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Center for Healthcare Regulatory Insight

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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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CMS final rules increase 2019 payments to <u>skilled nursing</u> <u>facilities</u> by \$820 million (2.4%), <u>inpatient rehabilitation facilities</u> by \$105 million (1.3%), <u>inpatient psychiatric facilities</u> by \$50 million (1.1%), <u>hospice</u> by \$340 million (1.8%), <u>acute care</u> <u>hospitals</u> by \$4.8 billion (1.85%), and long-term care hospitals by \$39 million (0.9%); also, CMS <u>revamped the hospital</u> <u>interoperability program</u> and will require hospitals to post "standard charges" online; and will <u>reimburse SNF providers</u> based on patient condition and complexity, rather than volume, beginning in October 2019. CMS finalized the <u>short-term</u>, <u>limited-duration (STLD) plan rule</u>, allowing individuals to enroll in ACA non-compliant plans for up to a year, with possible renewed coverage up to 36 months.

The <u>HHS OIG recommended</u> CMS take 15 actions to improve Medicare hospice program integrity and care quality.

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Healthcare law and policy news

CMS <u>announced</u> that the average Medicare Part D plan premium will decline from \$33.59 to \$32.50 next year; <u>extended for</u> <u>another six months</u> a moratorium on new home health agencies and non-emergency ground ambulance providers/suppliers in 6 states; and <u>lowered star ratings</u> for staffing levels at one in 11 nursing homes (nearly 1,400 facilities).

CMS approved 1332 waiver requests from <u>Wisconsin</u> and <u>Maine</u> to create or reinstate ACA reinsurance programs in 2019 of \$200 million and \$93 million, respectively, and <u>launched a "rate</u> <u>review" website</u> with data on ACA-compliant and noncompliant plan rate requests.

California's Insurance Commissioner <u>urged the Justice</u> <u>Department</u> to block the proposed CVS-Aetna merger... House Energy and Commerce Committee <u>leadership asked nine 340B</u> <u>contract pharmacies</u> for details on their relationships with 340Beligible providers and <u>urged the FTC</u> to review past mergers of PBMs... Senate HELP Committee <u>explored efforts to reduce</u> healthcare administrative costs... Centene and Ascension <u>plan to</u> <u>launch</u> a joint Medicare Advantage plan in 2020.

Kaiser Family Foundation <u>reported that individual market</u> <u>enrollment</u> decreased by 12% in Q1 2018, driven by off-exchange market individuals ineligible for ACA subsidies; a <u>Brookings</u> <u>analysis</u> concluded that ACA premiums would fall 4.3% next year if the policy environment were more stable... The <u>Mercatus</u> <u>Center concluded</u> that a "Medicare for All" plan would cost the federal government nearly \$33 trillion over 10 years, but would likely <u>result in \$2 trillion in net savings</u>.



Questions or comments, please send to us-hcinsight@kpmg.com

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