

# HEALTH CARE BRIEF: Bill to Ban Life-Year Metric Faces Floor Vote

By Jalen Brown, Jeannie Baumann, and Nyah Phengsitthy | February 5, 2024 6:17AM ET

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The House is preparing its first floor vote this year on health care related legislation, which would implement a federal ban on measuring a drug's effectiveness by weighing how many years the medicine adds to a person's life.

The House Rules Committee has scheduled a [meeting](#) today at 4 p.m. on ([H.R. 485](#)), almost a year after the Energy and Commerce Committee [advanced the bill](#) along party lines. The Rules deliberation marks a key step before putting the bill up for a floor vote, which Majority Leader Steve Scalise has teed up on [this week's calendar](#).

The bill would prohibit the use of Quality-Adjusted Life Years, or QALYs, into coverage and payment determinations under federal health programs. QALYs have been [controversial](#), and the Medicare agency has said it [will not use the metric](#) as part of its landmark drug price negotiations.

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Photographer: Al Drago/Bloomberg  
Energy and Commerce Chair Cathy McMorris Rodgers (R-Wash.)

Energy and Commerce Chair Cathy McMorris Rodgers (R-Wash.) has [long opposed QALYs](#) and has made moving the bill a priority. Patient groups like the Cancer Support Community support the bill and Rodgers' argument that QALYs discriminate against patients with chronic diseases or disabilities.

"What they are privileging are people who are younger, healthy, and may not have a disability, a chronic condition, or any other type of situation or illness that may 'impact their expected length of life,' or quality of life," Daneen Sekoni, vice president of policy and advocacy at cancer group, said.

Democrats on the committee opposed the bill last year due to concerns over including the phrase "and similar measures" in its language, which they found overly broad and believe could lead to a ban on non-controversial alternative metrics.

The Congressional Budget Office expressed uncertainty about the definition of "similar measures" and the range of metrics lawmakers could restrict through the bill. This ambiguity could diminish the states' bargaining power in securing drug discounts and complicate the process of determining formulary placements, [according to the CBO report](#).

- [BGOV Bill Summary: H.R. 485, Health-Care Value Measures](#)

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**This Week's Hearings:**

- **Federal science agencies' use of AI** will be [discussed](#) tomorrow by a House Science, Space, and Technology subcommittee.
- **Oversight of the FDA's foreign drug inspection program** will take place tomorrow during a House Energy and Commerce subcommittee [hearing](#).
- **The promises and pitfalls of AI in health care** are the focus of a Thursday Senate Finance Committee [hearing](#).
- **Chronic drug shortages** will be [discussed](#) Thursday by the House Ways and Means Committee.
- **High prescription drug prices** are the topic of Thursday's Senate Health, Education, Labor, and Pensions committee [hearing](#).
- **See more upcoming hearings** on [BGOV's calendar](#).

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**A bipartisan Senate working group focused on the federal 340B Drug Discount Program** published [draft legislation](#) Friday that would resolve some disputes over the program's operations, Nayh Phengsitthy reports. The draft legislation addresses changes for rules regarding contract pharmacies, who can qualify for discounted drugs, and oversight plans for the Health Resources and Services Administration.

The discount program allows covered entities — such as qualifying safety-net hospitals, clinics, and other providers — to buy outpatient drugs at discounted prices from manufacturers participating in Medicaid to offset rising drug prices. Recent concerns have grown over the program's integrity, how discounts are used, and where they're provided. Pharmaceutical companies in recent years have also pulled back on distributing discounted drugs to some covered entities.

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**A White House push to financially penalize medical providers** who impede access to patients' health records could exacerbate health disparities rather than improve them, physicians say.

The proposal would kick-start enforcement of information blocking restrictions and would leave Medicare providers financially on the hook for engaging in behaviors like charging excessive fees to access health records, using proprietary data formats to lock customers into a health network, or limiting the length of a time a petitioner can access health information. The action comes as the Biden administration ramps up its effort to improve electronic data sharing and ensure that patients have easy access to their medical records. [Read more](#).

**A mental health parity rule could lead to higher costs and poorer quality** of employer-sponsored mental health coverage, according to advocates representing companies and health plans. The Biden administration plans to finalize the proposal later this year. [Read more](#).

**The Biden administration is optimistic about progress on the fentanyl crisis** after President Xi Jinping gave new instructions to Chinese officials, a State Department official said, but more needs to be done to stem the flow of the deadly synthetic opioids into the US. [Read more.](#)

**Groups that help Idaho teens get legal abortions in other states** can operate while an appeals court considers the legality of a state law that prohibits their conduct. [Read more.](#)

**The CDC is opening its first regional office** in a developed nation, with the post in Japan set to enhance its work with allies on disease monitoring amid rising geopolitical tensions with China. [Read more.](#)

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