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Center for Healthcare Regulatory Insight

August 31, 2018 | Issue 35

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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HHS <u>OIG released its request for information</u> on revisions to the anti-kickback laws and beneficiary inducement civil monetary penalties... ONC is <u>seeking comments</u> on criteria for the EHR Reporting Program mandated by the 21st Century Cures Act.

CMS will <u>allow Part D plans in 2020</u> to use <u>"indication-based</u> <u>formulary design"</u> to tailor on-formulary coverage of drugs predicated on specific indications... FDA will <u>withdraw 2014</u> <u>guidance</u> on pain medicines and <u>issue new guidance</u> to encourage development of non-opioid pain medications; FDA also <u>proposed</u> <u>restricting compounding</u> of three bulk drug substances. CMS <u>data show</u> that MSSP ACOs generated \$314 million in net Medicare savings in 2017; meanwhile <u>Next Generation ACOs</u> generated <u>\$62 million in net Medicare savings</u> in 2016, the program's first year.



Healthcare law and policy news

Bipartisan leaders in both Congressional chambers <u>urged HRSA to</u> <u>finalize regulations</u> to improve administration of the 340B drug discount program... Republican Senators <u>introduced a bill</u> to preserve pre-existing condition protections; while <u>Senate</u> <u>Democrats attempt to force</u> a vote to block HHS' short-term, limited duration insurance (STLDI) plan rule.

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CMS <u>will repay \$468.5 million to New York and Minnesota</u> for the states' Basic Health Programs impacted by the Administration's decision to eliminate cost-shared reduction subsidies... <u>170</u> <u>medical groups expressed concerns</u> about CMS' proposal to simplify evaluation and management codes for physician reimbursement.

South Dakota <u>submitted an 1115 waiver request</u> to impose Medicaid work requirements on able-bodied adults in two counties... Nebraska certified <u>enough signatures</u> to put a Medicaid expansion proposal on the ballot in November; a <u>judge</u> <u>dismissed efforts</u> to block the measure.

A <u>federal court ruled</u> that PhRMA lacks standing to challenge <u>California's drug pricing transparency law</u>... Morgan Stanley <u>predicted that 8% of hospitals are at risk of closure</u>, and another 10% are in "weak" financial health... Clover Health <u>will launch</u> <u>Medicare Advantage plans</u> in six new markets next year... Cigna shareholders <u>overwhelming voted to approve</u> its proposed \$67 billion acquisition of Express Scripts... Stryker <u>will acquire</u> the medical device company K2M Group Holdings for \$1.2 billion.

<u>CDC reported</u> that 8.8% of all Americans, and 12.5% of Americans under age 65, were uninsured in Q1 2018; and that 47% of individuals had high-deductible plans, up from 43.7% in 2017.



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

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