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WASHINGTON UPDATE

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Fmr. Congressman & ACA Opponent Sworn-In to Lead Health Agency

Orthopedic surgeon Tom Price was sworn in on Feb. 10 as the new Secretary of the Department of Health and Human Services (HHS). Price is an outspoken critic of the Affordable Care Act (ACA), which President Trump has vowed to repeal and replace. The former Republican congressman from Georgia was approved by the Senate on a strict party-line vote. As chair of the House Budget Committee, Price had drafted several comprehensive and ultimately unsuccessful bills to replace the ACA.

It is unclear at this point when Congress or the White House will roll out a replacement plan, but one of the secretary's first challenges is to stabilize an insurance market that has seen rising premiums and dwindling choices as carriers continue to drop out of the exchanges.

Medicaid Block Grants Central to ACA Replacement Proposals

On Super Bowl Sunday, President Donald Trump said the repeal and replacement of the Affordable Care Act (ACA) could take up to a year or longer. This marked a departure from previous statements where he had vowed to replace it as soon as Tom Price was sworn in as secretary of HHS. As the timeline has shifted to provide more flexibility for Congressional leaders to develop a plan, it is clear that divisions remain within the GOP on how to proceed. But central to nearly all the proposals is a proposal to block-grant Medicaid, the state and federal health insurance program for low-income adults and children. It was the centerpiece of Price's previous proposals, as well as proposals put forward by House Speaker Paul Ryan.

Medicaid currently covers nearly 75 million adults and children, and was expanded through the ACA to insure people previously not covered under the program. Under the ACA, the federal government is paying for almost all of the cost of this expansion. Conservatives argue, however, that the program would be more efficient if states received a lump sum from the federal government — a block grant — and then managed the program as they saw fit. Liberals maintain it would mean less funding for the program — eventually causing many low-income people to lose access to health care and reduced benefits, including mental health care, for everyone.

OSHA Meeting Highlights Potential Need for Workplace Violence National Standards

The Occupational Safety and Health Administration (OSHA) is seeking comments on a national standard to prevent workplace violence in healthcare and social service settings. As part of its request for information (RFI), members of the Emergency Nurses Association testified about workplace violence in the emergency department during an OSHA meeting on Jan. 10. The public meeting allowed employees, employers and other stakeholders to provide testimony describing their experiences with workplace violence. The meeting also included a discussion among stakeholders on strategies and tactics to prevent and respond to workplace violence.

Several major themes arose during the meeting: the culture of violence is pervasive and needs to change; workplace violence can happen to anyone, anytime, and anywhere; how workplace violence is defined is important; and better training is needed for staff at all levels. The comment period for the RFI is open until April 6. Submissions can be made electronically, by FAX or by regular mail. Go to <https://www.federalregister.gov/documents/2016/12/07/2016-29197/prevention-of-workplace-violence-in-healthcare-and-social-assistance> for more information.

Rep. Burgess Reintroduces Bill to Improve Trauma Care

In a report released in 2016, the National Academies of Science, Engineering and Mathematics (NASEM) noted that as many as 30,000 deaths in 2014 could have been prevented if trauma care had been optimal. Included in a series of recommendations in the report was improved coordination and better integration of military and civilian trauma care.

On February 6, Rep. Michael Burgess, Chairman of the Health Subcommittee of the powerful House Energy and Commerce Committee reintroduced the Military Injury Surgical Systems Integrated Operationally Nationwide to Achieve ZERO Preventable Deaths Act (MISSION ZERO Act) to address NASEM's recommendations. The MISSION ZERO Act (H.R. 880) would create a grant program to embed military trauma teams and providers, including emergency nurses, in civilian facilities. This will encourage the transfer of skills learned on the battlefield to civilian practice. Also, by allowing military trauma providers to work in civilian facilities, those providers are better able to keep their skills sharp while not deployed.

GOP Governors Resist Medicaid Cuts, Welcome Greater Flexibility

While Congress and the White House consider Medicaid block grants as part of the Affordable Health Act (ACA) replacement, 16 Republican governors whose states expanded Medicaid under the ACA are urging Washington not to cut Medicaid funds. Several of the governors met with the Senate Finance Committee in January to discuss the future of Medicaid and the ACA. House Majority Leader Kevin McCarthy has also asked governors to submit proposed changes to Medicaid and the ACA.

The Republican governors' views vary, but in communications with McCarthy, none of the governors call for eliminating Medicaid expansion or cutting funding, the largest source of federal funding for states. They want more flexibility to administer their programs as they see fit, such as imposing a work requirement, limiting benefits, and increasing premiums and copays. A few GOP governors support Medicaid block grants because they would allow even greater flexibility in managing Medicaid.