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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.

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Healthcare regulatory news

An <u>FDA final rule</u> clarifies when tobacco products are classified as drugs, while a <u>proposed rule</u> would limit the amount of nicotine permissible in cigarettes... <u>FDA plans to</u> collect information on how prescription drug promotional information is shared with health care professionals and prescribers, and providers' knowledge of how clinical trial data are used for promotion... CMS is <u>soliciting</u> <u>comments to inform next steps</u> on D-SNP grievance and appeals processes and new integration standards.

The <u>Wall Street Journal highlighted</u> how some Medicare Advantage plans "crosswalk" beneficiaries from low-quality to higher-quality plans to maximize their Star Rating program bonuses; meanwhile, <u>ModernHealthcare found</u> that specialty hospitals disproportionately received higher Medicare Star Ratings than major teaching hospitals.





Healthcare law and policy news

A federal appellate court will hear arguments May 4th in the hospital lawsuit against HHS to stop Medicare Part B reimbursement cuts for 340B drugs; a report commissioned by 340B Health found that hospitals participating in the program provided over 50% more uncompensated care than hospitals not receiving discounted drugs, and the Senate HELP Committee discussed potential program changes.

<u>CBO estimates that</u> a bipartisan plan being floated for inclusion in the omnibus spending bill, requiring passage by March 23rd, could reduce exchange premiums by 10% in 2019 and 20% in 2020 and 2021... <u>Oliver Wyman estimated</u> that ACA stabilization measures could result in 3.2 million more insured individuals and a 40% decrease in premiums.

MedPAC recommended to Congress that the MIPS portion of the MACRA physician payment system be replaced with a voluntary payment program requiring no provider data reporting... The President's Cancer Panel called for federal action to address rising cancer drug prices... House Republicans leaders failed to pass a "right to try" bill...The House Energy and Commerce Committee will consider 25 bills next week to address the opioid crisis.

A <u>study in JAMA</u> found that, despite spending significantly more than other countries on healthcare, outcomes in the US are not better overall and that higher prices and administrative costs are driving disparities in spending... An <u>NBER paper</u> found that employees with high-deductible health plans saved about \$500 compared with other plans, and employee total annual health spending was lower about two-thirds of the time.



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

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