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ONE HUNDRED THIRTEENTH CONGRESS
Congress of the United States
House of Representatives
COMMITTEE ON ENERGY AND COMMERCE
2125 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-6115
Majority (202) 225-2927
Minority (202) 225-3641

August 22, 2014

Mr. Andrew Slavitt
Principle Deputy Administrator
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Mr. Slavitt:

Thank you for appearing before the Subcommittee on Oversight and Investigations on Thursday, July 31, 2014, to testify at the hearing entitled "PPACA Implementation: Updates from CMS and GAO."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

Also attached are Member requests made during the hearing. The format of your responses to these requests should follow the same format as your responses to the additional questions for the record.

To facilitate the printing of the hearing record, please respond to these questions and requests with a transmittal letter by the close of business on Friday, September 5, 2014. Your responses should be mailed to Brittany Havens, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to brittany.havens@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,



Tim Murphy
Chairman
Subcommittee on Oversight and Investigations

cc: Diana DeGette, Ranking Member, Subcommittee on Oversight and Investigations

Attachments

Attachment 1—Additional Questions for the Record

The Honorable Bruce Braley

1. Mr. Slavitt, as you are aware, I and many members are very interested in the proper implementation of Section 2706 of the Affordable Care Act, which addresses provider non-discrimination. As you are also aware, I recently joined more than 40 of my colleagues here in the House in a letter to the Secretary urging the Department to rectify the flawed FAQ guidance on 2706 issued over a year ago and to implement the statute as intended. Just last week, the Senate Appropriations subcommittee on Labor/HHS issued a report to accompany their funding bill for fiscal year 2015, a section of which stated that CMS has not followed a previous congressional directive to fix the FAQ and a certain date was given to fix the FAQ or explain to Congress why CMS is ignoring congressional intent in this respect.
 - a. Mr. Slavitt, can you explain to the Subcommittee why CMS continues to ignore congressional intent on Section 2706?

The Honorable G.K. Butterfield

1. Apart from HealthCare.gov, it's important to recognize that this is not the only significant IT investment under CMS' purview. The most recent data on the IT Dashboard indicates that there are almost 30 investments where we're spending \$15 million dollars or more in FY 2014 – including 4 where we're spending over \$100 million in FY 2014. All too often, we're using cost-plus contract arrangements that place all the risks for cost overruns on the taxpayer and not holding contractors accountable for what they deliver.
 - a. How are you ensuring that these investments are regularly delivering useful functions to end-users every six months or, at least, every year – as is the standard practice in the private sector?
 - b. As an example, for the top 10 investments, totaling a little over \$1.4 billion in spending for FY 2014, what functional capabilities were or will be actually rolled out to users this calendar year?
 - c. For these same top 10 investments, how are you incorporating existing solutions, whether from elsewhere in government or from the commercial market, that could be used to deliver useful functionality within 6 months or, at least, within a year?
 - d. To the extent that you are doing this, how are you structuring contracts to incentivize success, rapid delivery of actual capabilities, and to shift risk from the taxpayer onto private industry?
 - e. In particular, how are you using firm-fixed price arrangements that put more of the onus of budget and schedule control onto the contractor?

Attachment 2—Member Requests for the Record

During the hearing, Members asked you to provide additional information for the record, and you indicated that you would provide that information. For your convenience, descriptions of the requested information are provided below.

The Honorable Tim Murphy

1. Most of these plans cover an initial visit and some preventative care. Have you surveyed people to find out if they have been able to see their physicians for any necessary follow-up appointments and reviewed their costs, payment levels, copays, deductibles, etc.?

The Honorable Michael C. Burgess

1. Please provide the memorandum that I requested from Mr. Cohen.

The Honorable Morgan Griffith

1. Please provide the Committee with the waiver that you had to sign once becoming employed by CMS. Please explain the details of this waiver.

The Honorable Renee Ellmers

1. Please provide the Committee with any changes or updates to site protocols or standards to address breaches to accessed information.