

**EDITION:** August 13, 2021



## COVID-19 Resources

[HLB COVID-19 Resource Center](#)

## Congressional

### **Bipartisan Infrastructure Bill Passes Senate**

On August 11, the Senate passed its bipartisan [infrastructure bill](#) by a vote of 69-30, which includes offsets from health care including:

- \$49 billion from delaying the Medicare Part D rebate rule
- \$8.7 billion from the mandatory sequester
- \$3 billion in savings from reducing Medicare spending on discarded medications from large, single-use drug vials

The legislation must now be passed by the House of Representatives, although Speaker Nancy Pelosi (D-CA) is still indicating that the House will not vote on the legislation until the budget reconciliation bill is passed, despite threats by moderate House Democrats to allow the House to vote now, or they will vote against the budget resolution.

### **Budget Resolution Passed by Senate**

Following the passage of the infrastructure bill, the Senate passed a partisan \$3.5 trillion [budget resolution](#) by a vote of 50-49. The [budget resolution](#) provides target funding levels and instructions to Congressional Committees and is expected to be a vehicle for a number of President Biden's and

## UPCOMING HEALTH CARE ACTIVITIES ON THE HILL

**The House of Representatives is currently in recess, but will return August 23 until business is complete.**

**The Senate has left for their August recess and is expected to return September 13.**

Democrats' policy priorities. The health care provisions [instruct](#) Senate Finance Committee to prepare legislative text to:

- expand Medicare to include dental, vision and hearing benefits
- extend Affordable Care Act tax credit
- enhance home and community based care
- address the Medicaid gap-fix, and
- lower the Medicare eligibility age.

To offset the cost of these policies, as well as a large portion of the entire package, the Committee will look to some health care savings including drug pricing provisions. Policies related to health equity and Graduate Medical Education (GME) were also included in the instructions. Details are not yet clear on how the Committee will carry out the instructions, how long policies may last, and if all of those policies included in the instructions will make it into the final reconciliation bill.

Committees have until September 15 to put together their portions of the bill, although that deadline could slip due to other important deadlines Congress will face in September. Once prepared, the reconciliation bill will only need a simple majority to pass the Senate, although it will be very tight to keep all Democrats in support in both the House and Senate. Absent from the budget resolution was action on the debt ceiling which means that it will have to be addressed this fall along with funding of the government which expires September 30. All of these deadlines and use of reconciliation are expected to create a tense autumn for both chambers and parties.

## Administration

### IPPS Final Rule Released

On August 2, the Centers for Medicare and Medicaid Services (CMS) released the FY 2022 Hospital Inpatient Prospective Payment Systems (IPPS) and Long Term Care Hospital (LTCH) Rates [final rule](#) updating payment rates and hospital quality programs. In addition, CMS provided policy [updates](#) to its New COVID-19 Treatments Add-On Payment (NCTAP), withdrew certain transparency rules, and released a request for information (RFI) related to health equity. Other policies that had been in the proposed rule included disproportionate share hospital (DSH) payments, organ acquisition costs, graduate medical education (GME) and indirect medical education (IME) costs were not included in the final rule and will be addressed in subsequent rulemaking.

### President Calls for Lower Drug Prices

On August 12, President Biden gave remarks and put out a [Fact Sheet](#) related to his plans to lower prescription drug

prices. The plan includes allowing Medicare to negotiate drug prices, penalties for drug companies raising prices faster than inflation, and out-of-pocket cap on drugs, importing lower-cost prescription drugs, and accelerating development of generic and biosimilar drugs. Many of these policies would take Congressional action.

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**HOOPER, LUNDY & BOOKMAN, P.C.**

**Government Relations and Public Policy**

401 9th Street NW, Suite 550 Washington, DC 20004 | Telephone 202.580.7700

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