

Legislative Summary: America's Affordable Health Choice Act of 2009

July 15, 2009

The Health care reform legislation introduced by the House of Representatives on July 14 includes several provisions of interest to ASHP members.

Workforce

The bill would create the Advisory Committee on Health Workforce Evaluation and Assessment. The committee would report to the Secretary of Health and Human Services (HHS) about issues related to the supply, diversity and distribution of the health care workforce. Among the members of this permanent committee would be a representative of each of the health professions within the workforce. The bill defines health care workforce to include pharmacists.

The bill would also call for increased accountability for approved medical residency training by requiring a Government Accountability Office evaluation of medical residency programs, including primary care and "other specialty" residencies, based upon certain criteria that include the degree to which residency programs foster multidisciplinary team-based models of care. ASHP is currently obtaining clarification from Congress on whether that requirement would apply to specialized pharmacy residency programs.

Finally, the Secretary of HHS would establish an interdisciplinary care training program to award grants that test, develop, and evaluate health professional training programs (including continuing education) designed to promote:

- a. The delivery of health services through interdisciplinary and team-based models, which may include patient-centered medical home models, medication therapy management models, and models integrating physical, mental, or oral health services; and
- b. Coordination of the delivery of health care within and across settings, including health care institutions, community-based settings, and the patient's home.

ASHP is lobbying to have an amendment added to the bill that restores funding for [PGY2 residency programs](#).

Transitions of Care

Hospitals would receive payment for hospitals for transitional care activities, including offering a summary of care and medication orders upon discharge.

Medical Home

A community-based medical home model would be created using non-profit community-based or state based entities staffed by community health workers, including nurses or other non-physician providers. The community health workers would perform chronic care management activities such as teaching self-care skills for managing chronic illnesses, transitional care services, care plan setting, medication therapy management services for patients with multiple chronic diseases, and helping beneficiaries find health care and community-based resources in their local area.

ASHP will continue [advocating](#) that pharmacists be included as non-physician providers under the medical home model and are well positioned to perform medication therapy management services called for under the bill.

Legislators will debate the bill's provisions during hearings of the Ways and Means, Energy and Commerce, and the Education and Labor committees of the House before the entire House of Representatives votes on the bill.