CALIFORNIA WATCH

KPCC: Awaiting Trump, Community Clinics Plan for an Uncertain Future
A lot of people who have benefited from the Medi-Cal expansion are worried about losing their coverage, and the community clinics that serve many of them are concerned that they’ll have to cut back on some of their services. (Plevin, 12/12)

Fresno Bee: Repeal of Obamacare could Affect Millions on Medi-Cal
How health care is delivered to half the people in the San Joaquin Valley could be decided by a repeal of the ACA. President-elect Donald Trump and the Republican-led Congress want to replace Obamacare and reduce health care spending. And Medi-Cal is entwined in that discussion. (Anderson, 12/10)

Ventura County Star: Health CEOs in Ventura County Paid More than Obama
Gary Wilde gained $1.4 million in salary, bonuses, benefits and deferred compensation while leading the nonprofit Community Memorial Health System in 2015. Tax records filed in November show the health system paid annually over 12 years into a retirement fund for the 61-year-old CEO. The plan had reached more than $4.2 million by the end of 2015. Wilde says taxes have cut the number by more than half. The system Wilde leads is nearing the end of a $350 million hospital construction project funded by bonds and contributions solicited from the community. (Kisken, 12/10)

Ventura County Star: Hospital Flood Blamed on Plugged Pipe
A sewer pipe plugged by construction debris triggered a Wednesday flood that has pushed the opening date of a new wing at the Ventura County Medical Center into limbo. The backed-up pipe spewed torrents of water out of two sinks in what will be the emergency department of a replacement wing being built at the county-run hospital in Ventura. Joan Araujo, deputy chief director for the Ventura County Health Care Agency, said the pipe was plugged by a 3-inch wide device that shouldn't have been there. (Kisken, 12/9)

ADMINISTRATION NEWS

Kaiser Health News: Price Poised to Protect Doctors’ Interests at HHS
In picking Tom Price to be secretary of Health and Human Services, Donald Trump has chosen an orthopedic surgeon who in his congressional career, has loyally promoted the interests of the medical profession — its freedom and importantly, its financial interests. A conservative representing Georgia’s 6th District, Price sponsored a 2015 bill that would restrict efforts to reduce doctor payments for medical services. He cosponsored another bill that would have limited reports used by hospitals and regulators to perform background checks used to screen doctors before hiring them. (Jewett and Taylor, 12/12)

HEALTH LAW

Los Angeles Times: Trump and the GOP are Charging Forward with Obamacare Repeal, but Few are Eager to Follow
As they race to repeal large parts of the ACA, President-elect Donald Trump and congressional Republicans are leaving behind nearly everyone but their base voters and a handful of conservative activists. Not a single major organization representing patients, physicians, hospitals or others who work in the nation’s healthcare system backs the GOP’s Obamacare strategy. New polls also show far more Americans would like to expand or keep the healthcare law, rather than repeal it. (Levey, 12/12)
Reuters: **WHO Urges Trump to Expand Obamacare, Ensure Healthcare for All**
The World Health Organization (WHO) urged U.S. President-elect Donald Trump to expand Obamacare and ensure all Americans have access to healthcare. Trump takes office next month after promising to repeal outgoing President Barack Obama's signature healthcare policy which helped millions more Americans get medical insurance but has been a target of Republican attacks. (Nebehay, 12/9)

**PUBLIC HEALTH AND EDUCATION**

**NPR: Pets Help People Manage Serious Mental Illnesses**
Any pet owner will tell you that their animal companions comfort and sustain them when life gets rough. This may be especially true for people with serious mental illness, a study finds. When people with schizophrenia or bipolar disorder were asked who or what helped them manage the condition, many said it was pets that helped the most. (Ross, 12/9)

**Los Angeles Times: Personality Trait or Mental Disorder? The Same Genes May Weigh in on Both**
You don’t need fancy genome-sequencing or brain-imaging equipment to know that some of the people we know and love are just a little, well, out there. We used to call these people “worriers,” “creative types,” “eccentrics” or “loners.” Like the rest of us, they seem to have come into the world with some recognizably fixed personality settings: They’re friendly or moody or dreamy or disorganized. They’re just more extremely so. (Healy, 12/9)

**Los Angeles Times: Cooling Cap Helps Cancer Patients Preserve their Hair During Chemotherapy, Clinical Trial Shows**
It’s been one year since the FDA approved the first cooling cap system to help cancer patients preserve their hair during chemotherapy. A new clinical trial strengthens the case that caps really do reduce the risk of hair loss. Among 95 breast cancer patients who were randomly assigned to test a cap, 48 — or 51% — still had a good amount of hair after four cycles of chemotherapy. Meanwhile, among 47 control patients who did not use a cooling cap, none had hair after four rounds of chemotherapy. (Kaplan, 12/9)

**The Associated Press: New CDC Data Understate Accidental Shooting Deaths of Kids**
Government statistics released this week claiming that 77 minors in the U.S. were killed by unintentional gun discharges last year significantly underestimate the scope of an enduring public health problem. At least 141 deaths of minors were attributed to unintentional or accidental shootings in 2015 — 83 percent higher than what the Centers for Disease Control reported. (Foley, 12/9)

**WOMEN’S HEALTH**

**The New York Times: Abortion Foes, Emboldened by Trump, Promise ‘Onslaught’ of Tough Restrictions**
Christina Hagan, the youngest woman in the Ohio Legislature, received a surprise last week. The toughest piece of abortion legislation in the country — a bill she had championed for years — suddenly passed. The measure was long presumed dead. But now that Donald J. Trump is headed to the White House, the political winds have changed, and it passed with overwhelming majorities. (Tavernise and Stolberg, 12/11)
Los Angeles Times: Optimistic Women are Less Likely to Die Prematurely of Cancer or Heart Disease, Study Says
Having an optimistic outlook on life could help you live longer, according to a new study. Researchers at Harvard University found that among a group of 70,000 female nurses, the 25% who were most optimistic had a 31% reduced risk of mortality while they were being tracked compared with the 25% who were least optimistic. (Netburn, 12/9)

PHARMACEUTICALS

The New York Times: Wary Drug Makers Move to Fend Off Further Attacks under Donald Trump
If the nation’s pharmaceutical executives thought Donald J. Trump would grant them a reprieve from scrutiny over high drug prices, he made them reconsider that idea in the last few days. “I’m going to bring down drug prices,” he told Time magazine in an interview published on Wednesday. “I don’t like what’s happened with drug prices.” ... But unlike those other companies, many drug makers have already been taking steps in recent weeks to insulate themselves from future attacks. (Thomas, 12/9)

Stat: After EpiPen Controversy, Watchdog to Review Medicaid Rebates
A government watchdog agency is conducting three new reviews of the Medicaid Drug Rebate Program to determine the extent to which drug companies are properly paying required givebacks to the health care program. The move comes in the wake of an enormous controversy over EpiPens, the emergency allergy device sold by Mylan Pharmaceuticals. Under the Medicaid Drug Rebate Program, companies must accurately report — and pay — a rebate on drugs paid for by the agency. Mylan recently reached a $465 million settlement with the Justice Department for shortchanging Medicaid by not paying appropriate rebates, although the feds never confirmed the deal. (Silverman, 12/9)

EDITORIALS AND OPINIONS

Modern Healthcare: New Healthcare Reform Agenda Must Build on Gains Already Achieved
With the transition to a new administration well underway, the fate of the Affordable Care Act is weighing on everyone’s mind. We’ve all heard the rhetoric of repeal and replace, but what will a new system look like? One thing remains clear: The challenges haven’t changed. Healthcare costs continue to soak up budgets in families, states and the federal government. (Susan DeVore, 12/10)
California Watch: California Lawmakers Aim to Pay Dentists More to Treat Poor Patients
Legislation would raise payments for Denti-Cal providers, using revenue from the state tobacco tax recently passed by California voters. (Ibarra, 12/13)

San Jose Mercury News: California’s Child Vaccination Law Faces another Legal Challenge
Opponents of a new California state law requiring nearly all schoolchildren to be fully vaccinated have mounted another legal challenge — this time, setting the science of immunization aside and focusing on constitutional rights. Under California’s child vaccine law, one of the strictest in the nation, parents are no longer allowed to skip required immunizations for their children based on personal or religious beliefs. The new rules, the plaintiffs argue, force families to choose between three constitutionally protected rights: making medical decisions for their children; bodily autonomy, and a public education. (Murphy, 12/12)

Administration News

Reuters: Trump Considering Dr. Scott Gottlieb to Head FDA
Dr. Scott Gottlieb, a partner at one of the world’s largest venture capital funds and a former deputy commissioner at the U.S. Food and Drug Administration, is being considered by President-elect Donald Trump to run the agency, according to sources close to the transition team. (Clarke, 12/12)

Atlanta Journal-Constitution: Tom Price’s Promotion Sparks a Medical Backlash
One of the first groups that rallied to Georgia Rep. Tom Price’s defense when he was tapped as Donald Trump’s new health secretary is also one of his most stalwart allies: The American Medical Association. And their strong endorsement has provoked a backlash from some doctors. More than 5,500 healthcare providers have signed a petition penned by a trio of physicians – Drs. Jane Zhu, Navin Vij and Manik Chhabra, that contends the “AMA has not aligned with the well-being of patients.” They called their piece “The AMA Does Not Speak for Us.” (Bluestein, 12/12)

Capitol Hill Watch

Reuters: McConnell Will Not Give Timeline for Obamacare Replacement
U.S. Senate Majority Leader Mitch McConnell said on Monday the Senate will move to repeal President Barack Obama’s healthcare law shortly after Jan. 1, but declined to give a timeline for a plan to replace it. (Zengerle, 12/12)

Health Law

Kaiser Health News: Without ACA Guarantees, 52 Million Adults Could Have Trouble Buying Individual Plans
The researchers noted that a large share of those individuals likely get their insurance through their employers, which does not take into consideration prior health issues. But if the health law were repealed and those people lost their health insurance for any reason, they could face problems. (Rodriguez, 12/13)
MARKETPLACE

Reuters: U.S. Seeks to Undercut Aetna CEO's Defense in Merger Fight
The U.S. Justice Department sought on Monday to knock down arguments by Aetna Inc's chief executive that Medicare Advantage competes with government insurance programs, making Aetna's proposed merger with Humana legal under antitrust law. Aetna CEO Mark Bertolini testified on Friday and returned to the witness stand Monday morning. The Justice Department sued to stop the merger in July. (Bartz, 12/12)

Modern Healthcare: CMS Cracks Down on Providers Steering Patients into Private Plans
The CMS has issued an interim final rule Monday that attempts to stop providers and organizations from steering patients eligible for Medicaid or Medicare into private insurance as a way to receive higher reimbursement rates. The rule issued Monday requires dialysis centers that help patients pay private insurance premiums either directly or through charities to clarify what plans in their region pay for and how that compares to Medicare or Medicaid. The notices must inform patients that some plans may not cover all costs typically covered by Medicare, such as necessary medical expenses for living donors. (Dickson, 12/12)

PUBLIC HEALTH AND EDUCATION

The New York Times: Rise in Infant Drug Dependence is Felt Most in Rural Areas
As the opioid epidemic sweeps through rural America, an ever-greater number of drug-dependent newborns are straining hospital neonatal units and draining precious medical resources. The problem has grown more quickly than realized and shows no signs of abating, researchers reported on Monday. (Saint Louis, 12/12)

WBUR: Expensive Problems: Study Links Early Childhood Brains to High Public Costs In Mid-Life
A new study suggests that your earliest years may be even more critical than previously thought: Your brain health before you're 3, it finds, may well predict how much you cost society in mid-life, including your health care bills. (Goldberg, 12/12)

The New York Times: One Weight-Loss Approach Fits All? No, Not Even Close
Dr. Frank Sacks, a professor of nutrition at Harvard, likes to challenge his audience when he gives lectures on obesity. "If you want to make a great discovery," he tells them, figure out this: Why do some people lose 50 pounds on a diet while others on the same diet gain a few pounds? Then he shows them data from a study he did that found exactly that effect. (Kolata, 12/12)

San Jose Mercury News: Original Fake News of Medicine: Drinking Eight Glasses of Water a Day
Drinking eight glasses of water a day is a health myth and it is one of the hardest to undo. It is the original fake news of medicine. How it began isn't really known, however some medical sleuthing published in the American Journal of Physiology in 2002 and in the British Medical Journal in 2007 suggested that it came from a 1945 Food and Nutrition Board recommendation that the body uses about 85 ounces of water a day. (Gunter, 12/12)
Los Angeles Times: E-Cigarette Use Falls among Teens for the First Time, Study Finds
For the first time, researchers are seeing signs that American teens may be turning away from electronic cigarettes. An annual survey involving thousands of middle and high school students from across the nation found that use of e-cigarettes — both experimentally and on a regular basis — declined in 2016 after reaching an all-time high in 2015. (Kaplan, 12/12)

The New York Times: One in 6 American Adults Say They Have Taken Psychiatric Drugs, Report Says
About one in six American adults reported taking at least one psychiatric drug, usually an antidepressant or an anti-anxiety medication, and most had been doing so for a year or more, according to a new analysis. The report is based on 2013 government survey data on some 242 million adults and provides the most fine-grained snapshot of prescription drug use for psychological and sleep problems to date. (Carey, 12/12)

WOMENS HEALTH

Patients with early breast cancer who are socially isolated have a higher risk of dying from their disease, a new study suggests. Women with fewer social ties — to friends, family, community and religious groups, as well as spouses or romantic partners — were 43 percent more likely to see their breast cancer return, 64 percent more likely to die from breast cancer and 69 percent more likely to die from any cause, according to a study published Monday in the journal Cancer. (Szabo, 12/13)

EDITORIALS AND OPINIONS

Sacramento Bee: Why California Has Most to Lose in Obamacare Repeal
California probably gained more than any other state from the Affordable Care Act, the federal health reform better known as Obamacare. Now, with the program facing an almost certain demise, the state and its low-income residents have the most to lose. (Daniel Weintraub, 12/12)
CALIFORNIA WATCH

California Healthline: How Would Repeal of the ACA Affect Californians' Health Coverage?
In almost every county across California, regardless of its political leaning, at least 1 in 10 people has health coverage because of Obamacare. And in some counties, almost one fifth of the population is eligible for insurance under the ACA, either through the expansion of Medi-Cal or Covered California. (Bartolone and Zuraw, 12/14)

Sacramento Bee: Covered California Officials, Advocates Urge People to Sign Up for Health Insurance
Ignore the political uncertainty swirling around Obamacare: If you want health insurance coverage in California starting Jan. 1, sign up this week. That's the message Tuesday from officials at Covered California, the state's official marketplace for the Affordable Care Act. They said about 139,000 new enrollees have signed up during the current open enrollment season, roughly the same as last year. In addition, 1.2 million who were previously enrolled have reupped their health coverage. (Buck, 12/13)

San Jose Mercury News: Auditor Blasts State Nursing Board for Investigation Delays
In a blistering report, the California state auditor warned the Board of Registered Nursing that its delays in resolving complaints against nurses accused of negligence involving patient injury or death pose a serious threat to others. Among the cases cited in the audit was a complaint alleging that a nurse caused a toddler's death by administering the wrong dose of medication. (Seipel, 12/13)

San Jose Mercury News: Santa Clara County Unveils 'Pay for Success' Mental Health Plan
More than a year ago, Santa Clara County embarked on its first "Pay for Success" project — a partnership geared toward permanently sheltering chronically homeless people — and Tuesday officials approved a similar plan to help those with severe mental disorders. "Partners in Wellness" is a plan aimed at getting 250 mentally ill people who use county services into more intensive outpatient care. The goal is to save money by helping mentally ill people stay out of emergency rooms and jails. (Kurchi, 12/13)

ADMINISTRATION NEWS

USA Today: Obama Signs $6.3 Billion Law for Cancer Research, Drug Treatment
President Obama signed a $6.3 billion bill to fund drug treatment, a precision medicine initiative and Vice President Biden's signature effort to "end cancer as we know it." In an emotional bill signing ceremony — likely the last one of this presidency — Obama signed the 21st Century Cures Act in a White House auditorium. The signing brought full circle Obama's State of the Union challenge to Congress to "surprise the cynics" by tackling some of the biggest health priorities facing the country. (Korte, 12/13)

CNBC: Obamacare Report Card Claims Next Year's Higher Premiums are 'One-Time Adjustment'
The Obama administration on Tuesday released a wide-ranging, positive report card on the Affordable Care Act, describing how Obamacare has driven down the rate of people without health insurance "to its lowest level in history," increased financial security and access for consumers who seek medical care, and bent the cost-curve of health-care spending. (Mangan, 12/13)
CAPITOL HILL WATCH

**Kaiser Health News: GOP’s Timetable for Getting Repeal to Trump may be Ambitious**

Republicans in Congress are so eager to repeal the federal health law that some have vowed to get a bill to President-elect Donald Trump’s desk on the day he takes the oath of office. “We will move right after the first of the year on an Obamacare repeal resolution,” Senate Majority Leader Mitch McConnell, R-Ky., told reporters at a news conference Monday. But could lawmakers introduce, pass and get a repeal measure to the new president in the 17 days between Jan. 3, when they convene, and Inauguration Day, Jan. 20? Not likely, say budget experts. (Rovner, 12/14)

**MARKETPLACE**

**Bloomberg: Anthem-Cigna Merger Goes to Judge for Ruling that could End Deal**

The first phase of the U.S. Justice Department’s lawsuit to halt Anthem Inc.’s planned takeover of rival insurer Cigna Corp. is in the hands of a federal judge after the government wrapped up its arguments Tuesday that the deal would harm competition in the national insurance market. U.S. District Judge Amy Berman Jackson in Washington will issue her decision on whether the combination of the companies risks higher costs for large employers around the country and should be blocked. She didn’t say when she would rule. (McLaughlin, 12/13)

**The Washington Post: After Years of Price Hikes, Eli Lilly Announces a Discount on Insulin**

Under pressure from politicians and patient groups, diabetes pharmaceutical giants have been taking action in recent weeks to limit the effect of rising insulin prices on patients. On Tuesday, Eli Lilly and Co. announced that, starting in January, patients who pay full retail price for insulin will be able to access a 40 percent discount. ... The Eli Lilly discount program will only help people without insurance or who are in the high-deductible phase of a health plan. But the action is part of a widening public discussion among drug companies in response to scrutiny of its pricing policies. (Johnson, 12/13)

**Chicago Tribune: Quest Data Breach Exposes Private Health Information of 34,000 Patients**

Quest Diagnostics Inc., a lab services company, is investigating an online data breach that exposed the test results and other personal information of 34,000 patients nationwide. The New Jersey-based company announced Monday that an "unauthorized third party" hacked into the MyQuest patient portal Nov. 26, accessing protected health information including name, date of birth, lab results and in some cases, phone numbers. It said the breach did not include Social Security numbers or credit card, insurance or other financial information. (Channick, 12/13)

**PUBLIC HEALTH AND EDUCATION**

**USA Today: White House Moves Quickly to Release Opioid Money**

With $500 million in hand to fight the opioid epidemic, White House officials are moving quickly to get that money flowing to the hardest-hit states—and pushing local officials to spend the new dollars on treatment above other addiction-related initiatives. (Shesgreen, 12/13)
The Washington Post: Where Opiates Killed the Most People in 2015
More than 33,000 people died of opioid overdoses in the United States last year. But speaking of an “opiate epidemic” is in some ways a misnomer. The latest data from the Centers for Disease Control and Prevention show that the country is in fact dealing with multiple opioid epidemics right now — each with a distinct geographic footprint. (Ingraham, 12/13)

The New York Times: Extensive Brain Defects Seen in Babies of Mothers with Zika
Babies born to Zika-infected mothers are highly likely to have brain damage, even in the absence of obvious abnormalities like small heads, and the virus may go on replicating in their brains well after birth, according to three studies published Tuesday. Many types of brain damage were seen in the studies, including dead spots and empty spaces in the brain, cataracts and congenital deafness. There were, however, large differences among these studies in how likely it was that a child would be hurt by the infection. (McNeil and Belluck, 12/13)

USA Today: 4 Million Americans Could Be Drinking Toxic Water and would Never Know
Tiny utilities - those serving only a few thousand people or less - don’t have to treat water to prevent lead contamination until after lead is found. Even when they skip safety tests or fail to treat water after they find lead, federal and state regulators often do not force them to comply with the law. USA TODAY Network journalists spent 2016 reviewing millions of records from the Environmental Protection Agency and all 50 states, visiting small communities across the country and interviewing more than 120 people stuck using untested or lead-tainted tap water. (Ungar and Nichols, 12/12)

WOMEN’S HEALTH

Capital Public Radio/KXJZ: Depressed while Pregnant? A Confusing Decision, but Choosing Treatment is Better than Not
More and more women of childbearing age in the United States are being diagnosed with and treated for depression. And pregnancy itself can come with an increased risk for serious mood disorders. At this point little is known about the effects of antidepressants on an unborn fetus. But many healthcare providers agree - the consequences of going off medication can be disastrous. (Budner, 12/13)

EDITORIALS AND OPINIONS

The Washington Post: Black Women Defy Trend of Declining Life Expectancies. What Explains this Miracle?
The results are in, the conclusion inescapable: Black women are exceptional, phenomenal even. The latest evidence is perhaps the most compelling: While the life expectancy for everybody else in the country declined last year, the black woman held her own. Ironic, isn’t it? White men, white women and black men took a hit, according a report last week by the Centers for Disease Control. As a result, the nation’s overall life expectancy has declined. (Courtland Malloy, 12/13)
Kaiser Health News: California Lawmakers Aim to Pay Dentists More to Treat Poor Patients
Lawmakers have introduced a bill aiming to improve Denti-Cal, the California's dental program for the poor — a program that was subject to a scathing independent audit earlier this year. The proposed legislation, mostly sponsored by Republicans, is among the first public bids for revenue from the statewide tobacco tax that voters approved in November. (Ibarra, 12/15)

California Healthline: Amid Sign-Up Surge, Covered California Extends Enrollment Deadline
Californians are signing up in higher numbers than they did last year for health plans sold on the state’s health insurance exchange, despite great uncertainty over the future of Obamacare. More than 25,000 new consumers chose new Covered California plans in just two days earlier this week, exchange officials said Wednesday. Because of the last-minute rush, Covered California officials have extended the enrollment deadline for coverage that begins January 1. Consumers now have until midnight on Dec. 17 to choose plans. Coverage purchased after this Saturday’s deadline will start either on February 1st or March 1st. (Bartolone, 12/15)

ADMINISTRATION NEWS

The Associated Press: FDA Denies Bid to Drop Some Warnings from Tobacco Pouches
U.S. health officials have rejected an attempt by a Swedish company to remove several health warnings from its smokeless tobacco pouches, though regulators left open the possibility for other labeling changes it seeks. The Food and Drug Administration announced Wednesday that it denied the request by Swedish Match to remove warnings about gum disease and tooth loss from its chewable pouches, called snus. It's the first decision of its kind handed down by the agency since it gained authority to review the relative risks of tobacco products in 2009. (12/14)

HEALTH LAW

Politico: Democrats Open to Replacing Obamacare
Senate Democrats will never vote to repeal Obamacare. But once the deed is done, a surprising number of them say they’re open to helping Republicans replace it. “If it makes sense, I think there’ll be a lot of Democrats who would be for it,” said Sen. Claire McCaskill (D-Mo.). As Republicans aim to make good on their years-long vow to quash Obamacare and replace it with their own health care vision, they'll have to do something Democrats were never able to: Bring members of the opposing party on board. (Everett and Haberkorn, 12/15)

The Washington Post: Sign-Ups for 2017 Affordable Care Act Health Plans Run Slightly Ahead of Last Year
The number of Americans signing up for 2017 health plans through HealthCare.gov is running slightly ahead of a year ago, even as President-elect Donald Trump and a Republican Congress prepare to dismantle the law that provides the coverage. Customers new to the ACA marketplaces account for just 25 percent of the enrollment so far, however, compared with almost 40 percent at about the same time last year, according to figures released Wednesday by federal health officials. (Goldstein, 12/14)
PUBLIC HEALTH AND EDUCATION

The Center for Public Integrity and The Associated Press: Drugmakers Push Profitable, but Unproven, Opioid Solution
Pilloried for their role in the epidemic of prescription painkiller abuse, drugmakers are aggressively pushing their remedy to the problem: a new generation of harder-to-manipulate opioids that have racked up billions in sales, even though there’s little proof they reduce rates of overdoses or deaths. More than prescriptions are at stake. Critics worry the drugmakers’ nationwide lobbying campaign is distracting from more productive solutions and delaying crucial efforts to steer physicians away from prescription opioids — addictive pain medications involved in the deaths of more than 165,000 Americans since 2000. (Perrone, Mulvihill and Whyte, 12/15)

The Center for Public Integrity and The Associated Press: Drugmakers Set to Gain as Taxpayers Foot New Opioid Costs
Critics say the answer pharmaceutical companies are pushing to address the ongoing opioid crisis boosts their profits while forcing taxpayers to shoulder the costs. Some drugmakers aim to replace ubiquitous painkillers such as Vicodin and Percocet with harder-to-abuse formulations that are patent-protected and command higher prices — a plan that could cost government-funded health programs hundreds of millions of dollars in higher medication expenses. (Whyte and Perrone, 12/15)

Kaiser Health News: In Light of Zika Findings, Stepped-Up Monitoring of Children’s Symptoms Urged
A series of studies released Wednesday shed a preliminary light on the Zika virus’ consequences for children infected in the womb. But, experts said, the findings also highlight additional challenges: identifying affected babies and making sure they receive needed follow-up care as they grow. That task could prove complicated, especially as new data emphasizes the virus may cause more damage than previously thought. (Luthra, 12/14)

The Washington Post: Anesthesia May Harm the Brains of Children Under 3, FDA Warns
The Food and Drug Administration warned Wednesday that repeated or lengthy use of general anesthesia or sedation drugs for children younger than 3 or pregnant women in their third trimester may affect youngsters' developing brains. The agency, which said its warning is based on a comprehensive analysis of the latest research, issued a “drug-safety communication” to inform health-care providers, parents and pregnant women about the risks of using the drugs repeatedly or for more than three hours at a time. It also ordered manufacturers to add warnings to their products' labels. (McGinley, 12/14)

PHARMACEUTICALS

The Associated Press: Federal Prosecutors Accuse Execs of Fixing Drug Prices
Federal prosecutors have charged two former pharmaceutical executives with fixing prices of generic drugs, part of an ongoing government investigation into anticompetitive tactics by companies that make lower-cost drugs intended to reduce medication costs. The Department of Justice accused two former Heritage Pharmaceuticals executives of conspiring to fix prices, rig bids and avoid competing with other drugmakers in marketing two generic drugs. (12/14)
WOMEN’S HEALTH

The Washington Post: Obama Administration Blocks States from Cutting Off Grants to Planned Parenthood
The rule stipulates that states may not prohibit an organization from participating in Title X — the state-federal program that gives out tens of millions of dollars for family planning — for any reason other than the organization’s ability to provide services. It is designed to undercut efforts in some states to withhold taxpayer money from Planned Parenthood, which offers a variety of health-care services, primarily to low-income women. While the money cannot be used for abortions, some conservative lawmakers have targeted the group because it also offers the procedure at some of its clinics. Abortion rights groups lauded the rule but cautioned that it could be reversed by the next administration. (Somashekhar, 12/14)

The New York Times: Abortion is Found to Have Little Effect on Women’s Mental Health
It’s an idea that has long been used as an argument against abortion — that terminating a pregnancy causes women to experience emotional and psychological trauma. Some states require women seeking abortions to be counseled that they might develop mental health problems. Now a new study, considered to be the most rigorous to look at the question in the U.S., undermines that claim. (Belluck, 12/14)

QUALITY

The New York Times: Go to the Wrong Hospital and You’re 3 Times More Likely to Die
Not all hospitals are created equal, and the differences in quality can be a matter of life or death. In the first comprehensive study comparing how well individual hospitals treated a variety of medical conditions, researchers found that patients at the worst hospitals were three times more likely to die and 13 times more likely to have medical complications than if they visited one of the best hospitals. (Abelson, 12/14)

EDITORIALS AND OPINIONS

Sacramento Bee: Lessons from California’s Successful Implementation of Obamacare
Most people think the ACA was successful in California because the state loved the law while it was under attack in most of the rest of the country. But there were many other more important factors, the first of which was the sheer size of California. (Micah Weinberg, 12/14)

Los Angeles Times: The Zika Disaster Will Test The GOP’s Capacity To Manage Serious Healthcare Emergencies
The Zika crisis, which seems to have faded from memory since it became a big news item this summer, has roared back with a vengeance, thanks to a just-published study indicating that the virus’ effect on infants of women infected during pregnancy is much worse than previously known. The study found that 42% of infants infected in the womb had serious birth defects. (Michael Hiltzik, 12/14)

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CALIFORNIA WATCH

California Healthline: California Hopes $3 Billion Experiment will Improve Health of Neediest
Pilot projects are being launched in 18 counties to reduce ER visits among Medi-Cal's most costly patients. (Gorman, 12/16)

Ventura County Star: Disabled Adults Don't Have to Leave Thousand Oaks Site
A Thousand Oaks day program for adults with disabilities won't have to move from its home of the last 27 years, officials announced Tuesday. The United Cerebral Palsy adult day program will remain at 1025 Old Farm Road in the Waverly Heights neighborhood of Thousand Oaks and will not have to move to make room for other services being offered by the Conejo Valley Unified School District, the district's Board of Education decided Tuesday. (Doyle, 12/16)

Los Angeles Times: California Bill Declares All Children Have a Basic Right to Quality Education, Healthcare and Social Services
State Sen. Richard Pan on Monday said all California children should have a basic right to quality childcare, early education and health and dental services no matter where they live or the income of their parents. The pediactrician and Sacramento Democrat unveiled the Children's Bill of Rights, stating all children have the right to live in a just, safe, healthy and supportive society. (Ulloa, 12/15)

ADMINISTRATION NEWS

McClatchy: Medical Specialists Donated $3.1 Million to Georgia U.S. Rep. Tom Price, a Trump Administration Pick
The medical community's better-paid specialists have poured at least $3.1 million over the past 13 years into the political committees of the orthopedist-turned-congressman who is charged with dismantling the Affordable Care Act. (Gordon, Clark and Goldstein, 12/15)

HEALTH LAW

USA Today: Feds Extend Healthcare.Gov Deadline to Dec. 19, Citing Late Rush
Federal regulators extended the midnight deadline for ACA insurance by four days, as consumers fought to get through to call center operators and log onto Healthcare.gov to buy insurance that takes effect Jan. 1. "Nearly a million consumers have left their contact information to hold their place in line," Healthcare.gov CEO Kevin Counihan said in a statement. "Our goal is to provide affordable coverage to everyone seeking it before the deadline, and these two additional business days will give consumers an opportunity to come back and complete their enrollment for January 1 coverage." (O'Donnell, 12/16)

The Washington Post: Health Insurers Get Only 1.6% of $6 Billion They are Owed for Costly ACA Customers
Hundreds of insurers selling health plans in Affordable Care Act marketplaces are being paid less than 2 percent of nearly $6 billion the government owes them for covering customers last year with unexpectedly high medical expenses. The $96 million that insurers will get is just one-fourth of the sum that provoked an industry outcry a year ago, when federal health officials announced that they had enough money to pay health plans only 12.6 percent of what the law entitles them to receive. (Goldstein, 12/15)
The Associated Press: Study: Repealing Obama Health Law Cuts Taxes For Wealthy
Republicans may be handing wealthy Americans a big tax cut by repealing President Barack Obama’s health care law, according to a study released Thursday that spells out potential economic pitfalls behind the election-year slogans. The richest households — those with incomes above $3.7 million — would get an average tax cut of about $197,000, said the analysis from the nonpartisan Tax Policy Center, a joint venture of the Urban Institute and the Brookings Institution think tanks. (Alonso-Zaldivar, 12/15)

MEDICAID

Modern Healthcare: CMS Unveils Medicare-Medicaid ACO Model
The CMS plans to enlist states in a new experiment allowing Medicare accountable care organizations to also manage Medicaid costs for patients who are enrolled in both programs. The new model builds on the Medicare Shared Savings Program, in which Medicare ACOs that hit spending and quality targets are able to share in savings with the CMS. But those ACOs often don’t consider Medicaid savings, even when beneficiaries are enrolled in both Medicare and Medicaid programs. Such “dual eligible” patients often are higher risk and have higher health costs. (Livingston, 12/15)

Morning Consult: Medicaid Advisory Board Recommends Extending CHIP Funding Five Years
The Medicaid and CHIP Payment and Access Commission is recommending that Congress provide five additional years of funding for the Children’s Health Insurance Program next year. The nonpartisan body, which advises Congress on issues affecting Medicaid and CHIP, is urging lawmakers to extend funding for the program through 2022. The CHIP program provides health insurance for children in families whose incomes don’t qualify for Medicaid. Extending funding for the program is considered “must-pass legislation” next year by most on Capitol Hill. (McIntire, 12/15)

PUBLIC HEALTH AND EDUCATION

Kaiser Health News: After-Hours ER Care May Come With a Doctor’s Surcharge
Patients sometimes find an additional charge, generally between $30 and $200, tacked onto their bill for visiting a hospital emergency room between 10 p.m. and 8 a.m. (Andrews, 12/16)

California Healthline: The Throwaway Scope: A Way To Ditch Superbugs?
Small manufacturers are betting that disposable medical scopes will slash the risk of infection during procedures. Some doctors are skeptical of the cheaper models. (Terhune, 12/15)

The Washington Post: The Unintended Consequence of Angelina Jolie’s Viral Breast Cancer Essay
When Angelina Jolie published an essay in the New York Times about her decision in 2013 to get a double mastectomy, the essay quickly went viral. Jolie’s frank and candid admission that she had inherited a “faulty” BRCA1 gene that increased her risk of developing breast and ovarian cancer and struggled with what to do struck a chord with people. Jolie revealed that she had undergone a medical procedure rarely talked about openly, much less by A-list celebrities, and said she hoped her experience could help others. (Johnson, 12/15)
The New York Times: Americans’ Hearing Loss Decreases Even with Ubiquitous Headphones
As concern rises over the effect of continuous use of headphones and earbuds on hearing, a new paper by federal researchers has found something unexpected. The prevalence of hearing loss in Americans of working age has declined. (Kolata, 12/15)

Kaiser Health News: Senior Citizens, Even 80-Year-Olds, Can Be Organ Donors
Diana Teller never thought she was too old for anything, not scuba diving or traveling the world or taking Italian lessons late in life, her family recalled. So when the vivacious San Diego woman died last year at age 76 after a sudden brain hemorrhage, no one questioned whether she was too old to be an organ donor. “I guess I never really thought of her as her age,” said daughter Lori Teller, 57. “This was something she wanted to do.” Despite such convictions, donations from senior citizens like Teller — whose corneas, kidneys, liver and tissue were used — rarely happen. (Aleccia, 12/15)

PHARMACEUTICALS

NPR: States Sue Drug Companies for Price Fixing
The lawsuit alleges that the companies, led by New Jersey-based drug maker Heritage Pharmaceuticals, identified competitors and tried to reach agreements on how they could avoid competing for customers on price. (Kodjak, 12/15)

Stat: Allergan Pays $38 Million To Settle Kickback Charges
In another instance of unseemly marketing, a unit of Allergan has agreed to pay $38 million to settle allegations of paying kickbacks to encourage doctors to prescribe four its medicines. As with other drug makers accused of the same practices, the company allegedly rewarded high-prescribing doctors with speaking engagements and these were billed as educational sessions. But in reality, these were often held in fancy restaurants simply to woo still other doctors to attend, according to a whistleblower lawsuit that was filed in 2012 by a former sales rep for Forest Pharmaceuticals, which was later acquired by Allergan. (Silverman, 12/15)

EDITORIALS AND OPINIONS

Sacramento Bee: Telemedicine the Cure for Rural Areas
Digital health innovations and applications, including virtual doctor’s appointments and smartphone health apps, can help us live better and longer lives. But many rural Californians don’t have access to these services as access to broadband internet and access to health care is rapidly becoming one and the same. (Eric Brown, 12/15)

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