

Congressman Bruce Braley: Working to Improve and Expand Vision Care

Rep. Braley serves as a Member of the Subcommittee on Health under the Committee on Energy & Commerce, playing an integral role in health care legislation.

 As a Member of the Subcommittee on Health, Rep. Braley was heavily involved in the debate on health care reform.

Rep. Braley is a Member of the Congressional Vision Caucus, to help fight for the expansion and improvement of vision care in America.

 This Caucus is devoted to the fight to expand and improve vision care, and helps Rep. Braley stay aware of all efforts to improve vision care.

Rep. Braley successfully added "non-discrimination" language to the Health Care Reform package, so that insurance cannot discriminate against certain providers like optometrists and ophthalmologists.

- Rep. Braley successfully worked to add "non-discrimination" language to the Health Care Reform bill, and led a multi-Member letter to Speaker Pelosi encouraging her to support "non-discrimination" provisions.
- The initial House Health Care Reform bill, which passed the House, included this non-discrimination language. Then, the final Health Care Reform package also included this non-discrimination language, and was signed into law.

Rep. Braley inserted other pieces of legislation into the final Health Care Reform package to increase Medicare reimbursements to lowa providers, and to improve quality outcomes. These provisions, which became law, include:

- Immediate funding of \$800 million to address geographic disparities for lowa providers
 under Medicare Parts A and B, for 2010-2011. Thanks to this new House language, the
 final Health Care Reform package will directly increase lowa providers'
 reimbursements under Medicare Part B by 5% in 2010 and 5% in 2011, due to
 addressing the geographic adjusters in Part B, as well as increases under Part A.
- Based on the original Braley language in the House-passed Health Care Reform bill, an Institute of Medicine (IOM) study and implementation to reform the Medicare system to address all geographic disparities under Medicare Parts A and B. The study begins this April 2010, and implementation will occur by December 2012.
- Based on the original Braley language in the House-passed Health Care Reform bill, a second Institute of Medicine (IOM) study making firm recommendations to move towards high-quality, low cost care, across the health care sector.
- Automatic implementation of a Value Index as part of the Part B reimbursement structure, beginning in 2015, which will incentivize high-value, efficient care, like the type

- of care practiced in Iowa. This provision reflects the *Medicare Payment Improvement Act*, originally introduced by Rep. Braley in June 2009.
- Additional direction to the new Center for Medicare and Medicaid Innovation to further test innovative models to incentivize high quality, low cost care across the provider spectrum.
- A personal commitment by Secretary Sebelius to convene a National Summit on Geographic Variation, Cost, Access, and Value in Health Care later this year. This will draw national attention to the issues of geographic inequity, access to care, and highvalue care.

Authored and Introduced HR 2891, the Access to Frontline Health Care Act, to ensure that communities have access to optometrists and ophthalmologists. This legislation was endorsed by the American Optometric Association and the American Academy of Ophthalmology, and Rep. Braley added these provisions to the House Health Care Reform Bill.

- This legislation will help make certain that patients can receive comprehensive care, and
 incentivizes the transition to an interdisciplinary approach to health care. The Access to
 Frontline Health Care Act will help place optometrists and ophthalmologists in
 underserved areas by creating a new student loan repayment programs, known as the
 "Frontline Providers Student Loan Repayment Program," to pay optometrists' and
 ophthalmologists' student loans if they practice in needy areas.
- Rep. Braley successfully inserted language from this bill into the House Health Care Reform bill, HR 3962, which passed out of the House. However, the provision was not included in the final Health Care Reform package.

Fighting to expand vision care for children as a cosponsor of HR 577, the Vision Care for Kids Act of 2007

 Rep. Braley is a cosponsor of this bill, which would establish a grant program to help fund efforts to provide eye care to children. This legislation would greatly expand vision care for children in lowa and other states.

Cosponsor of the National Health Service Corps Improvement Act

 Rep. Braley is a cosponsor of this bill, to include optometrists in the National Health Service Corps Scholarship and Loan Repayment Programs. It would allow scholarships and student loan repayment to optometrists that practice in underserved areas, which would help bring more optometrists to lowa.

Working to replace the Sustainable Growth Rate (SGR), which unfairly lowers Medicare reimbursements to optometrists, ophthalmologists and other providers under Part B

• Rep. Braley has repeatedly called for the elimination of the SGR. The House recently passed legislation, with Rep. Braley's support, that replaces the SGR with a new formula that will not result in unfair cuts, and encourages coordinated, innovative care.