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GOVERNMENT RELATIONS & PUBLIC POLICY

Your weekly dose of health care policy

COVID-19 Resources

[HLB COVID-19 Resource Center](#)

Congressional

Budget Reconciliation Takes Shape

Congressional Committees have been working towards finalizing their legislative text of the Budget Reconciliation instructions. The House Ways & Means and Energy & Commerce Committees released their drafts of the Build Back Better Act and are holding markups this week and next. Both the House and Senate still indicate their goal to complete their plans and submit them to the Budget Committees by September 15, although this timeline could slip.

The Ways and Means [text](#) includes an expansion of Medicare coverage to include dental (beginning 2028), vision (beginning Oct. 1, 2022), and hearing (beginning Oct. 1, 2023) benefits. The Energy and Commerce [text](#) includes drug price negotiation, out of pocket caps, repeal of the drug rebate rule, expansion of health insurance premium tax credits, addressing the Medicaid coverage gap, and funding for pandemic preparedness and the health care workforce. The House Committee text has not yet been negotiated with the Senate Committees, who are working on their own bills. It will take time and intense negotiations in both Chambers to get a final bill passed.

In terms of timing, the House returns September 20th to begin floor votes and must also address government funding, the

UPCOMING HEALTH CARE ACTIVITIES ON THE HILL

House Energy and Commerce Committee

9/13 at 11:00am: Full Committee
[markup](#) of the Build Back Better
Act

debt ceiling, the bipartisan infrastructure bill, as well as other items like the National Defense Authorization Act (NDAA). The Senate returns September 13 for votes and must also address all of the items mentioned above, except the bipartisan infrastructure bill which they passed last month. Congress has a very full agenda this fall and negotiations will be not be easy, therefore what will be passed and when is still unclear.

Administration

New COVID-19 Plan Includes Future Vaccine Mandates

Yesterday, President Biden Announced a new six-prong [Covid-19 Action Plan](#). Among other things, the [plan](#) will require "vaccinations for workers in most health care settings that receive Medicare or Medicaid reimbursement, including but not limited to hospitals, dialysis facilities, ambulatory surgical settings, and home health agencies..." in addition to nursing homes which was previously announced. The plan indicates that all staff and volunteers, whether clinical or otherwise, will be subject to these requirements. An Interim Final Rule with Comment Period is expected in October to provide further guidance and timeline for these requirements.

In addition to health care workers, the plan also requires the Department of Labor's Occupational Safety and Health Administration (OSHA) to develop a rule requiring all employers with 100 or more employees to mandate vaccination or require a weekly testing. Additionally, rules would require employers to provide paid time off for the time it takes for workers to get vaccinated or to recover. Limited information is available at this time but rulemaking is forthcoming.

HHS Releases Plan on Drug Prices

Yesterday, the Department of Health and Human Services (HHS) Office of the Assistant Secretary for Planning and Evaluation (ASPE) released its [Comprehensive Plan for Addressing High Drug Prices](#), a report in response to the Executive Order on competition in the American economy. The report identifies guiding principles for both legislative and regulatory action. The report indicates the administration's support of a number of legislative proposals including:

- Drug price negotiation in Medicare Parts B and D
- Medicare Part D reform, including a cap on catastrophic spending to protect beneficiaries from unaffordable out-of pocket costs
- Legislation to slow price increases over time on existing drugs

- Legislation to speed the entry of biosimilar and generic drugs
- Prohibition on “pay-for-delay” agreements and other anti-competitive practices by drug manufacturers

The report also notes administrative actions of interest including:

- Testing models using value-based payments in Medicare Part B
- Testing models providing additional cost-sharing support to Medicare Part D Low-Income Subsidy Beneficiaries for using biosimilars and generics
- Testing total cost of care models in Medicare to determine whether they produce changes in drug utilization, reductions in total spending, and improvements in patient outcome
- Data collection from insurers and Pharmacy Benefit Managers (PBMs) to improve transparency

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