

# February 23, 2018 | Issue 8

#### Editor's note

This note is produced by the KPMG Center for Healthcare Regulatory Insight and is intended to be short and succinct, less than 360 words, to provide a digestible bite of news relevant to our clients and practices. Links are provided to source material (proposed and final regulations, agency guidance and press releases, reports, research, etc.) when available.

In order to continue receiving ATW 360 in future weeks, you will need to subscribe to our mailing list <a href="here">here</a>. Please share this email with colleagues and other interested individuals.

Subscribe here



## **Healthcare regulatory news**

An HHS, Treasury Department, and Labor Department <u>proposed</u> <u>rule</u> would allow short-term ACA insurance plans up to a year instead of less than 3 months... CMS updated its <u>coverage policy</u> <u>for implantable cardiac devices</u>... An <u>FDA final rule</u> increases requirements for acceptance of data from clinical trials conducted outside the United States used to support medical device applications.

The <u>IRS is moving forward</u> with notices to hundreds of companies facing penalties for failing to comply with the employer mandate...

HHS <u>struck more than \$10 billion in risk corridor payments</u> erroneously included in last week's President's budget.

GAO reported that many states' 1115 waiver evaluation reports lack key results on parts of the demonstrations, and recommended better evaluation requirements to help inform policy decisions...

Ohio will seek an 1115 waiver that includes a Medicaid work requirement and Missouri and Alaska may pursue similar plans...
the Virginia House of Delegates proposed a two-year state budget that expands Medicaid with conservative reforms, including work requirements and enrollee premium payments; however the state Senate does not support expansion... Wisconsin plans to apply for a waiver to establish a reinsurance plan to stabilize its individual health insurance market.





## Healthcare law and policy news

The House Energy and Commerce committee will hold three hearings to consider 8 bills aimed at tackling the opioid epidemic, while BIO called for incentives to develop novel pain medicines.

Mercy Health and Bon Secours Health System <u>announced plans to</u> <u>merge</u> to create the nation's fifth largest Catholic health system... Albertson will <u>acquire Rite Aid</u>, creating a chain with 4,345 pharmacies across 38 states and DC.

A <u>White House Economic Report of the President</u> argues that Medicare and Medicaid policies, including the Medicaid best price program, cause pharmaceutical manufacturers to artificially inflate drug prices, and that meaningful use requirements contributed to the decline of independent physician practices.

A bipartisan group of governors released a "blueprint" with ideas for improving health insurance market stability, affordability, and flexibility... CDC data show that the uninsured rate was 9% in 2017, largely unchanged from 2016, and that 43% of Americans under 65 with private insurance were enrolled in high-deductible plans in 2017, up from 39% in 2016 and 25% in 2010.



Questions or comments, please send to <u>us-hcinsight@kpmg.com</u>



### Privacy | Legal

You have received this message from KPMG LLP. If you wish to unsubscribe from Around the world of U.S. healthcare in 360 words or less, please <u>click here</u>. If you wish to unsubscribe from all KPMG communications, please <u>click here</u>.

KPMG LLP, 3 Chestnut Ridge Road, Montvale, NJ 07645

© 2018 KPMG LLP, a Delaware limited liability partnership and the U.S. member firm of the KPMG network of independent member firms affiliated with KPMG International Cooperative ("KPMG International"), a Swiss entity. All rights reserved. NDPPS 698390

The KPMG name and logo are registered trademarks or trademarks of KPMG International.