

Three Minute Read™

Insights from the Healing American Healthcare Coalition™

Good news for Medicare enrollees and Epi-Pen users!

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From the Editor: This issue's seven article summaries cover a broad range of health news updates, concluding with disturbing news for US women. Click on the headline for the full article. If you find **TMR** informative, please upgrade to a paid subscription [here](#).



[Is Covid endemic yet?](#)
[Yep, says the CDC.](#)
[Here's what that means,](#)
by Rob Stein, NPR, 8/9/24

TMR Topline – The CDC now considers Covid-19 an endemic disease, meaning that it is here to stay. Covid is still killing hundreds of people every week, primarily older people and those with other health problems, and ranks as the 10th leading cause of death. People are still going to need to think about protecting themselves by getting vaccinated once or twice a year and considering masking up in risky situations and around high-risk people. Epidemiologists emphasize it's critical to continue monitoring the virus's spread and its evolution, especially to try to spot the emergence of new, more dangerous variants.



[How Did Mpox Become a Global Emergency? What's Next?](#), by Apoorva Mandavilli, New York Times, 8/15/24

TMR Topline – Prompted by an escalating crisis of mpox concentrated in the Democratic Republic of Congo that recently [spread](#) to a dozen other African countries, the WHO has declared mpox a global health emergency. Congo alone has reported 15,600 mpox cases and 537 deaths, most among children under 15, indicating that the disease's nature and mode of spread may have changed. There are two main types of

the mpox virus: Clade I, the version that is dominant in Congo, and Clade II, a form of which caused the 2022 global outbreak. The Clade 1b subtype appears to spread primarily through [heterosexual transmission](#). Experts believe that two doses of the mpox vaccine Jynneos should protect against all versions of the virus.



[FDA approves nasal spray as first needle-free treatment for anaphylaxis](#), by Reuters, 8/9/24

TMR Topline – The FDA has approved ARS Pharmaceuticals' nasal spray as the [first needle-free emergency treatment](#) for [potentially fatal allergic reactions](#), a welcome alternative to [EpiPen and other autoinjectors](#) for administering epinephrine, a life-saving drug used by people at risk of anaphylaxis and other allergic reactions. Neffy is a single-dose nasal spray administered into one nostril and was approved for use in adult and pediatric patients who weigh at least 66 pounds.



[CVS legal defeat shows quiet ways PBMs try to influence care](#), by John Tozzi, Bloomberg, 8/16/24

TMR Topline – CVS's Caremark Prescription Benefit Management (PBM) division withheld some payments to New York Cancer and Blood Specialists (NYCBS), a regional cancer treatment chain, beginning in 2016 without any clear explanation why. When NYCBS investigated, it learned the PBM was penalizing doctors for stopping cancer medication regimens early for valid medical reasons. Caremark charged the practice \$17 million in fees that were subtracted from subsequent Medicare reimbursements. NYCBS disputed the fees in arbitration and was awarded the \$17 million, a finding that a judge upheld in mid-July. The court found that the drug plans improperly took fees for years when Medicare patients didn't adhere to cancer drugs. In 2023, the Frier Levitt law firm that represented NYCBS filed 19 similar arbitration cases against CVS. PBMs including CVS's Caremark, UnitedHealth Group's Optum Rx and Cigna's Express

Scripts are under scrutiny for how they price medicines, pay pharmacies and influence what drugs patients may take. Some lawmakers blame them for dictating how doctors practice medicine. Jeff Vacirca, NYCBS's CEO, said the rationale for CVS's fees was mysterious from the start. *"We had no understanding of why they were recouping this money out of nowhere,"* Over the years of the complaint, the amount of the PBM fees went up from about 4% to more than 10%. According to the arbitration decision, CVS never explained how the program worked to doctors and pharmacies dispensing the drugs.

The PBM fees charged to physicians and pharmacies as a part of these programs are called DIR fees, for direct and indirect remuneration. According to Medicare data, DIR fees increased from \$9.5 million in 2010 to more than \$9.5 billion in 2020. A recent report from the House Oversight and Accountability Committee said that the fees *"are being manipulated by PBMs to increase profits and introduce vast uncertainty for pharmacies."*

TMR's Take: Bigger isn't always better: Bloomberg [reports](#) that CVS Health Corp. is looking to cut \$2 billion in costs and is replacing the president of its Aetna insurance unit. In an SEC filing, Walgreens [disclosed](#) that it may sell its majority stake in VillageMD.



[Biden administration says Medicare negotiated price discounts on 10 prescription drugs](#), by Ken Altucker,

USA Today, 8/15/24

TMR Topline – Medicare has negotiated discounts with pharmaceutical companies on 10 drugs prescribed to treat blood clots, cancer, heart disease, and diabetes. The lower prices take effect in 2026 with discounts ranging from 38-79%. Blood thinner Eliquis will cost \$231 for a 30-day supply, down from \$521. Diabetes drug Januvia will drop from \$527 to \$113 for a 30-day supply. Medicare will save \$6 billion and enrollees \$1.5 billion in 2026.



MINNESOTA
August issue [reported](#)

[Tim Walz on health-care: 8 things to know](#), by Molly Gamble, Becker's Hospital Review, 8/6/24

TMR Topline – TMR's first August issue [reported](#) that Minnesota ranked best in the

nation for healthcare. The Becker's article reveals some of the reasons why. Gov. Walz believes that healthcare is a human right – in his 2019 inaugural address he said, *"What Minnesotans want from their health care is simple. They don't want to get sick in the first place. But if they do, they want care at a price they can afford and at a location close to home."* Only 3.8% of the population are uninsured, half the national rate. For-profit HMOs are barred from securing managed care contracts in the state's Medicaid program. Walz has taken aggressive action on drug pricing, mental health, medical debt and protecting women's reproductive rights. All Minnesotans, not just Medicare enrollees, can purchase Eli Lilly's insulin products for [\\$35 per month](#) for the next five years. A 2022 law addresses critical needs in mental healthcare by increasing hospital bed capacity, attracting new mental health professionals through grants and loan forgiveness programs, and expanding the use of mobile crisis units.



[Health Care for Women: How the U.S. Compares Internationally](#), by Munira Z. Gunja, Relebohile Masitha, Laurie C. Zephyrin, The

Commonwealth Fund, 8/15/24

TMR Topline – The Commonwealth Fund's [latest research study](#) reveals that US women have significantly worse health care access, life expectancy, avoidable deaths, mental health and rates of illness. It compares the US to Australia, Canada, Chile, France, Germany, Japan, Korea, the Netherlands, New Zealand, Norway, Sweden, Switzerland, and the UK. Senior researcher Munira Gunja noted that the US is the only country in the analysis without a universal health system. The report identifies deep racial and ethnic disparities in Black and Hispanic women in regard to access to healthcare and experiencing chronic conditions, all while facing socio-economic challenges. *"Black women are three times more likely to die to maternal deaths compared to white women and we know that the vast majority of these deaths are considered preventable,"* Gunja said. US women are also more likely to take multiple prescriptions regularly; 37% of Black women take four or more prescription medications regularly. Over a quarter of US Hispanic women are uninsured. Cardiovascular disease is the leading cause of death for US women. Korea and Japan have the highest life expectancy among women.