



## Health Policy Briefing

January 19, 2021

### President Trump Impeached For the Second Time

The House of Representatives acted to impeach President Trump last Wednesday, making him the first U.S. president to be impeached more than once. The four-page impeachment resolution includes a single article accusing the President of high crimes and misdemeanors for “Incitement of Insurrection,” and details the events surrounding the January 6 violence at the Capitol building. After about three hours of debate, the House voted to approve H.Res.24 by a vote of 232-197. It was supported by all Democrats and 10 Republicans, including Liz Cheney (R-Wyo.), the third-ranking GOP leader in the House. The vote marked the most bipartisan group of lawmakers to ever impeach a U.S. president.

Prior to the vote on impeachment, the House passed H.Res.21, which called on Vice President Mike Pence to immediately invoke the 25th Amendment and remove President Trump from office. The resolution cites three attempts by Trump to intervene in the presidential election vote counting and certification process. The resolution was adopted by a vote of 223-205. In a letter to House leadership sent shortly before the chamber approved H.Res.21, however, the Vice President said that he would not invoke the 25th Amendment and asserted that the nation needed to heal after the attack on the Capitol. He urged lawmakers to “avoid actions that would further divide and inflame the passions of the moment.”

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Senate to conduct a trial remains unclear, it is not expected to begin before Joe Biden's inauguration on Wednesday. Senate Republican leader Mitch McConnell (R-Ky.) rejected a push to convene the chamber in an emergency session before the Senate reconvenes on January 19. In a letter to GOP colleagues, McConnell stated "There has never been any chance that any fair or appropriate trial would conclude before President-elect Biden is sworn in. In light of this reality, I believe it will serve our nation best if both Congress and the executive branch spend the next seven days completely focused on facilitating a safe inauguration and an orderly transfer of power to the incoming Biden administration."

The Senate trial process will be triggered when the article of impeachment is sent to the Senate. While House Speaker Nancy Pelosi (D-Calif.) signed the article of impeachment shortly after it was passed by the House last Wednesday, she may refrain from sending it to the Senate so as not to interfere with Biden's first 100 days in office. This would allow the Senate time to confirm Biden's cabinet nominees and begin work on his legislative priorities, including coronavirus stimulus legislation. The President-elect expressed hopes that the chamber would not entirely set aside work on the new administration's agenda while carrying out their responsibilities with respect to the impeachment trial and has proposed that the Senate bifurcate its schedule to ensure that nominees can be confirmed and a COVID-19 relief bill can be passed. Biden said that he is waiting to hear from the Senate parliamentarian on whether such an option is possible. Historically, all 100 senators would need to agree to conduct any other work concurrently with the trial.

Pelosi has named the impeachment managers, led by Rep. Jamie Raskin (D-Md.), who will serve as prosecutors during the impeachment trial. Two-thirds of the Senate - 67 votes - would be needed to convict Trump. Several Senate Republicans have sharply criticized Trump's actions, including McConnell. This would be the first presidential impeachment trial to extend beyond the president's time in office, though past precedent suggest that the move is permissible. If Trump is convicted, the Senate could take a second vote to bar him from seeking federal office ever again, a measure which would require only a simple majority of votes.

### ***Biden Details American Rescue Plan***

President-elect Joe Biden laid out the details of his \$1.9 trillion emergency relief plan - the ***American Rescue Plan*** - last week. The economic stimulus plan was developed by transition officials alongside Democratic lawmakers and their staff. The wide-ranging package aimed at containing the pandemic and supporting the economy includes increased direct payments to individual Americans, increased unemployment insurance benefits, and expanded medical and family leave. The package would send \$350 billion in emergency aid to state and local governments, and seeks additional funding for coronavirus containment efforts. It includes \$50 billion to increase COVID-19 testing capacity, \$30 billion to address supply shortages, and \$10 billion for domestic manufacturing of medical supplies. It proposes \$20 billion for the creation of a national vaccine distribution program that would provide free shots to all U.S. residents. The bill includes funding to expand the health workforce by 100,000 people to conduct outreach and contact tracing. It would also provide \$9 billion for the federal Technology Modernization Fund and \$690 million for the Cybersecurity and Infrastructure Security Agency. The package has been praised by House Speaker Nancy Pelosi (D-Calif.) and Senate Democratic leader Chuck Schumer (D-N.Y.), who have promised to work to pass the bill through both chambers so that it can be signed into law.

Biden's transition staff briefed aides to congressional Democrats last week on the new administration's plans to negotiate with the GOP on the initial stimulus package. The President-elect hopes that his COVID-19 relief package will gain the support of some Senate Republicans so that it does not require the use of budget reconciliation to pass. Reconciliation is a budgetary maneuver that would allow the legislation to pass with only a simple majority of votes in the Senate rather than the super-majority of 60 votes normally required to cut off debate and move to a vote.

Biden is expected to propose a second economic recovery plan in the coming weeks that would address his longer-term job creation and development goals.

### ***Biden Releases More Details on COVID Response and Vaccine Plan***

The Biden administration is planning an overhaul of the nation's COVID-19 vaccination program and will retire the Operation Warp Speed (OWS) name. The vaccine program will be led by David Kessler, former commissioner of the Food and Drug Administration (FDA) who will serve as the chief science officer of Biden's COVID response. Kessler will replace Moncef Slaoui, a leader of OWS, and will be responsible for ensuring vaccine access, developing an antiviral program, and building sustainable manufacturing capabilities. President-elect Joe Biden is planning to sign executive actions focused on the coronavirus pandemic during his second day in office. The actions will reportedly cover ways to help schools and businesses reopen safely, expand testing, protect workers, and establish clearer public health standards. The new administration is also expected to announce a \$1 billion national ad campaign aimed at addressing vaccine hesitancy. It would include awareness initiatives as well as paid media to promote the nation's inoculation efforts. Biden's goal is to administer 100 million vaccines during his first 100 days in office. The incoming administration's vaccination plan includes new immunization sites and mobile clinics and increased funding to states to administer the vaccine to Medicaid patients.

### ***Companies Review Political Contributions Following Violence at Capitol***

The U.S. campaign finance system is starting to experience the repercussions of the insurrection at the Capitol by supporters of President Trump. Major firms, including Amgen, the Biotechnology Innovation Organization (BIO), UnitedHealth Group, and Gilead Sciences have decided to pause or halt all political contributions in light of the recent challenges to the presidential election results by lawmakers in Congress. The companies plan to reexamine their role in American politics and review their political donations. Other organizations, such as the American Hospital Association, Blue Cross Blue Shield, Cigna, PhRMA, and Eli Lilly are only stopping donations to those Republicans who voted against President-elect Joe Biden's certification. Additionally, the Lincoln Project plans to launch an ad campaign in the coming days shedding light on those companies and their executives who donate to lawmakers that voted to reject the election results. Sen. James Lankford (R-Okla.) has already acted to issue an apology to Black Tulsans for his role in questioning the presidential election results. He said that he did not realize that his actions were "seen as casting doubt on the validity of votes coming out of predominantly Black communities."

### ***More Resignations Follow Insurrection at Capitol***

U.S. Department of Health and Human Services (HHS) Secretary Alex Azar submitted a letter of resignation to the White House on Friday. Azar noted the deadly riot at the Capitol that took place on January 6 in his [letter](#), an event that he believes tarnished the Trump administration's accomplishments. Centers for Medicare and Medicaid Services (CMS) Administrator Seema Verma similarly announced that she would resign her position effective January 20. Earlier in the week, Agency for Healthcare Research and Quality (AHRQ) Director Gopal Khanna submitted his resignation to Secretary Azar in response to the riot on Capitol Hill.

### ***More Lawmakers Test Positive for COVID***

Rep. Bonnie Watson Coleman (D-N.J.) has tested positive for COVID-19. Coleman is a lung-cancer survivor. She believes she was exposed to the virus after sheltering with other lawmakers during the storming of the U.S. Capitol, at which time a number of her colleagues and their staff refused to wear masks. She had previously received the first dose of the Pfizer/BioNTech vaccine when it was made available to all Congress members. Reps. Brad Schneider (D-Ill.), Pramila Jayapal (D-Wash.), and Adriano Espaillat (D-N.Y.) also announced that they had received a positive test after sheltering in the same room during the lockdown with Republican colleagues who declined to wear masks. Espaillat recently received the second dose of the COVID-19 vaccine and acknowledged in his announcement that the effects of the vaccine take time to develop. In related news, the House of Representatives adopted a resolution last week that establishes fines for lawmakers who fail to comply with mask requirements on the House floor. The rule would establish a \$500 fine for first offenses and a \$2,500 fine for second offenses, directly deducting the fine from member pay.

### ***House Committee Membership Updates***

The Republican Steering Committee met last week to recommend new members for certain committees for the 117th Congress. Eight were selected to join the House Energy and Commerce Committee, including: Reps. Kelly Armstrong (R-N.D.), Dan Crenshaw (R-Texas), John Curtis (R-Utah), Neal Dunn (R-Fla.) -- a urologist, John Joyce (R-Pa.) -- a dermatologist, Debbie Lesko (R-Ariz.), Gary Palmer (R-Ala.), and Greg Pence (R-Ind.). The picks must still be ratified by the full GOP conference.

Reps. Kevin Hern (R-Okla.), Lloyd Smucker (R-Pa.) and Carol Miller (R-W.Va.) were recommended to join the House Ways and Means Committee. Ranking Member Kevin Brady (R-Texas) stated that lowering health care costs and making Social Security and Medicare more sustainable would be his top priorities for the panel.

House Appropriations Committee Ranking Member Kay Granger (R-Texas) announced her panel's subcommittee leadership for the 117th Congress. Rep. Jeff Fortenberry (R-Neb.) will lead the Agriculture-Food and Drug Administration panel, Rep. Tom Cole (R-Okla.) will lead the Labor-Health and Human Services-Education panel, and Rep. John Carter (R-Texas) will lead the Veterans Affairs panel.

### ***Timeline for New Democratic Senators To Be Sworn In***

Georgia officials are expected to certify the results of the recent Senate runoff election prior to President-elect Joe Biden taking office on January 20. The two seats were won by Democrats Raphael Warnock and Jon Ossoff, who defeated Republican incumbents David Perdue and Kelly Loeffler. It is unclear how quickly the two new lawmakers could be seated in the Senate chamber. California Secretary of State Alex Padilla, who has been tapped to replace Vice President-elect Kamala Harris in the Senate, is expected to be sworn in after Biden and Harris take the oath of office on Inauguration Day. Once the Georgia contests are certified and Harris is sworn in as Vice President, Chuck Schumer (D-N.Y.) will take over as Senate Majority Leader.

### ***Wyden Previews Agenda for Finance Committee***

Incoming Senate Finance Committee Chair Ron Wyden (D-Ore.) has begun previewing his agenda for the panel during the 117th Congress. Wyden has said that he plans to build off of the bipartisan drug pricing package he developed last year with Sen. Chuck Grassley (R-Iowa), which would cap drug costs for Medicare beneficiaries and require manufacturers pay rebates for Medicare Part B and Part D drugs and biologics whose prices increase faster than inflation. Wyden also hopes to work with House Democrats on legislation that would allow the government to negotiate Medicare drug prices. He noted that the use of budget reconciliation remains under consideration. Wyden plans to reintroduce legislation that would prevent manufacturers from raising the price of their COVID-19 vaccines by creating an inflation rebate for Medicare and Medicaid based on the vaccine price negotiated between the federal government and the pharmaceutical company. Wyden is also expected to push to expand health care coverage and undo Trump administration efforts to undermine the Affordable Care Act (ACA).

Former Finance Committee Chair Grassley was term-limited as the Republican leader of the panel. He is expected to be replaced by Sen. Mike Crapo (R-Idaho), who has not yet outlined his policy priorities. Crapo voted against the Wyden-Grassley drug pricing measure during the 116th Congress.

### ***Wyden/Grassley Release Findings from Insulin Investigation***

Sens. Wyden and Grassley have released the results of their bipartisan investigation into insulin price increases after nearly two-years of fact finding. The Senate Finance Committee also [released](#) more than 1,700 pages of documents containing internal emails, contracts, and presentations that served as the basis of the investigation. The documents show that companies – Sanofi and Novo Nordisk in particular – raised their prices around the same time without making significant changes to the medicine itself.

### ***Ways and Means Dems Release Materials on Health Equity***

Democrats on the Ways and Means Committee have released a new report and legislative framework detailing how the panel will work to achieve health and economic equity and address the role that racism, ableism, and other social, structural, and political determinants play in perpetuating health and economic inequity in the U.S. The report, [“Something Must Change: Inequities in U.S. Policy and Society,”](#) provides key context for members’ legislative priorities and informs the framework, [“A Bold Vision for a Legislative Path Toward Health and Economic Equity,”](#) which outlines a policy agenda for the 117th Congress. The health equity pillars contained in the framework are:

- Adaptable, Accessible Technologies and Modernized Infrastructure
- Appropriate, Adequate, and Trusted Workforce
- Affordable, Comprehensive, and Accessible Health Care
- Support to State and Local Governments for Maximum Efficiency of Resources

### ***House Democrats Condemn Rule Changing Federal Grant Regulations***

A group of House Democrats have issued a [statement](#) condemning a recent proposal from the U.S. Department of Health and Human Services (HHS) that they argue would make it easier for health care providers to deny services to patients based on their religious beliefs. House Oversight and Reform Committee Chair Carolyn Maloney (D-N.Y.), House Energy and Commerce Committee Chair Frank Pallone (D-N.J.), House Ways and Means Committee Chair Richard Neal (D-Mass.), and House Education and Labor Committee Chair Bobby Scott (D-Va.) state that the rule would expand discrimination against LGBTQ+ people, religious minorities, and women in federal grant programs. They call on the rule to be rescinded immediately.

### ***Trump Recission Request Includes Cuts to Global Health***

President Trump has sent Congress \$27.4 billion in recission requests to consider before he leaves office. The proposed cuts are largely symbolic, as there is no chance the Democratic-controlled Congress will choose to act upon them. Among other items, the President proposes a \$4 billion cut for GAVI, a public-private partnership that promotes vaccination efforts in low-income countries, a more than \$2 billion cut to AIDS relief, a \$12.3 million cut to research on firearm mortality and injury prevention, and a \$13 million cut for the National Institutes of Health (NIH).

### ***Collins to Continue to Lead NIH Under Biden Administration***

Dr. Francis Collins will continue in his role as Director of the National Institutes of Health (NIH) under the Biden administration. Collins was first nominated to the position under President Barack Obama in 2009. The announcement makes Collins one of the few NIH directors to serve under three presidents, and the third-longest director of all time. Collins is a physician-geneticist who was selected to lead the Human Genome Research Institute in 1993.

## ***Woodcock and Sharfstein Under Consideration for Top Spot at FDA***

Janet Woodcock is under consideration by the Biden administration to become Commissioner of Food and Drugs. Woodcock has been at the Food and Drug Administration (FDA) since 1986 and recently served as the head of the Center for Drug Evaluation and Research (CDER). Former FDA Principal Deputy Commissioner Joshua Sharfstein is also under consideration for the post. Sharfstein worked at the FDA under President Barack Obama and is currently Vice Dean for Public Health Practice and Community Engagement at Johns Hopkins University's Bloomberg School of Public Health. Dr. Woodcock is expected to replace the current FDA Commissioner Stephen Hahn and become acting commissioner following Joe Biden's inauguration.

## ***President Signs CHIRA Into Law***

President Trump has signed into law the ***Competitive Health Insurance Reform Act*** (CHIRA), Public Law No: 116-327, which repeals the exemption from U.S. antitrust laws for health insurance companies. The McCarran-Ferguson Act of 1945 exempts the business of insurance from the federal antitrust laws intended to protect and promote fair competition. CHIRA will give the Department of Justice (DOJ) and the Federal Trade Commission (FTC) the authority to apply federal antitrust laws to anticompetitive behavior by health insurance companies, while continuing to allow for data sharing among health insurers within certain limits. The law will not affect or interfere with the authority of each state to regulate the business of insurance.

## ***Updates to Provider Relief Fund Reporting Portal Process***

The Provider Relief Fund (PRF) is a program run by the U.S. Department of Health and Human Services (HHS) that provides funds to certain providers to offset revenue losses and increased expenses due to the COVID pandemic. HHS has distributed funds primarily through Targeted (for specific entities) and General Distribution (through three different Phases of funding). If a provider received more than \$10,000 in aggregate from the PRF in 2020, then to avoid recoupment of those funds for most of the General and Targeted distributions, a provider must submit key data to HHS through the Reporting Portal. Previously, HHS had announced that this portal would be available as of January 15, 2021. On January 15, HHS updated its website to revise information on the [reporting elements](#), and clarify that the portal is open but ***only for registration***. Given the lack of full functionality to the Reporting Portal, the initial reporting deadline was removed (i.e., February 15 deadline for the first report). According to a new [FAQ](#), HHS will announce the window for submitting the first report. Recipients with funds unexpended after December 31, 2020 have six more months from January 1 – June 30, 2021 to use remaining funds, and then must submit a second and final report no later than July 31, 2021.

With respect to the reporting elements, per the language in the ***Consolidated Appropriations Act, 2021***, HHS is allowing entities to use one of three methods for reporting revenue loss: (1) difference between 2019 and 2020 actual patient care revenue; (2) difference between 2020 budgeted and 2020 actual patient care revenue, provided that the budget was established prior to March 27, 2020 and provided that additional documentation is submitted; and (3) any reasonable method for calculating lost revenue provided that additional information is submitted and recognizing that this option will trigger an increased likelihood of an audit, along with additional timelines if HHS determines that the methodology is not reasonable. Further, if recipients did not expend PRF funds in full by the end of calendar year 2020, then the calculation related to revenue losses are different from 2020 and are not to exceed the difference between: (1) 2019 Quarter 1 to Quarter 2, and 2021 Quarter 1 to Quarter 2 actual revenue; or (2) 2020 Quarter 1 to Quarter 2 budgeted revenue, and 2021 Quarter 1 to Quarter 2 actual revenue. In addition, the document updates information related to reporting responsibility of parent organizations and their subsidiaries.

With respect to the new [Reporting Portal](#), HHS has issued a series of [FAQs](#) and a [Registration User Guide](#). According to those documents, registration should take approximately 20 minutes and must be completed within one session.

As a reminder, PRF Reporting Entities that expended \$750,000 or more in aggregated federal financial assistance during their fiscal year (including PRF payments and other federal financial assistance) are subject to Single Audit requirements,

as set forth in the regulations at 45 CFR 75.501. Reporting Entities must indicate if they are subject to Single Audit requirements during the current fiscal year, and if yes, whether the auditors selected PRF payments to be within the scope of the Single Audit (if known at the time the Reporting Entity submits report).

### ***Democrats Expected to Use CRA to Overturn Trump Midnight Rules***

The Congressional Review Act (CRA) provides Congress with a powerful tool to strike regulations finalized under President Trump toward the end of his administration. Certain rules that are finalized within 60 legislative days of the end of a Congressional session can be nullified legislatively during the first 75 legislative days of the new Congress. The CRA requires both houses of Congress to pass a joint resolution of disapproval – requiring a simple majority vote. The resolution would then be sent to the President for signature. If the President signs the disapproval resolution, the entire rule will no longer have effect, would be treated as though it had never been in effect, and the issuing agency would be prohibited from issuing a rule that is “substantially the same” as the nullified rule. Disapproval resolutions are considered under normal procedures in the House; once a disapproval resolution is introduced in the Senate, committees have 20 calendar days to act. After that period, a petition signed by 30 senators can force a committee to discharge the resolution to the full Senate for a vote.

After the 2016 election, Republicans used the CRA to overturn 16 rules that had been issued under President Obama. Prior to that point, only one rule had been overturned using the 1996 law. Estimates indicate that there are as many as 1,313 rules published in the Federal Register as of January 6 that could qualify to be overturned through the use of the CRA. Notable examples of health-related regulations that may be under consideration for repeal by Democrats during the 117th Congress include:

- ***Securing Updated and Necessary Statutory Evaluations Timely (SUNSET)***. This rule requires an assessment of U.S. Department of Health and Human Services (HHS) regulations every 10 years to determine whether they are subject to review under the Regulatory Flexibility Act (RFA), which requires regular review of significant regulations. If a given regulation is subject to the RFA, the Department must review the regulation every ten years to determine whether the regulation is still needed and whether it is having the appropriate impacts. Regulations will expire if the Department does not assess and, if required, review them in a timely manner.
- ***Transparency and Fairness in Civil Administrative Enforcement Actions***. This rule would restrict HHS from using standards established by guidance documents from taking civil enforcement actions. HHS would be subject to certain procedural requirements for civil enforcement actions, including only apply publicly stated standards. The regulation was finalized without undergoing a proposed rule or notice and comment period, which could make it more likely to be challenged in court.
- ***Updates to State Innovation Waiver (Section 1332 Waiver) Implementing Regulations***. The rule would allow health insurers and health insurance brokers to directly enroll people in health plans, essentially permitting states to bypass the federal Affordable Care Act (ACA) exchange. Georgia has already been granted a waiver by the Centers for Medicare and Medicaid Services (CMS) to bypass the federal HealthCare.gov exchange beginning in 2023; this rule would allow other states to do the same starting in 2022. The final rule also codifies guidance published in 2018 that permits states to use ACA subsidies for short-term limited-duration health plans that do not have to comply with the ACA's coverage requirements.

Hart Health Strategies Inc. has created a primer with additional information on options for addressing concerns with a final rule, which can be found as an addendum to this newsletter.

### ***HHS Moves to Waive Regulations for Certain Drugs and Devices***

The U.S. Department of Health and Human Services (HHS) has released two policies aimed at increasing transparency and reducing unnecessary drug and medical device regulations. The first measure would require the Food and Drug Administration (FDA) to publish a report detailing the timeframes for generic drugs approvals, and whether FDA review was completed within the 180-day period required by law. The second policy would make permanent the FDA's decision to waive premarket review requirements for certain medical devices in response to the COVID-19 pandemic. The change would apply to seven types of surgical and examination gloves, as well as 83 different types of class two medical devices and one device that is not classified – equipment including sterilizers, digital imaging software, face masks, ventilators, thermometers, and medical gowns, as well as more complex products such as infusion pumps, digital devices for psychiatric disorders, and fetal monitoring devices. HHS hopes to avoid unnecessary delays in patient access caused by premarket review of these devices.

### ***HHS Lifts Restrictions on Buprenorphine Prescribing***

The U.S. Department of Health and Human Services (HHS) has announced new guidelines that will make it easier for physicians to prescribe buprenorphine to treat opioid addiction. HHS plans to eliminate the requirement that doctors obtain an “X” waiver, which requires them to complete nearly 24-hours of training before being allowed to prescribe the drug. Some health care providers have raised concerns that the prescribing requirements restrict access to the treatment in the midst of the opioid epidemic.

### ***Hart Health Strategies COVID-19 Resources***

Hart Health Strategies Inc. continues to update the following resources related to the coronavirus pandemic. Please remember to clear your cache to ensure you download the most recent documents.

- [Disaster Primer](#)
- [Federal Relief Overview](#)
- [Health Care Workers on the Front Lines](#)
- [Hospice and Palliative Care](#)
- [Nursing Resources](#)
- [Personal Protective Equipment](#)
- [Physician Provisions](#)
- [Re-Opening America](#)
- [Small Business Resources](#)
- [Small Business - Paycheck Protection Program](#)
- [Small Business – PPP FAQ](#)
- [State Resources](#)
- [Tax Provisions](#)
- [Telehealth Overview](#)
- [Testing](#)
- [Vaccines](#)

## Upcoming Congressional Committee Activity

*Senate Select Committee on Intelligence hearing to examine the expected nomination of Avril Haines to be Director of National Intelligence; 10:00 a.m., WEBEX; January 19*

*Senate Finance Committee hearing to consider the anticipated nomination of the Honorable Janet L. Yellen to Secretary of the Treasury; 10:00 a.m., 215 Dirksen Bldg.; January 19*

*Senate Homeland Security and Governmental Affairs Committee hearing to examine the expected nomination of Alejandro N. Mayorkas, to be Secretary of Homeland Security; 10:00 a.m., 342 Dirksen Bldg.; January 19*

*Senate Foreign Relations Committee hearing to examine the expected nomination of Antony J. Blinken, of New York, to be Secretary of State; 2:00 p.m., 301 Russell Bldg.; January 19*

*Senate Armed Services Committee hearing to examine the expected nomination of Lloyd J. Austin III, to be Secretary of Defense; 3:00 p.m., G50 Dirksen Bldg.; January 19*

*Senate Commerce, Science, and Transportation Committee hearing to examine the expected nomination of Peter Buttigieg, of Indiana, to be Secretary of Transportation; 10:00 a.m., 253 Russell Bldg.; January 21*

*Senate Veterans' Affairs Committee hearing to examine the expected nomination of Denis R. McDonough, to be Secretary of Veterans Affairs; 3:00 p.m., 106 Dirksen Bldg.; January 27*

## Recently Introduced Health Legislation

*H.R.238 — To amend title XXVII of the Public Health Service Act to require group health plans and health insurance issuers offering group or individual health insurance coverage to provide benefits for lung cancer screenings for certain individuals without the imposition of cost sharing; Sponsor: Rep. Boyle, Brendan F. [D-PA-2]; Committees: House - Energy and Commerce*

*H.R.253 — To expand and enhance existing adult day programs for younger people with neurological diseases or conditions (such as multiple sclerosis, Parkinson's disease, traumatic brain injury, or other similar diseases or conditions) to support and improve access to respite services for family caregivers who are taking care of such people, and for other purposes; Sponsor: Rep. Lee, Barbara [D-CA-13]; Committees: House - Energy and Commerce*

*H.R.254 — To amend the Public Health Service Act to create a National Neuromyelitis Optica Spectrum Disorder Consortium to provide grants, coordinate synergistic research, and targeted therapy with respect to the causes of, and risk factors associated with, neuromyelitis optica spectrum disorder, and for other purposes; Sponsor: Rep. Lee, Barbara [D-CA-13]; Committees: House - Energy and Commerce*

*H.R.259 — To amend the Public Health Service Act to address the increased burden that maintaining the health and hygiene of infants and toddlers places on families in need, the resultant adverse health effects on children and families, and the limited child care options available for infants and toddlers who lack sufficient diapers, and for other purposes; Sponsor: Rep. Lee, Barbara [D-CA-13]; Committees: House - Energy and Commerce; Ways and Means*

*H.R.265 — To amend title XI of the Social Security Act to eliminate the general Medicaid funding limitations for territories of the United States, and for other purposes; Sponsor: Rep. Sablan, Gregorio Kilili Camacho [D-MP-At Large]; Committees: House - Energy and Commerce*

*H.R.280 — To direct the Secretary of Health and Human Services to carry out a pilot program to test the feasibility and outcomes of integrating a substance use disorder and behavioral health treatment locator tool into the prescription drug monitoring programs of 5 eligible States; Sponsor: Rep. McKinley, David B. [R-WV-1]; Committees: House - Energy and Commerce*

*H.R.295 — To waive high deductible health plan requirements for health savings accounts; Sponsor: Rep. Budd, Ted [R-NC-13]; Committees: House - Ways and Means*

*H.R.311 — To provide for quality assurance of COVID-19 reimbursements and reporting; Sponsor: Rep. Posey, Bill [R-FL-8]; Committees: House - Energy and Commerce; Judiciary*

*H.R.312 — To provide a Federal income tax credit for State income taxes paid by individuals temporarily providing certain health or emergency services in the State, and to provide a corresponding reduction in Federal highway funds to the State; Sponsor: Rep. Posey, Bill [R-FL-8]; Committees: House - Ways and Means; Transportation and Infrastructure*

*H.R.315 — To amend the Coronavirus Aid, Relief, and Economic Security Act to extend the temporary suspension of Medicare sequestration, and for other purposes; Sponsor: Rep. Schneider, Bradley Scott [D-IL-10]; Committees: House - Budget*

*H.R.316 — To direct the President to appoint a Medical Supplies Response Coordinator to coordinate the efforts of the Federal Government regarding the supply and distribution of certain supplies and equipment relating to COVID-19; Sponsor: Rep. Schneider, Bradley Scott [D-IL-10]; Committees: House - Energy and Commerce; Financial Services*

*H.R.317 — To amend the Public Health Service Act to establish a health insurance Federal Invisible Risk Sharing Program; Sponsor: Rep. Schweikert, David [R-AZ-6]; Committees: House - Energy and Commerce*

*H.R.318 — To amend title XVIII to provide coverage and payment for certain tests and assistive telehealth consultations during the COVID-19 emergency period, and for other purposes; Sponsor: Rep. Schweikert, David [R-AZ-6]; Committees: House - Energy and Commerce; Ways and Means*