most recent [rules](#) implementing the No Surprises Act which addresses surprise medical billing. The [rule](#) sets out requirements for resolving payment disputes over emergency health care and when patients don't have an opportunity to select medical providers in their insurance networks. The rule takes effect October 25. Additionally, CMS, DoL, and Treasury have posted an [RFI](#) to inform future rulemaking on some of the remaining issues from the No Surprises Act including how to implement the provisions related to the Advanced Explanation of Benefits and Good Faith Estimate for Covered Individuals, such as use of Health Level 7 (HL7®) Fast Healthcare Interoperability Resources (FHIR®) standards. Comments are due November 15.

Radiation Oncology Model Delayed Indefinitely

CMS [announced](#) that the Radiation Oncology model previously set to begin on January 1, 2023 will be delayed indefinitely.

The updated rule did not rescind the model, but indicated a new start date would be defined through future rulemaking.

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