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## Hatch Statement at Finance Hearing on the CHRONIC Care Act

WASHINGTON – Senate Finance Committee Chairman Orrin Hatch (R-Utah) today delivered the following opening statement at a hearing to examine the Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act of 2017 and ways to improve health outcomes for patients living with chronic illnesses:

I'd like to welcome everyone to this morning's hearing on bipartisan Medicare policies to improve care for patients with chronic conditions.

It was almost exactly two years ago today that we formed a bipartisan working group co-chaired by Senators Isakson and Warner to work on legislation to address these issues.

That working group spent many months listening to stakeholders in the health care community – both in person and through more than 850 formally submitted comments.

In December of 2015, the working group released a comprehensive policy options document.

In October of last year, we issued a legislative discussion draft. Soon after that, CMS finalized four of our policy proposals in its 2017 Medicare Physician Fee Schedule Rule. And, two provisions from our discussion draft were included in the 21st Century Cures Act, which President Obama signed into law this past December.

In other words, several of the working group's policies have already been enacted, and we're working to get the rest signed into law and fully implemented.

Toward that end, we introduced the latest version of the CHRONIC Care Act – the bill that encompasses the working group's proposals – in April. The legislation currently has 17 bipartisan cosponsors and has been endorsed by numerous organizations in the health care community.

Today's hearing is the latest step in our efforts. The next step will come later this week, as we've noticed a markup for Thursday morning.

I want to thank Ranking Member Wyden for his work on this matter. His passion for improving care for those with chronic conditions has been a driving force behind this effort.

And, of course, I want to thank Senators Isakson and Warner, who have worked tirelessly to lead our working group. Through their efforts, the committee has not only learned about the burden imposed on Medicare patients living with chronic conditions, but also identified new policies to improve care coordination, increase value, and lower costs in the Medicare program without adding to the deficit.

Today's hearing will provide us with an opportunity to examine these policies more extensively so we can better understand how they will help patients and enable providers to improve care and produce better outcomes.

The bill includes a number of policies that would improve care for the chronically ill through increased use of tele-health by giving Medicare Advantage plans and certain Accountable Care Organizations enhanced flexibility to target tele-health services to Medicare patients with chronic conditions.

Senators Schatz and Wicker have been instrumental in this particular effort and I am pleased to have them here with us to talk about how the CHRONIC Care Act advances their policy goals.

I would be remiss if I did not also recognize the Finance Committee members who have joined Senator Schatz and Senator Wicker's efforts to promote the increased use of tele-health services. In that regard, we appreciate the leadership of Senators Thune, Cardin, and Warner on these matters.

While many stakeholders offered key advice on tele-health policy, I want to thank the fine institutions in Utah for their help, specifically on the "tele-stroke" policy. Specifically, I want to recognize Dr. Jenny Majersik and Dr. Nicholas Johnson at the University of Utah as well as Dr. Kevin Call with Intermountain Healthcare. I appreciate their willingness to share their experience and expertise using technology to promptly diagnose individuals presenting stroke symptoms, and I look forward to hearing more on this particular aspect of tele-health here today.

Of course, our bill goes beyond tele-health, making improvements for beneficiaries who receive care across the Medicare spectrum, including fee-for-service, Accountable Care Organizations, and Medicare Advantage.

We have a panel of recognized experts here before us today to discuss all of these issues and I want to welcome each of our distinguished witnesses.

Obviously, I'm well aware that there are some contentious debates going on in the health care space these days and there and no shortage of political and partisan points that people would like to make in a venue like this. However, for today's hearing, I sincerely hope that we can maintain the bipartisan spirit that has driven our efforts on the CHRONIC Care Act. Toward that end, I respectfully ask that members of the committee focus their questions on the policy areas specifically addressed in the bill.

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