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#### Editor's note

<u>This series</u> 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 <u>subscribe</u> to our mailing list here.

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# Healthcare regulatory news

The Departments of Labor, Treasury and HHS released a <u>proposed rule</u> to expand coverage for recommended preventive services under the ACA, including requiring group health plans and issuers to cover overthe-counter contraceptives without cost-sharing; the agencies also <u>released guidance</u>, clarifying plans must cover both daily oral and longacting injectable pre-exposure prophylaxis (PrEP) for HIV/AIDS.

Customs and Border Protection and the <u>FDA seized 3M units</u> of unauthorized e-cigarette products with an estimated retail value of \$76M... This interception of illegal nicotine products comes amidst a

significant decline in youth e-cigarette use, with the number of teenage users now at one-third of its 2019 peak.

The FDA has <u>expanded its approval</u> of Pfizer's Abrysvo to include individuals between the ages of 18 and 59 with increased risk for lower respiratory disease caused by RSV.





## Healthcare law and policy news

CMS launched window shopping ahead of 2025 HealthCare.gov Marketplace Open Enrollment and released <u>a report</u> showing that 74% of returning enrollees will be able to select a plan for less than \$10/month after premium tax credits if they remain in their same metal level.

A class action <u>lawsuit</u> against Anthem Blue Cross Blue Shield alleges the issuer's inaccurate provider directories led beneficiaries to unknowingly use out-of-network providers listed as in-network... The issue of "ghost networks", particularly common in mental health care, has come under Congressional <u>scrutiny</u> in recent years.

Senate Finance Committee Chair Ron Wyden (D-OR) <u>sent a letter</u> to CMS that urges the agency to send guidance to states on increasing access to addiction medicine specialists, noting there are only 4,600 physicians certified in addiction medicine.

The Maryland Prescription Drug Affordability Board <u>can now proceed</u> with allowing state and local governments in Maryland <u>to cap the</u> <u>prices of certain high-cost drugs</u> for their employees... Multiple states have implemented approaches to reduce drug costs for state workers, with <u>Utah funding travel</u> to Mexico or Canada for some employees to fill high-cost prescriptions.

70% of Medicare-eligible beneficiaries <u>do not compare plans</u> during the Medicare annual Open Enrollment Period, according to KFF... The average Medicare beneficiary <u>has access to 43 Medicare Advantage plans</u>, along with fee-for-service options, and <u>studies show</u> too much choice can lead to choice overload and poor decision-making.





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