



# 3 healthcare issues to watch when Congress returns

By Greg Carey | April 21, 2017

The first 16 weeks of the 115th Congress were anything but boring, between the political appointee confirmation hearings and an Affordable Care Act repeal effort that fell short at the 11th hour. The frenzied pace felt foreign to those entrenched inside the Beltway – not to mention those of us wondering how changes in health policy will affect healthcare in practice.

Now, as Congress' first two-week recess of the year comes to a close, staff are busy preparing for what's next. Here are three things to watch for over the next five weeks – until Congress takes another week-long break.

## Healthcare reform

Remember the American Health Care Act (AHCA)? A replacement bill for the ACA was the top priority for Congress and the Trump Administration after the Inauguration – and it's far from done. It seems President Trump is eager to have a new healthcare bill in place before the 100th day of his presidency.

Politico reported this week that the White House officials plan to circulate the text of a new bill

shortly, in hope that Congressional leaders will schedule a vote by the middle of next week. The clock is ticking.

So does Trump's latest effort stand a chance? The White House believes it's close to having the votes it needs. But pay attention to how Republicans and Democrats are talking about the issue. During the recess, many members held town hall meetings back home, and when healthcare reform inevitably came up, constituent voices were loud on both sides of the aisle.

Since every member of Congress shares an interest in re-election, these anecdotes and experiences will likely make their way into conversations on the Hill – and considerations about how to vote on Trump's latest effort. Congressman Greg Walden from Oregon, who was instrumental in drafting the AHCA, faced a particularly vocal crowd back in his home state last week. As Politico reported, one attendee suggested that the congressman "...go back to Washington, and in the spirit of bipartisanship, grow a pair, sit down with Nancy Pelosi and say, 'Let's fix Obamacare.'"

## Office of Management and Budget cuts

The Trump administration's efforts to pare back the federal government are underway. Earlier this month, OMB Director Mick Mulvaney issued a memo that outlined government reform plans and directed agencies to reduce spending, evaluate employee productivity, and eliminate duplicative work.

Most notably for healthcare, Mulvaney directed agencies to leverage technology and improve business processes. In many cases, agencies such as the Centers for Medicare and Medicaid Services find their potential limited by their own technological infrastructure. The administration hopes to eliminate or reform programs that are no longer operating effectively, instead of layering expensive temporary patches on top of problematic programs.

For health IT in particular, pay attention to the role of the Office of the National Coordinator in the marketplace. As with most technological industries, the electronic health record industry has evolved since the creation of the ONC and many of its programs. The original iPhone that was released in 2007 is a long way from today's iPhone 7. Yet most of the health IT products of today look and feel like they belong in 1990.

So what will the administration's mandate mean for the regulations that have shaped the growth and use of EHRs? Healthcare is the only data and technology-driven industry where the government influences how products are built and used in the private sector.

To increase quality patient outcomes while lowering costs, innovators need room to build products that respond to market demands instead of compliance with a set of government mandates. It's not too much of a stretch to think that Mulvaney's streamline process could bring us closer to that desired state.

## Keeping the government running

The current continuing resolution (CR), a type of legislation that allocates funding to government agencies and keeps the government running, expires on April 28. That means Congress has four legislative days to create a funding solution for the remainder of the 2017 fiscal year.

The solution may be a temporary resolution that only lasts until early May – followed by a separate resolution for the rest of the fiscal year. Expect a full plan in place by early May with a focus on reducing spending for certain agencies, such as the National Institutes of Health.

Fiscal year (FY) 2017 wraps up in the next few weeks, but the wrangling over money won't end. Conversations about FY2018 appropriations start almost immediately following the 2017 solution.

We said it back in January at the start of the 115th Congress and the new administration: Buckle up!

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