

Customized Briefing for Kimberly Barry-Curley

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Leading the News



Obama's Gun Control Proposals Contain Push For Better Mental Healthcare.













National media outlets, including a handful of major dailies, offered heavy coverage of the mental health aspects of President Obama's gun control proposals. Tone of the coverage was somewhat positive, as many reports noted praise from several medical groups. Nearly all reports emphasized President Obama's clarification that ACA allows doctors to ask patients whether they have guns in their homes and that HIPAA doesn't prevent doctors from reporting threats of violence to the police. Most reports also noted President Obama's push for the CDC to resume research into the causes and prevention of gun violence, his call for increased mental health resources, and his directive for the HHS and Education secretaries to launch a national dialogue on mental health.

For example, the [Washington Times](#)   (1/17, Dinan) reports President Obama "is using the national debate over gun violence to push for further action on his health care law, including insisting on the kind of mental health coverage states must provide under their Medicaid programs." President Obama plans to take 23 executive actions, including the finalization of regulations "clarifying essential health benefits and parity requirements within ACA exchanges," and the commitment "to finalizing mental-health parity regulations."

[Politico](#)   (1/17, Cheney) says President Obama noted "ways that Obamacare will broaden access to mental health care - and tried to stamp out what he called the misperception that a narrow provision of the 2010 health law had made it illegal for doctors to talk to their patients about gun safety." The health components of his gun control agenda "were immediately embraced by many prominent groups, including the American Medical Association and the American Public Health Association. Notably, Obama outlined a \$150 million proposal to hire thousands of new mental health professionals and social workers, provide teachers and school officials with training to identify symptoms of mental illness and shore up services for at-risk youths."

[USA Today](#)   (1/16, Szabo) notes President Obama proposed a new program, dubbed Project AWARE (Advancing Wellness and Resilience in Education), "to reach 750,000 young people with mental illness and refer them to treatment." USA Today continued by citing Michael Fitzpatrick, executive director of the National Alliance on Mental Illness, who said of President Obama's proposals, "These are things we've been asking for, for years." Ron Manderscheid, executive director of the National Association of County Behavioral Health and Developmental Disability Directors, said: "The president has taken exceptionally important first steps to address the deficiencies in our national mental health system."

The [Daily Caller](#)   (1/16) adds President Obama "said Wednesday that he wants doctors to talk to their patients about responsible gun use, just days the American Medical Association and other medical organizations sent Obama a letter invoking the Newtown tragedy to request more funding for programs that would allow for doctor-patient gun conversations." Obama said, "Doctors and other health care providers also need to be able to ask about firearms in their patients' homes and safe storage of those firearms, especially if their patients show signs of certain mental illnesses or if they have a young child or mentally ill family member at home."

Also covering the story are: The [Los Angeles Times](#)   (1/16, Levey), [The Hill](#)   (1/17, Baker) "Healthwatch" blog, [Modern Healthcare](#)   (1/16, Zigmund, Subscription Publication), [Bloomberg News](#)   (1/17, Flinn), [CQ](#)   (1/17, Adams, Subscription Publication), and [The Hill](#)   (1/17, Kasperowicz) "Floor Action" blog.



From NAHU



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Legislation and Policy



Influential CEOs Back Medicare Overhaul, Raising Eligibility Age.









The [AP](#)   (1/17, Ohlemacher) reports, "An influential group of business CEOs is pushing a plan to gradually increase the full retirement age to 70 for both Social Security and Medicare and to partially privatize the health insurance program for older Americans." The Business Roundtable's plan "would protect those 55 and older from cuts but younger workers would face significant changes." Their recommendations include privatizing Medicare, raising the eligibility age, and increasing the program's means testing.

[The Hill](#)   (1/17, Baker) "Healthwatch" blog reports, "Business Roundtable, a trade group that represents corporate CEOs, said Wednesday that Medicare should be overhauled along the lines of Rep. Paul Ryan's (R-Wis.) controversial proposal." In a new proposal, the group said "the traditional Medicare program should compete with private plans," and also suggested raising the eligibility age to 70.



[Roll Call](#)   (1/17, Lorber, Subscription Publication) reports, "It's an ambitious set of requests likely to face opposition from both sides of the aisle. But after CEOs flocked to Washington last month in an effort to sway the fiscal cliff negotiations, the group is eager to wade into future tax and spending negotiations."

[Reuters](#)   (1/17, Morgan) adds that Gary Loveman, CEO of Caesars Entertainment Corp., and a former Harvard economist, who is chair of the BRT's health and retirement committee said, "We are calling on President Obama and Congress to look at our plan and enact a package of gradual changes that will provide economic and personal security for generations to come."



[Bloomberg News](#)   (1/17, Przybyla) notes that "the plan comes as Congress prepares for another round of battles over fiscal issues, this time raising the nation's borrowing limit and heading off automatic spending cuts it delayed until the end of February."



Also reporting on the Business Roundtable's proposals are the [Financial Times](#)   (1/17, Politi, Subscription Publication), [US News & World Report](#)   (1/17, Kurtzleben), the [Las Vegas Review-Journal](#)   (1/17, Stutz), and the [Minneapolis Star Tribune](#)   (1/17, Spencer).

House Democrats Introduce Bill To Add Public Option To ACA.

[The Hill](#)   (1/17, Kasperowicz) "Floor Action" blog reports, "Dozens of House Democrats on Tuesday reintroduced legislation that would amend the 2010 healthcare law to create a government-run health insurance option, or a so-called 'public option.'" Rep. Jan Schakowsky (D-IL), along with 44 other House Democrats, introduced the Public Option Deficit Reduction Act, H.R. 261, as a way to "give health care consumers more choice and lower their premiums." Schakowsky said, "Obamacare is already helping millions of Americans get the health care they need, but it can be made even better."

New Ways And Means Health Chair Outlines Agenda.

[The Hill](#)   (1/17, Viebeck) "Healthwatch" blog reports that the newly installed House Ways and Means Health Subcommittee chair vowed late Tuesday to "permanently repeal Medicare's sustainable growth rate (SGR) formula, eliminating the need for an annual 'doc fix.'" Rep. Kevin Brady (R-TX) said "he would work with the Energy and Commerce Committee to replace the SGR with 'a reliable physician reimbursement formula that rewards quality.'" Also in his statement, Brady "promised a push to lower healthcare overhead costs to 10 percent within five years" and "slammed President Obama's healthcare law."



On the subject of the Affordable Care Act, [CQ](#)   (1/17, Ethridge, Subscription Publication) reports that Brady "said he would examine the regulations and taxes in the law that take effect in 2013, and how they affect patients and providers." And "although he did not specify which parts of the law he would like to repeal, Brady said in a press release that he wanted to ensure 'a free-market health care system is preserved to compete with the new government-run system,' which assumes the law's health insurance exchanges would remain in place."

Four Republicans Among 22 Governors Backing Medicaid Expansion.



[Reuters](#)   (1/17, Morgan) reports that 22 governors, including four Republicans, have offered support of expanding Medicaid under



the Affordable Care Act, according to a new analysis published in the New England Journal of Medicine. First it must be noted that not all these decisions are set in stone, as the state Legislatures must ratify them. Further, several other states have yet to make an official decision, but will do so in the coming weeks. Reuters quotes from the NEJM analysis, in which authors, Harvard physicians Benjamin Sommers and Arnold Epstein, wrote, "No clear consensus has emerged. It now appears that the (law's) 2014 coverage expansion will have large unintended gaps, as low-income adults in at least a dozen states remain ineligible for any kind of public subsidy for health insurance."

HHS Decision On Mississippi Exchange Held Up By Dispute.

In continuing coverage, the [Huffington Post](#)   (1/17, Young) blog reports on the "ongoing brouhaha between the Republican governor of Mississippi and the Republican insurance commissioner over Obamacare." Although "Both Gov. Phil Bryant and Insurance Commissioner Mike Chaney are outspoken opponents of President Barack Obama's 2010 health care law," the two men "have been unable to resolve a months-long dispute" over whether to establish a state-based exchange or leave the task up to the Federal government. And now, "their standoff is holding up the Obama administration's decision on what happens next."

Texas Lawmakers Seek To Improve Medicaid Without Expansion.



The [AP](#)   (1/17, Tomlinson) reports that top Texas lawmakers "unveiled legislation Wednesday that they say will improve health care for the poor and disabled while fighting fraud, but they ruled out expanding Medicaid under an Obama administration effort to provide health care to 1.5 million uninsured poor people." Lt. Gov. David Dewhurst and Sen. Jane Nelson (R-Flower Mound) "said her Senate Bill 7 would change how health care providers are paid to encourage quality of treatment over quantity or procedures, while redesigning long-term care for the profoundly disabled." And her accompanying SB 8 "would detect fraud earlier and more effectively punish those responsible."



The [Houston Chronicle](#)   (1/17, Fikac, Langford) reports, "Top statewide officials are opposing a recommendation allowing counties to use local revenue to pay for expanded Medicaid coverage, and instead say they are targeting fraud and improving the quality of care within the state's \$30 billion program for the uninsured poor." Lt. Gov. Dewhurst said Wednesday "that expanding Medicaid under the federal health care law is off the table 'at the present time.'" And further, "he said he didn't endorse the county option recommended by the Legislative Budget Board, which cited the proposal as a way to help relieve counties' cost of charity care." He instead "touted legislation by Senate Health and Human Services Committee Chair Jane Nelson, R-Flower Mound, whose anti-fraud effort targets areas including abuse within the Medicaid-paid state transportation program used by children and families to get to clinics and doctors' offices."





Also covering the story are: The [Dallas Morning News](#)   (1/16, Garrett), the [Fort Worth \(TX\) Star-Telegram](#)   (1/17, Montgomery), and the [Austin \(TX\) American Statesman](#)   (1/17, Lindell).

Indiana Democrats, Republicans At Odds Over Medicaid Expansion.



The [AP](#)   (1/17, Davies) reports, "Democratic lawmakers pushed Wednesday for Indiana to take steps toward implementing the federal health care overhaul that Republicans who control state government have so far rejected." For example, state Sen. Karen Tallian has introduced legislation to set up a state-run insurance exchange, as well as expand Medicaid under the law. Gov. Mike Pence, who took office Monday, has spoken out against both moves.

The [Indianapolis Star](#)   (1/17, Sikich, Schneider) reports, "Several Democrat lawmakers on Wednesday called for the state to expand Medicaid under the Affordable Care Act, the first open expression of support for the move in the Indiana General Assembly." The article notes that although "Pence did not include money for the Medicaid expansion in his budget proposal Tuesday," on Wednesday he "left the door open to an expansion." He said, "The debate over whether or not Medicaid is expanded will perhaps take place in the General Assembly. That will be a decision that they make."





The [Evansville \(IN\) Courier & Press](#)   (1/17, Bradner) reports that Pence also said Wednesday that "the Healthy Indiana Plan must be the vehicle for providing any new Medicaid coverage if the state opts to offer any as a result of the federal health care law." These comments "came as the General Assembly starts a four-month session, and several lawmakers say they are hesitant to turn down the federal funding that would come with the health care law's Medicaid expansion."

Also reporting the story are the [Muncie \(IN\) Free Press](#)   (1/17, Yencer) and the [Munster \(IN\) Times](#)   (1/17, Carden).



Alabama Medicaid Commission Votes For Community Care Approach.

[Alabama Live](#)   (1/17, Chandler) reports, "The Alabama Medicaid Advisory Commission overwhelmingly voted [Wednesday] afternoon to recommend the state go with a community care approach - instead of statewide commercial managed care - to try to control spending in the healthcare program for the poor." The commission voted, with only one dissent, to "recommend a primary care case



management approach in which care providers are responsible for monitoring and approving the care of people on Medicaid."

The [AP](#)   (1/17) explains that the Committee's recommendation means that "Alabama's Medicaid program [will] be divided into as many as 11 or 12 divisions across the state." The Commission's chairman, state Health Officer Don Williamson "said each division would manage its own program," and committee members say "the divisions reflect the different needs in various parts of the state." The Commission is tasked with looking "for better and more economical ways to manage the state's health care program for the poor." The [Anniston \(AL\) Star](#)   (1/17, Lockette) also covers the story.



Brewer "Rallying Support" For Medicaid Expansion In Arizona.

The [AP](#)   (1/17, Christie) reports that Arizona Governor Jan Brewer "is wasting no time rallying support for her effort to expand Arizona's Medicaid plan, using a news conference at Maricopa Medical Center Wednesday to show she has backing from hospitals and the business community." At the conference, "Brewer said expanding coverage under the state's version of Medicaid, the Arizona Health Care Cost Containment System, would cut uncompensated care that is currently absorbed by hospitals but ultimately passed on to consumers."



ACA To Increase Cost Of Florida State Employees Insurance Program.



The [Florida Times-Union](#)   (1/17, Saunders) reports, "The federal Affordable Care Act is expected to add tens of millions of dollars in costs to Florida's state-employee health insurance program, leading some lawmakers to float the possibility of shifting more expenses to workers or tinkering with benefits." Much of the increase "stems from an Affordable Care Act requirement that the state offer insurance coverage to people who are considered temporary employees but work more than 30 hours a week." Currently, these workers are not given coverage. Though several ideas were floated in the Legislature, "Members of the select committee did not offer proposals for dealing with the extra costs stemming from the Affordable Care Act."

Atlanta Lawmakers Push For "Bed Tax" To Fund Medicaid.

The [Atlanta Journal-Constitution](#)   (1/17, Bluestein) reports Georgia Gov. Nathan Deal, Lt. Gov. Casey Cagle and House Speaker David Ralston all endorsed "the governor's plan to extend the 2-year-old funding mechanism, known as the 'bed tax.'" This measure will permit the "Department of Community Health to levy the fees from hospitals to fill a Medicaid hole of more than \$500 million. Health care providers warn that they would have to cut services and close as many as 15 rural hospitals if the void isn't filled." The Medicaid gap is "only the most immediate of health care funding questions that Georgia faces," and Deal said that the "the federal health care overhaul will cost Georgia an additional \$1.7 billion over a 10-year span."



Sebelius Speaks About ACA At MLK Luncheon.

The [Washington Post](#)   (1/16, Harris) reported that on Tuesday in Washington, DC, the National Action Network held the annual Dr. Martin Luther King Day Jr. luncheon, attended by "civil rights veterans, White House officials and leaders from corporate America," as well as Martin Luther King III, the civil rights leader's son. At the luncheon, HHS Secretary Kathleen Sebelius spoke about the Obama Administration's efforts to improve American healthcare, saying that "even though President Obama fought hard to pass the Affordable Care Act, the White House effort will have been in vain if people don't know what laws are on the books." Sebelius told the attendees, "I need your help to get the information out there so that people can take advantage of the full benefits."



The [Medill News Service](#)   (1/16, Railey) reports that Sebelius also said, "Change requires more than legislation. If we can't get people who need care signed up, then expanded access to health care is meaningless." According to the article, "Sebelius' remarks, delivered to an audience supportive of health care reform, were intended to spotlight popular elements of the federal health law, a signature part of President Barack Obama's first-term agenda that remains controversial." She continued, "We shouldn't assume that they know how much peace of mind that it can provide. We need to educate, we need to motivate and we need to engage and enroll people."

Public Health and Private Healthcare Systems

Highmark Reaches Deal With West Penn Bondholders.



[Modern Healthcare](#)   (1/17, Evans, Subscription Publication) reports, "Highmark said it reached an agreement to buy out bondholders of the financially distressed West Penn Allegheny Health System for 87.5 cents on the dollar." In addition, the insurer and the health system said they have "renegotiated their acquisition deal" and they are working to finish "negotiations to amend their acquisition agreement, which will be submitted to the state insurance regulators."

LSU, Medicare Insurer Partner To Improve Treatment Of Chronic Diseases For Elderly.

The [New Orleans Times-Picayune](#)   (1/17, Maggi) reports, "The LSU Health Sciences Center will work with Peoples Health, a Medicare Advantage plan administrator, to develop treatment plans for elderly patients and study if they are successfully dealing with chronic diseases, officials said Wednesday." The newly-established Center for Healthcare Advancement "will design standardized protocols for taking care of patients with various chronic diseases, from diabetes to heart disease." Carol Solomon, chief executive officer of Peoples Health, said that "the physician-owned plan is working to put in place teams of medical professionals to assist physicians across south Louisiana in helping patients tackle their health problems."



Growing Your Business

Businesses Prepare For "Employer Mandate" Provision Of ACA.

On the front page of its Marketplace section, the [Wall Street Journal](#)   (1/17, B1, Maltby, Subscription Publication) reports that many small businesses whose number of full-time employees are close to the threshold in the Affordable Care Act provision, which requires companies with over 50 employees to provide insurance coverage or pay a fine, are weighing their alternatives. Although the rule doesn't officially go into effect until 2014, the structure of a firm in 2013 could determine whether it is subject to the "employer mandate" the next year. The piece profiles Elizabeth Turley, the owner of apparel company Meesh & Mia, which is close to employing 50 workers and growing. Turley is considering hiring independent contractors to get around the mandate.

Also in the News

HHS Revamps Website As Part Of Campaign To Publicize ACA.

[CQ](#)   (1/17, Norman, Subscription Publication) reports that HHS "rolled out new features on its main website publicizing the health care law Wednesday, characterizing it as a portal for people to use when looking for information on enrolling in health insurance exchanges." The article notes that "the site largely avoids using the word exchange, which is the term used throughout the health care law," and "some experts have speculated that references to an exchange can be confusing to people who don't understand what an exchange is supposed to mean." Instead, the site refers to "Health Insurance Marketplaces." The "revamped site comes as part of a stepped-up campaign by the agency to make sure that uninsured Americans understand that they have new choices coming for health insurance."

Wednesday's Lead Stories

- [ACA Supporter McDermott Lands Key Health Subcommittee Position.](#)
- [AARP CEO Voices Opposition To Medicare, Social Security Cuts.](#)
- [Mayo Clinic, UnitedHealth Partner To Create Health Research Lab.](#)
- [Enroll America Plans Campaign To Raise ACA Awareness.](#)

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