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

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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

FDA approved the <u>first generic version of EpiPen</u> and a <u>first-of-its-kind targeted RNA-based therapy</u> for nerve damage caused by peripheral nerve disease...FDA draft <u>guidance would</u> expedite the clinical development of cancer drugs through <u>multiple expansion</u> <u>cohort trial designs</u>... FDA Commissioner Scott Gottlieb and NIH Director Francis Collins <u>announced plans</u> to streamline oversight for gene therapy trials.

HHS <u>awarded \$125 million</u> in Quality Improvement grants to 1,352 community health centers...

CMS provided an update on Medicaid state plan amendments and announced section 1915 waiver process improvements... OMB <u>completed review of a proposed rule</u> to ease <u>excessive burdens</u> on Medicare providers and suppliers.

OIG <u>estimated that CMS</u> authorized \$434.4 million in improper ACA financial assistance payments in 2014; OIG also <u>reported that</u> <u>CMS</u> spent 24 times more on compounded topical drugs in 2016 than in 2010, suggesting potential fraud, waste, and abuse.



Healthcare law and policy news

President Trump would like the Justice Department to file a federal lawsuit against opioid manufacturers and urged DOJ to crack down on synthetic opioids from China and Mexico; meanwhile CDC reported that nearly 72,000 Americans died of opioid overdoses in 2017, up 6.6% from 2016.

CMS <u>approved New Jersey's 1332 waiver</u> to establish a five-year ACA reinsurance program... New Mexico Health Connections <u>asked a federal judge</u> to throw out CMS' new risk adjustment proposed rule... Advocacy groups in Arkansas <u>sued to block the</u> <u>state</u> from enforcing new work requirements, while the state announced that <u>5,400 individuals failed to report work hours</u> for two straight months and could lose coverage.

North Carolina is <u>accepting bids from insurers</u> to participate in its managed Medicaid program... Louisiana is exploring a <u>"subscription-based" payment model for hepatitis C</u> treatments for its Medicaid and prison populations... Ohio's Medicaid Department <u>ordered the state's five managed care plans</u> to cancel contracts with PBMs engaging in "spread pricing;" CVS <u>announced plans to "restructure"</u> its contracts to meet new "pass-through" pricing requirements.

Oscar Health <u>received \$375 million</u> from Alphabet, and plans to launch Medicare Advantage plans in 2020... Major technology companies <u>pledged to collaborate</u> to remove barriers to adoption of interoperable health technologies... Best Buy <u>will acquire</u> <u>GreatCall</u>, a manufacturer of mobile devices for senior citizens.

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