

SUMMARY

May 8, 2019

The House Appropriations Committee today approved the fiscal year 2020 Labor, Health and Human Services, Education, and Related Agencies bill on a vote of 30 to 23. The legislation includes funding for programs within the Departments of Labor, Health and Human Services, and Education, and other related agencies, including the Social Security Administration.

Rep. DeLauro #2 – The Chair's amendment increases funding for several programs by allocating the remaining amount of funding available under the subcommittee allocation. It also includes several bill and report language provisions, including a general provision to maintain support for nonemergency medical transportation services for Medicaid beneficiaries who lack access to transportation to health care facilities. The amendment was adopted by voice vote.

Rep. Graves – The amendment prohibits funds from being used to replace or diminish the quality of care provided by TRICARE or Medicare. The amendment was adopted by voice vote.

Rep. Lee – The amendment prohibits funds from being used to finalize, implement, or enforce a new Trump Administration rule that allows medical professionals and health workers to deny care based on personal beliefs. The amendment was adopted on a vote of 30 to 23.

Rep. Harris #3 – The amendment increases funding for the Strategic National Stockpile by \$300 million using unobligated balances from the Children's Health Insurance Program to pay for the increase. The amendment was adopted by voice vote.

A summary of the fiscal year 2020 LHHS bill is [here](#). The text of the bill is [here](#). The bill report is [here](#).

Funding for hospitals denied CAH status

House appropriators want HHS to help hospitals that invested money to gain critical access status and secured "preliminary determinations" from the CMS, but then were ultimately denied after the agency revised its guidance.

HHS is urged to help the facilities who received these deniers find other opportunities for funding.

Medical workforce shortages

House appropriators want CMS to extend the time period for new medical residency training programs in areas with physician shortages, and includes a recommendation for the agency to convene stakeholders in those areas "to better understand changes in population health."

The agency would have to prepare a report for the committee within 90 days of the appropriation.

Under another provision, the CMS would have to explain to Congress how it is evaluating nurse staffing levels in hospitals, and why those levels are deemed appropriate.

Opioid epidemic

The committee report states that Congress is monitoring how payment policy may be driving providers to prescribe opioids instead of non-opioid alternatives, since the CMS pays the same for medication even if the non-opioid alternative brings extra treatment costs.

Additionally, the appropriators said they want the Substance Abuse and Mental Health Services Administration (SAMHSA) to evaluate the inpatient bed shortage for mental health and addiction treatment, and report back to the committee within 90 days of the final appropriations bill.

Medicare Advantage prior-authorization practices

House appropriators want the CMS to require Medicare Advantage plans to rein in their [prior-authorization requirements](#), and issue guidance to bar them from excluding coverage of services "that align with evidence-based guidelines and have historically high prior-authorization approval rates."

MA insurers would also have to submit an annual list of everything they demand prior-authorization for to the HHS secretary. And the CMS would be prompted to boost [electronic prior-authorization](#).