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Inflation Reduction Act Contains Important Cost-Saving Changes For Many Patients — Maybe For You - The legislation, which was recently passed by Congress and signed into law by President Biden, will allow the federal government, for the first time, to negotiate the price of some drugs that Medicare buys. It also will extend the enhanced subsidies for people who buy insurance on the Affordable Care Act marketplaces.

What's in Democrats' big bill? Climate, health care, savings - Launching a long-sought goal, the bill would allow the Medicare program to negotiate prescription drug prices with pharmaceutical companies, saving the federal government some \$288 billion over the 10-year budget window. Those new revenues would be put back into lower costs for seniors on medications, including a \$2,000 out-of-pocket cap for older adults buying prescriptions from pharmacies. The money would also be used to provide free vaccinations for seniors, who now are among the few not guaranteed free access, according to a summary document.

Understanding the Inflation Reduction Act's Drug Pricing Package - "The IRA's drug pricing reforms include Medicare drug price negotiation, Medicare inflationary rebates, and Medicare Part D redesign ... This article provides a broad overview of the three main pillars of the IRA's drug pricing reforms -- considering their differences from prior legislative proposals, as well as clarifying what other reforms are not included in the package."

The Inflation Reduction Act Is a Foot in the Door for Containing Health Care Costs - "As momentous as this legislation is, it goes only so far. Negotiation of drug prices in Medicare will apply initially to a limited number of drugs ... Plus, negotiation does not take effect until well after a drug receives approval from the [FDA] (9 years for small-molecule drugs and 13 years for biological products). Also ... negotiated drug prices will not apply to private insurance plans outside Medicare."

Inflation Reduction Act Includes Major Medicare Drug Price Reforms But Leaves Out Employer Plans - "Because all the bill's drug pricing reforms apply only to Medicare, however, the legislation is raising worries that it could the result in significant cost-shifting to commercial market plans, meaning higher drug prices and costs for the millions of Americans and their families who get their health coverage through employer-sponsored plans.... The bill also includes a provision that codifies IRS/Treasury rules that allow Health Savings Account (HSA)-qualifying high-deductible health plans to cover insulin on a pre-deductible basis."

Here Are 4 Key Health Policy Items In The Inflation Reduction Act - The bill expands who can qualify under the Low-Income Subsidy Program that helps meet Part D cost-sharing burdens like deductibles. Currently, a beneficiary qualifies for the program if they earn up to 135% of the federal poverty level and get partial benefits for 135% to 150% of the level. The law would expand full benefits to those who earn between 135% and 150%, according to an analysis from the Kaiser Family Foundation.

New 'No Surprises Act' FAQs Build on Recent Final Regs - "FAQs Part 55 clarify processes related to initial payments, disclosures, and the open negotiation period.... Federal officials devote several FAQs to explaining how the NSA applies to plans that do not have a provider network, such as a plan that uses reference-based pricing.... The FAQs confirm that the sponsor of a group health plan without its own website can satisfy [the public disclosure] requirement if their service provider posts the information on its website (on behalf of the group health plan).... [T]he plan can still be held liable if the service provider fails to post the information."

Health Care Providers Are Shouldering Rising Costs. That Could Change Soon - While the economy as a whole has experienced record-breaking inflation this year, price increases in the health care sector have been relatively subdued — a trend that could end soon as Medicare and other payers adjust to new economic realities. Rising costs, such as labor, have largely not translated to higher medical prices, in part because they took economic forecasters by surprise. Rates set by Medicare and insurers, which are a key driver of health care costs, are negotiated months in advance and are based on forecasts that largely did not anticipate the current burst of inflation.

Anyone Can Now See Insurers' Prices. But Can 'Mere Mortals' Understand Them? - "health insurers have posted their pricing data on public websites, but the sheer size of these databases has made it difficult for consumers to access, much less understand.... So far, it's difficult for patients to see the prices under their specific plan or even different plans offered by one insurer. Employers also cannot easily use the information to compare their insurers' negotiated rates with others'."

Millions Of Americans Will Soon Be Able To Buy Hearing Aids Without A Prescription - Adults with perceived mild to moderate hearing impairment will be able to buy hearing aids directly from stores, pharmacies and online retailers — no prescription or doctor's appointment required — as soon as mid-October. That's thanks to a final rule issued by the U.S. Food and Drug Administration on Tuesday and set to take effect in two months, following years of campaigning by lawmakers and advocates. It creates a new category of over-the-counter hearing aids, which the Biden administration says will make the devices more accessible and affordable for millions of Americans.

Why Virtual Primary Care Is Going Viral - "The movement shifts the concept of off-hours or urgent online visits to that of a virtual yet consistent care team that replaces the traditional in-office primary care relationship.... Virtual primary care can treat more than people think.... Virtual primary care reduces unnecessary ER and urgent care visits -- and costs."

Even Well-Intended Laws Can't Protect Us From Inaccurate Provider Directories - State and federal laws require health plans to offer accurate lists of participating doctors and facilities, but consumers still struggle to get timely appointments with providers.

Cornerstone Of Modern Medicine Is On The Brink Of Collapse - Roughly a century after the first antibiotics revolutionized medicine, the development pipeline for these critical drugs is on the brink of collapse. Without policies to reinvigorate research into newer, more potent antibiotics, the world may soon face another global public health crisis as devastating as COVID-19. (Michelle McMurry-Heath,

It's That Time of Year Again: Medicare Part D Notices Due (2022 Edition) - "The notice requirement applies to all employers who offer prescription drug coverage, regardless of size, whether insured or self-funded or ACA grandfathered status. It also applies whether the prescription drug coverage is standalone or integrated into another plan, such as a medical plan."

How the 2023 ACA Affordability Decrease to 9.12% Affects Employers - "Where possible within budgetary constraints, employers should prepare to offer at least one medical plan option to full-time employees in all regions with an employee-share of the premium not exceeding \$103.28/month for employee-only coverage to simplify affordability compliance under the federal poverty line safe harbor."

SHRM.org: Inflation Reduction Act's Health Care Provisions Could Affect Employers - With the expansion of enhanced premium tax credit subsidies until 2025, it becomes more likely that the higher subsidies will eventually be made permanent, health care policy experts say. One consequence could be to make ACA marketplace plans a more appealing health care option for employers, who could opt to forgo group health plans and meet the ACA's coverage requirements by funding individual coverage health reimbursement arrangements (IHRAs), which allow employees to purchase their own coverage on ACA exchanges.

ICHRA Pitfalls for Employers to Avoid- "[1] Failing to understand the authorized classes ... [2] Failing to understand minimum class size rules.... [3] Failing to understand rating areas.... [4] Failing to comply with substantiation requirements.... [5] Failing to understand COBRA applicability."