



CMS Snapshot

January 6- January 13, 2022

Delivered to you by the Partner Relations Group in the Office of Communications

All releases below are from 2pm Thursday, January 6 through 2pm January 13, 2022.

News Releases

*January 6- [CMS Takes Action to Lower Out of Pocket Medicare Part D Prescription Drug Costs.](#)

Today, the Centers for Medicare & Medicaid Services (CMS) issued a proposed rule that would make updates to the Medicare Advantage (MA) and Medicare Part D programs that would lower out-of-pocket prescription drug costs for beneficiaries with Medicare Part D and improve price transparency and market competition. The proposed rule would improve beneficiaries' experiences with MA and Part D, with a strong emphasis on individuals who are dually eligible for Medicare and Medicaid. Ultimately, CMS is taking action to hold MA and Part D plans to a higher standard in offering benefits and improve health equity in the programs.

*January 7- [HHS-Led Initiative Releases Unified Specification for Patient Addresses in Health Care.](#) The U.S. Department of Health and Human Services' (HHS) Office of the National Coordinator for Health Information Technology (ONC), in collaboration with standards development organizations (SDOs) and health IT stakeholders, today [released the Project US@](#) ('Project USA') Technical Specification Final Version 1.0. This new specification is a unified, cross-standards, health care specification that could be used across industry for representing patient addresses (mailing, physical, billing, etc.) to improve patient matching.

*January 7- [LymeX Diagnostics Prize.](#) As part of its [Lyme Innovation Accelerator](#) (LymeX) partnership with the Steven & Alexandra Cohen Foundation, the U.S. Department of Health and Human Services (HHS) announced today a planned prize competition for scientific, technical, and clinical innovation to transform the diagnostics ecosystem for Lyme disease on [Challenge.gov](#). Expected to launch in Spring 2022, today's pre-launch announcement focuses on advancing innovation to improve diagnostic tests for Lyme disease.

*January 10- [Biden-Harris Administration Requires Insurance Companies and Group Health Plans to Cover the Cost of At-Home COVID-19 Tests, Increasing Access to Free Tests.](#) As part of its ongoing efforts across many channels to expand Americans' access to free testing, the Biden-Harris Administration is requiring insurance companies and group health plans to cover

the cost of over-the-counter, at-home COVID-19 tests, so people with private health coverage can get them for free starting January 15th. The new coverage requirement means that most consumers with private health coverage can go online or to a pharmacy or store, buy a test, and either get it paid for up front by their health plan, or get reimbursed for the cost by submitting a claim to their plan.

*January 10- [HHS Announces 13.8 Million Americans with Health Care Coverage Ahead of Jan 15th Open Enrollment Deadline](#). Thanks to the savings secured through the Biden-Harris Administration's American Rescue Plan, more than 13.8 million consumers have signed up for 2022 health care coverage that started January 1, 2022, through the Affordable Care Act (ACA) Health Insurance Marketplaces, on [HealthCare.gov](#) and State-based Marketplaces (SBMs). This year's Open Enrollment Period, which started on November 1, 2021, and ends on January 15, 2022, continues to outpace previous years' enrollment, including a 21% increase in plan selections through December 15, 2021, compared to the last year's Open Enrollment in the 33 states using the [HealthCare.gov](#) platform.

*January 10- [HHS Secretary Xavier Becerra Instructs CMS to Reassess Recommendation for 2022 Medicare Part B Premium](#). "Today I'm instructing the Centers for Medicare and Medicaid Services (CMS) to reassess the recommendation for the 2022 Medicare Part B premium, given the dramatic price change of the Alzheimer's drug, Aduhelm. With the 50% price drop of Aduhelm on January 1, there is a compelling basis for CMS to reexamine the previous recommendation."

*January 11- [CMS Proposes Medicare Coverage Policy for Monoclonal Antibodies Directed Against Amyloid for the Treatment of Alzheimer's Disease](#). Today, the Centers for Medicare & Medicaid Services (CMS) released a proposed National Coverage Determination (NCD) decision memorandum. The proposed National Coverage Determination would cover Food and Drug Administration (FDA) approved monoclonal antibodies that target amyloid for the treatment of Alzheimer's disease through coverage with evidence development (CED) – which means that FDA-approved drugs in this class would be covered for people with Medicare only if they are enrolled in qualifying clinical trials. The proposed National Coverage Determination is open to public comment for 30 days.

*January 11- [HRSA Updates the Affordable Care Act Preventive Health Care Guidelines to Improve Care for Women and Children](#). Today, the U.S. Department of Health & Human Services (HHS) announced that the Health Resources and Services Administration (HRSA) has updated comprehensive preventive care and screening guidelines for women and for infants, children, and adolescents. Under the Affordable Care Act (ACA), certain group health plans and insurance issuers must provide coverage with no out-of-pocket cost for preventive health services within these HRSA-supported comprehensive guidelines. Among a number of updates, for the first time the guidelines will require such group health plans and insurance plans to provide coverage without a co-pay or deductible for double electric breast pumps.

*January 12- [Readout of the Youth Behavioral Health Roundtable](#). This afternoon, U.S. Department of Health and Human Services (HHS) Secretary Xavier Becerra hosted a virtual roundtable discussion to hear different perspectives from organizations helping tackle the nation's youth mental and behavioral health crisis. Secretary Becerra emphasized that HHS is not waiting to act; the Department is working to advance behavioral health for children, youth, and their families, with a focus on promoting equity, improving access, and fostering innovation.

*January 13- [Ahead of January 15th Open Enrollment Deadline, New Numbers Show 14.2 Million Americans Have Quality, Affordable Coverage - Many With Even Lower Deductibles Under the American Rescue Plan](#). Today, Health and Human Services (HHS) Secretary Xavier Becerra and the Centers for Medicare & Medicaid Services (CMS) Administrator Chiquita Brooks-LaSure are making one final nationwide reminder to get Americans to sign up for quality, affordable health insurance on Healthcare.gov before the January 15, 2022 Open Enrollment deadline. This announcement is bolstered by a new HHS report that shows the majority of consumers enrolled in Affordable Care Act (ACA) coverage on HealthCare.gov have deductibles under \$1,000 thanks to the ACA's cost-sharing reductions (CSRs).

*January 13- [HHS announces efforts to provide more opportunity for contracting with Indian-owned businesses](#). The Indian Health Service is announcing the [final rule on the Buy Indian Act](#) to strengthen its requirements to set aside contracts for Indian-owned and controlled businesses.

Fact Sheets

*January 6- [CY 2023 Medicare Advantage and Part D Proposed Rule \(CMS-4192-P\)](#). CMS is issuing a proposed rule to lower out of pocket Medicare Part D prescription drug costs and improve consumer protections, reduce disparities, and improve health equity in Medicare Advantage (MA) and Part D.

*January 10- [Marketplace 2022 Open Enrollment Period Report: December National Snapshot](#). The Centers for Medicare & Medicaid Services (CMS) reports that 13.8 million Americans have signed up for or were automatically re-enrolled in 2022 individual market health insurance coverage through the Marketplaces since the start of the 2022 Marketplace Open Enrollment Period (OEP) on November 1. This includes 9.7 million plan selections in the 33 states using the [HealthCare.gov](#) for the 2022 plan year, through December 15, 2021, the deadline for January 1 coverage.

Blogs

*January 6- [Attention: Less than 2 weeks left to enroll in 2022 Marketplace coverage](#). You have less than 2 weeks to enroll in, change or update your Marketplace health insurance for 2022. The deadline is Saturday, January 15, 2022.

*January 11- [Building on the CMS Strategic Vision: Working Together for a Stronger Medicare](#). Excerpt: Since its inception in 1965, Medicare has been leading the way in providing affordable, quality coverage and care, playing a key role in the health and financial security of more than 63 million Americans. As the largest single purchaser of health care—with [one in every five](#) health care dollars paid by the program—Medicare serves as a transformative force in the United States. It plays a central role in the Biden Administration’s vision for the Centers for Medicare & Medicaid Services (CMS): to serve the public as a trusted partner and steward, dedicated to advancing health equity, expanding access to affordable coverage and care, and improving health outcomes.

*January 13- [Last chance: 2022 Open Enrollment ends in 2 days](#). You have 2 days left to get health insurance this year. Open Enrollment for 2022 Marketplace health plans ends January 15. Act now to enroll in, or change health coverage that meets your needs and budget. Coverage starts February 1.

CMS has developed a [Virtual Toolkit](#) to help you stay informed on CMS and HHS materials available on the COVID-19. Please share these materials, bookmark the page, and check back often for the most up-to-date information. For more information, please email partnership@cms.hhs.gov