POLICY & PRACTICE

Musculoskeletal Disease Legislation

With an eye to the aging population, members of Congress are seeking to raise awareness of musculoskeletal diseases. Rep. Hilda L. Solis (D-Calif.) and Rep. Michael C. Burgess (R-Tex.), both members of the House Energy and Commerce Committee's subcommittee on health, recently introduced the "Access to America's Orthopedic Services Act of 2008." The bill (H.R. 6478) would direct the U.S. Department of Health and Human Services to conduct public education campaigns on musculoskeletal health and require data collection on the level of musculoskeletal research funding and the number of new investigators entering the musculoskeletal research field. The bill also would direct the Agency for Healthcare Research and Quality to issue recommendations for a cost-effective method to measure bone density. "The burden of musculoskeletal diseases and conditions has a much deeper impact on the nation's health care system than many realize," Dr. David A. Halsey, chair of the council on advocacy for the American Association of Orthopaedic Surgeons, said in a statement. "In order to fully address this impact and ensure America's access to orthopedic services, we must first identify and address gaps in musculoskeletal health services and raise awareness about the importance of educating the public on these debilitating diseases."

Follow-On Biologics May Be a Deal

Establishing an abbreviated regulatory pathway for approval of follow-on biologic drugs could reduce total national spending on biologics by $25 billion or 0.5% over the next 10 years, according to a Congressional Budget Office (CBO) estimate based on provisions proposed as part of the "Biologics Price Competition and Innovation Act of 2007" (S. 1695), which is currently pending in Congress. The legislation would authorize the Food and Drug Administration to create a special process for approval of biologic drugs that are highly similar to or interchangeable with already licensed products. Under the bill, a follow-on biologic would be awarded 1 year of market exclusivity and 12 years of exclusivity for the original biologic product. While the estimate shows savings from the establishment of a follow-on biologic approval process, it is essential to ensure incentives for continued biomedical innovation, according to the Biotechnology Industry Organization. Without incentives for innovation, the follow-on initiative could produce relatively minor savings as a percentage of overall health care spending.

CMS Issues PQRI Payments

Physicians who successfully reported quality measures to Medicare in 2007 as part of the Physician Quality Reporting Initiative should have received their bonus payments in August. Officials at the Centers for Medicare and Medicaid Services recently announced that they had paid out more than $36 million in bonuses to physicians and other health professionals as part of PQRI. Of the approximately 109,000 health professionals who reported data on Medicare services provided during July-December 2007, more than 56,700 met the reporting requirements and will be receiving bonus checks. The average bonus paid to an individual provider was more than $600, and the average bonus for a physician group practice was more than $4,700. The largest payment to a physician group practice was more than $205,700, according to the CMS. "These payments to physicians for participating in the PQRI are a first step toward improving how Medicare pays for health care services," Kerry N. Weems, acting administrator, said in a statement. Under PQRI, physicians can earn bonus payments of up to 1.5% of their total allowed Medicare charges by successfully reporting quality data for Medicare services provided from July to December 2007. In addition to the bonus payments, physicians and other health professionals can also start accessing confidential feedback reports on their performance. More information on the program is available at www.cms.hhs.gov/PQRI.

Pharmacies, PBMs Merge Networks

RxHub, founded in 2001 by the nation's three largest pharmacy benefit managers, and SureScripts, formed the same year by the National Association of Chain Drug Stores and the National Community Pharmacists Association, announced that they will consolidate their operations, forming a single, secure, nationwide network for e-prescriptions and the exchange of health information.

—Mary Ellen Schneider

INDEX OF ADVERTISERS