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Around the world of U.S. healthcare in 360 words or less

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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Healthcare regulatory news

OMB is reviewing a <u>drug pricing transparency proposed rule</u>; meanwhile, the Senate <u>passed an HHS spending bill</u> that would require drug manufacturers to display drug prices in direct-toconsumer advertisements... OIG will soon publish a <u>request for</u> <u>information</u> on changes to the anti-kickback statute and beneficiary inducement monetary penalties... <u>OIG reported</u> that CMS improperly paid hospitals nearly \$26 million for intensitymodulated radiation therapy planning services between 2013 and 2015.

FDA <u>extended by four months</u> the expiration date of some EpiPens to alleviate shortages... FDA <u>awarded a contract</u> to the National Academies of Sciences, Engineering, and Medicine to create new opioid prescribing guidelines for acute pain... an <u>FDA report</u> <u>addresses</u> under-representation of certain populations in clinical trials.

The Justice Department and <u>Drug Enforcement Administration</u> proposed reducing manufacturing quotas by 10% in 2019 for the six most abused opioids; while the Justice Department <u>issued a</u> <u>first-of-its-kind restraining order</u> barring two physicians from prescribing medications while under investigation for illegal opioid prescribing.

<u>GAO urged</u> Congress to strengthen oversight of Medicaid providers and managed-care plans... <u>GAO said that CMS</u> needs to improve management of the federal ACA exchange after enrollment fell 5% (to 8.7 million) in 2018.

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Healthcare law and policy news

HHS released <u>a 100-day recap of actions</u> taken to implement its drug pricing blueprint... CMS announced an Innovation Center (CMMI) model, <u>Integrated Care for Kids (InCK)</u> focusing on children in Medicaid and CHIP who <u>have physical and behavioral health needs</u>, including substance use... CMMI is <u>seeking a small</u> <u>business</u> to support "medical bidding and price transparency services"... CMS <u>awarded \$8.6 million</u> to 30 states and DC to support implementation of marketplace reforms and ACA consumer protections.

A <u>CMS State Medicaid Directors</u> letter affirms that Medicaid 1115 waivers must remain budget neutral... CMS approved <u>a Maryland</u> <u>1332 waiver</u> to establish an ACA reinsurance program... A <u>district</u> <u>court ruled</u> that HHS and IRS must <u>repay six states \$839 million</u> in ACA health insurer fees paid since 2014.

A <u>JAMA study estimated</u> that Medicare Part D could have reduced spending by \$952 million in 2016 by substituting 29 brand-name combination medications with generics... A <u>NBER</u> <u>report</u> found that acquired hospitals save only 1.5% annually on supplies, devices, and other equipment.

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