



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



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Editor's note

[This series](#) is produced by KPMG Healthcare and is intended to be short and succinct, less than 360 words, to provide a weekly digestible bite of healthcare regulatory, policy, and industry news relevant to our clients. Links are provided to source material (proposed and final regulations, agency guidance and press releases, reports, research, etc.) when available. Please share this email with colleagues and other interested individuals, and encourage them to [subscribe to our mailing list here](#).

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Healthcare regulatory news

CMS released two final rules, [Minimum Staffing Standards for Nursing Homes](#) and [Ensuring Access to Medicaid Services](#), aimed at improving quality of care while supporting healthcare workers... The regulations [establish national minimum staffing requirements](#) for long-term care facilities and require [80% of Medicaid payments for home care to go to workers' wages](#).

Medicaid managed care plans will be required to limit appointment wait times for Medicaid and CHIP beneficiaries under CMS's final [Managed Care rule](#). The rule also mandates that states create "one-stop-shop" websites where beneficiaries can compare plan performance based on quality and access to providers.

The FTC finalized [a rule](#) that bans noncompete clauses used in approximately 40% of physician employment contracts to restrict employees from working in a specific geographic area or for rival

organizations, [claiming these clauses suppress wages, limit innovation and deter new businesses](#). The agency projects the rule could [reduce health care costs](#) by up to \$194B in the next decade.

The FDA [approved a new antibiotic](#) for urinary tract infections (UTIs) for the first time in two decades; UTIs annually affect 30M Americans and account for the greatest use of antibiotics outside a hospital setting.



Healthcare law and policy news

The Joint Commission [launched a new accreditation program](#) on care quality and delivery standards for healthcare organizations that provide telehealth services, offering a framework to support the integrity of patient safety regardless of care setting.

In a [new lawsuit](#), the California Hospital Association alleges that one of the state's largest insurers, Anthem Blue Cross, caused discharge delays by taking too long to approve post-acute care, forcing hospitals to continue to provide care and limiting capacity.

According to a [new KFF study](#), Medicare's recent decision to cover Novo Nordisk's obesity shot Wegovy for heart disease could cover the drug for 3.6M people... An [American Society of Health-System Pharmacists \(ASHP\) report](#) found weight-loss drugs were the main driver of a 13.5% increase in US prescription drug spending in 2023.

A [JAMA study](#) discovered that, though prices for biosimilars are typically 15% to 35% lower than their respective brand-name reference drugs, the introduction of biosimilar competition did not lower patient out-of-pocket spending due to insurance benefit designs and reimbursement structures.



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