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## Editor's note

This note is produced every Friday by the <u>KPMG Center for Healthcare</u> <u>Regulatory Insight</u> and is intended to be short and succinct, no more than 360 words, to provide a digestible bite of healthcare and life sciences news from the past week. Please share this email with colleagues and other interested individuals, and encourage them to <u>subscribe to our mailing list</u> <u>here</u>.

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CMS <u>announced</u> the <u>States Advancing All-Payer Health Equity Approaches</u> <u>and Development (AHEAD) Model</u>, beginning July 2024 for up to 8 states to <u>test population health improvement approaches</u> through hospital global budgets and enhanced primary care payments.

OCR <u>proposed updating</u> regulations to prevent disability discrimination in federally funded programs.

FDA <u>issued three draft guidances</u> to modernize the medical device premarket notification 510(k) Program... FDA <u>could approve updated</u> <u>COVID-19 booster vaccines</u> today.

FTC <u>will consider</u> whether improper patent listings in FDA's Orange Book are anticompetitive.

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Healthcare law and policy news

Novartis <u>sued to stop</u> the Medicare Drug Price Negotiation Program; Astellas <u>withdrew its lawsuit</u> after <u>none of its drugs were selected</u> for the program's first year... Humana <u>sued HHS</u> over its Medicare Advantage risk adjustment data validation (RADV) final rule for <u>alleged "shifting</u> justifications and erroneous legal reasoning."

FTC <u>accepted a binding settlement</u> allowing Amgen's \$28B acquisition of Horizon Therapeutics to proceed... Thoma Bravo <u>will acquire NextGen</u> <u>Healthcare (\$1.8B)</u>... Bicycle Health and Albertsons are <u>partnering to</u> <u>expand patient access</u> to buprenorphine injections.

Moody's <u>predicts financial impact of the Drug Price Negotiation Program</u> to the pharmaceutical industry will be "relatively modest in 2026," but grow over time.

A *JAMA* study found "vertical relationships" between primary care physicians and large health systems were associated with increases in total medical expenses per patient-year (6.3% or \$357), specialist visits (23%), and ED visits (14%), relative to the comparison group... *Health Affairs* studies found: (1) <u>41%</u> (19/46) of drugs in 2017 were approved by FDA based upon only one clinical trial; (2) unobserved <u>favorable selection</u> in <u>Medicare Advantage (MA)</u> led to underpayments in counties with lower MA penetration and overpayments in counties with higher MA penetration; and, (3) the <u>share of Medicare beneficiaries switching</u> from traditional feefor-service to MA increased from 61% to 80% between 2011-2022... A *JAHA* study found the US rate of obesity-related heart disease tripled between 1999 and 2020.

House Committees <u>released a legislative package</u>, including provisions on <u>price transparency</u>, <u>PBM oversight/requirements</u>, site-neutral physicianadministered drug payment, and health extenders, with hopes for a floor vote this month.

A Mercer survey found <u>employee health benefit costs could rise 5.4%</u> in 2024, up from 3-4%, on average, over the past decade.

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