June 21, 2013

United States Congress

**Senate 302Bs released**: The United States Senate Committee on Appropriations provided its subcommittees with their **FY14 funding totals** to be allocated across the programs within their individual jurisdictions. These funding totals, referred to as 302b allocations, allow appropriators to start the development of FY14 funding recommendations. The Senate is using a total funding at the pre-sequester amount of $1.058 trillion which is substantially higher than the House FY14 total of $967 billion based on the House budget resolution. With this spread between the House and Senate funding levels it is difficult to see an expedient resolution of the differences and timely passage prior to the start of the federal fiscal year on October 1, 2013. A series of continuing resolutions will likely be the way Congress will deal with the difficult financial situation it has created through the sequester.

You can find a chart comparing the [House and Senate 302b allocations](#) for subcommittees of interest to academic pharmacy on the AACP advocacy web page.

**Report on student debt**: The Joint Economic Committee of the United States Congress, in a report *The Causes and Consequences of Increasing Student Debt*, finds that two major factors are driving increased student debt: the increasing number of students and the average debt being assumed by these students. Over the past decade the “per capita enrollment in degree-granting institutions increased by 21%,” with student debt load upon graduation averaging over $27,000. Declining state support and increasing tuition mean that more students must seek federal financial aid assistance to complete their post-secondary education. The report includes a number of recommendations to policy makers to address the issue of increasing student debt:

- Keep the interest rate for subsidized Stafford loans at the current 3.4%
- Forgive loans of graduates that are employed in certain public service positions;
- Modify the current loan repayment programs that benefit low-income earners; and
- Allow private loans to be converted to federal loans so the borrower is able to take advantage of current federal loan forgiveness or loan repayment programs.

**Humanities and social sciences are essential!**: The [American Academy of the Arts and Sciences](#), has published a report authored by its Commission on the Humanities and Social Sciences.
The Heart of the Matter is the Commission’s response to a bipartisan and bicameral request for input. The members of Congress asked:

“What are the top actions that Congress, state governments, universities, foundations, educators, individual benefactors, and others should take now to maintain national excellence in humanities and social scientific scholarship and education, and to achieve long-term national goals for our intellectual and economic well-being; for a stronger, more vibrant civil society; and for the success of cultural diplomacy in the 21st century? “

The Commission’s report includes recommendations that recognize the contribution of the humanities and social sciences to a “vibrant democracy.”

Administration

CMS posts additional materials for next round of CMMI awards: The Centers for Medicare and Medicaid Services has posted supplemental materials for those individuals applying to the Center for Medicare and Medicaid Innovation’s second round of innovation awards. While the deadline for application is August 15, 2013, applicants MUST file a non-binding letter of intent by June 28, 2013.

AHRQ EHC resources: The Effective Health Care (EHC) program of the Agency for Healthcare Research and Quality (AHRQ) is comprised of a number of resources for health professionals and patients to improve the quality of care they deliver and receive. The breadth of the resources is sometimes a challenge for providers and patients to sort through. In an effort to make the evidence-based information more user friendly, AHRQ has developed a series of tools to help both providers and patients access information from the EHC web pages. The new web-based resources include The Clinical Bottom Line (for providers) and Treatment Options (for patients) are now available.

CDC to pilot HIV MTM with providers: The Tuesday, June 18, 2013 edition of the Federal Register includes a notice by the Centers for Disease Control and Prevention. The notice seeks public comment on the development of a new project between the CDC and Walgreens. The project would place community pharmacists with primary medical providers of HIV positive patients in ten pilot sites. The pharmacists will be responsible for providing medication therapy management related to HIV care. CDC is seeking comment on the MTM project, its approach to implementation, and the data set it will collect from the sites to aid in analysis of the project’s success and challenges.

CPSTF report to Congress: The 2013 Report to Congress of the Community Preventive Services Task Force (CPSTF) is now available on the CPSTF web site. This annual report includes the
activities of the CPSTF over the past year. This year the report includes the April 2012 recommendation of team-based approaches for blood pressure control. In addition to the list of recommendations developed by the CPSTF the report includes a listing of gaps in evidence. Gaps in evidence are regularly identified by the CPSTF through its work that includes review of the literature regarding interventions that are used to address public health issues. Pharmacy faculty should review this gaps list for ideas about research that could assist in closing the gaps.

**Additional Information**

CHEA responds to accreditation concerns: Last week's update (June 14) included a list of concerns presented and discussed during a hearing regarding higher education accreditation before the House Committee on Education and Workforce's subcommittee on Higher Education and Workforce Training. AACP still seeks your input regarding the value of accreditation and your personal (and confidential) response to the concerns presented in the update article. The Council for Higher Education Accreditation (CHEA) has responded to these same concerns in a document and accompanying talking points that state the value of higher education accreditation.

If your member of the House of Representatives is a member of the House Committee on Education and Workforce, AACP encourages you to reach out to members of your congressional delegation and share this information as well as your own thoughts regarding the value of higher education accreditation. An AACP issue brief on Education Quality, developed by the education workgroup of the standing committee on advocacy, is or will soon be posted to the advocacy web page for you to share with your delegation as well.

**Health care costs continue to slow:** The Health Research Institute, a part of Price Waterhouse Coopers, estimates that health care costs will continue to decrease through 2014. Medical Cost Trend: Behind the Numbers 2014, is based on analysis of 2013 survey of employers and interviews with health plan actuaries, health policy experts and industry executives. In 2013 health care costs increased by 7.5%. the PwC report estimates that this trend in reduced costs will continue with health care costs increasing by 6.5% in 2014. The report indicates four factors that are driving this slowing of cost increases:

1. Routine care being moved to lower cost settings;
2. Employers moving employees into high-value networks;
3. Health systems being incentivized to reduce waste by improving care coordination; and
4. Employers moving more cost to employees.

The report includes two factors that are driving costs up:
1. Increasing access to specialty drugs including biologics; and
2. Industry consolidation.