



CMS Snapshot

September 19-26, 2019

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

All releases below are from 2pm Thursday, September 19 through 2pm Thursday, September 26

News Releases

*September 19- [HHS Secretary Azar Statement on Flu Vaccine Executive Order](#). Upon President Trump's signing of an executive order to modernize influenza vaccine manufacturing, Health and Human Services Secretary Alex Azar issued the following statement.

*September 20- [HHS Provides Expertise, \\$14 Million to Advance Development of Investigational Ebola Treatment](#). An investigational treatment for Ebola virus disease will receive advanced development support from the U.S. Department of Health and Human Services' Office of the Assistant Secretary for Preparedness and Response (ASPR). ASPR's Biomedical Advanced Research and Development Authority (BARDA) will provide \$14 million and expertise to Ridgeback Biotherapeutics of Miami to manufacture the therapeutic, mAb114, and support activities required to apply for licensure from the U.S. Food and Drug Administration (FDA).

*September 23- [Secretary Azar Represents the United States during UNGA High-Level Meeting on Universal Health Coverage](#). Secretary of Health and Human Services Alex Azar delivered the United States Government statement as the head of the U.S. delegation at the U.N. General Assembly (UNGA) High-Level Meeting on Universal Health Coverage, urging the meeting to focus on the ultimate goal of healthcare efforts and health coverage: better health for all. The U.S. statement is available [here](#).

*September 24- [HHS Secretary Azar Statement on 2020 Medicare Advantage Rate Decrease](#). Ahead of this fall's Medicare Open Enrollment, the Centers for Medicare & Medicaid Services announced on Tuesday that, on average, Medicare Advantage premiums in 2020 are expected to decline 23 percent from 2018 while plan choices, benefits and enrollment continue to increase.

*September 24- [Remarks by Administrator Seema Verma at the America's Health Insurance Plan's \(AHIP\) 2019 National Conference on Medicare](#). "Good afternoon. It's a pleasure to be here to discuss the future of Medicare. Any discussion about Medicare, or for that matter Medicaid, the Exchanges and the entire employer insurance market is really a discussion about

the American health care system as a whole. In the time we have together, I want to share with you my conviction that the system is unsustainable, the Trump Administration's vision for healthcare, and how you can help lead the reinvention of healthcare markets."

*September 24- [La Administración Trump Reduce las Primas de Medicare Advantage y la Parte D para Personas Adultas Mayores](#). En vísperas de la Inscripción Abierta de Medicare, los Centros de Servicios de Medicare y Medicaid (los CMS por sus siglas en inglés), bajo el mando del presidente Trump, anunciaron hoy que se espera que las primas de Medicare Advantage en 2020 disminuyan un 23 por ciento en comparación al 2018, a la vez que las opciones de planes, beneficios e inscripción siguen creciendo. La prima mensual promedio de Medicare Advantage será la más baja en los últimos trece años para más de 24 millones de personas con Medicare que se predice se inscribirán en un plan de Medicare Advantage para el 2020.

*September 24- [Trump Administration Drives Down Medicare Advantage and Part D Premiums for Seniors](#). Ahead of Medicare Open Enrollment, the Centers for Medicare & Medicaid Services (CMS), under the leadership of President Trump, announced today that, on average, Medicare Advantage premiums in 2020 are expected to decline 23 percent from 2018 while plan choices, benefits and enrollment continue to increase. The Medicare Advantage average monthly premium will be the lowest in the last thirteen years for the more than 24 million people with Medicare who are projected to enroll in a Medicare Advantage plan for 2020.

*September 24- [Secretary Azar Attends Presidential Address at UNGA, Furthers U.S. Partnerships on Health through Bilateral Meetings](#). Health and Human Services Secretary Alex Azar attended President Donald Trump's address to the 74th U.N. General Assembly (UNGA). During his address, President Trump emphasized themes Secretary Azar also shared as the U.S. representative at the UNGA High-Level Meeting on Universal Health Coverage, including the sovereignty of nations to determine the best way to deliver better health for all.

*September 25- [Secretary Azar Attends Meeting of Regional Ministers of Health on Ebola Preparedness and Response at UNGA](#). During the 74th United Nations General Assembly (UNGA) week, Health and Human Services Secretary Alex Azar co-hosted the "Meeting of Regional Ministers of Health on Ebola Preparedness and Response" with the Democratic Republic of Congo (DRC) and the World Health Organization (WHO) to discuss the coordinated response to the Ebola outbreak in the DRC and preparedness in the region. The DRC President Felix Tshisekedi, the DRC Minister of Health Eteni Longondo, the DRC Technical Secretary of the Multi-Sectoral Committee for the Response to Ebola Jean-Jacques Muyembe, and the World Health Organization Director-General Tedros Adhanom Ghebreyesus, along with Ministers of Health from Uganda, Republic of the Congo, and Rwanda, with senior officials from South Sudan, the UN, the World Bank, the United Kingdom, and European Commission participated in this meeting.

*September 26- [CMS' Discharge Planning Rule Supports Interoperability and Patient Preferences](#). The Centers for Medicare & Medicaid Services (CMS) today issued a final rule that

empowers patients preparing to move from acute care into post-acute care (PAC), a process called “discharge planning.” Today’s rule puts patients in the driver’s seat of their care transitions and improves quality by requiring hospitals to provide patients access to information about PAC provider choices, including performance on important quality measures and resource-use measures – including measures related to the number of pressure ulcers in a given facility, the proportion of falls that lead to injury, and the number of readmissions back to the hospital. The rule also advances CMS’s historic interoperability efforts by requiring the seamless exchange of patient information between healthcare settings, and ensuring that a patient’s healthcare information follows them after discharge from a hospital or PAC provider.

*September 26- [Trump Administration Puts Patients Over Paperwork by Reducing Healthcare Administrative Costs](#). The Centers for Medicare & Medicaid Services (CMS) is taking action at President Trump’s direction to “cut the red tape,” bringing relief to America’s healthcare providers by reducing unnecessary burden, allowing them to focus on their top priority – patients. The Omnibus Burden Reduction (Conditions of Participation) Final Rule strengthens patient safety by removing unnecessary, obsolete, or excessively burdensome health regulations on hospitals and other healthcare providers. This rule advances CMS’s Patients over Paperwork initiative by saving providers an estimated 4.4 million hours previously spent on paperwork annually, with overall total provider savings projected to be approximately \$8 billion over the next 10 years, giving doctors more time to spend with their patients.

Fact Sheets

*September 26- [CMS Discharge Planning Rule Supports Interoperability and Patient Preferences](#). The Centers for Medicare & Medicaid Services (CMS) today issued a final rule that empowers patients to make informed decisions about their care as they are discharged from acute care into post-acute care (PAC), a process called “discharge planning.” In addition to improving quality by improving these care transitions, today’s rule supports CMS’ interoperability efforts by promoting the seamless exchange of patient information between health care settings, and ensuring that a patient’s health care information follows them after discharge from a hospital or PAC provider.

*September 26- [Omnibus Burden Reduction \(Conditions of Participation\) Final Rule CMS-3346-E](#). The Centers for Medicare & Medicaid Services (CMS) took action at President Trump’s direction to “cut the red tape,” by reducing unnecessary burden for American’s healthcare providers allowing them to focus on their priority – patients. The Omnibus Burden Reduction (Conditions of Participation) Final Rule removes Medicare regulations identified as unnecessary, obsolete, or excessively burdensome on hospitals and other healthcare providers to reduce inefficiencies and moves the nation closer to a healthcare system that delivers value, high quality care and better outcomes for patients at the lowest possible cost.

Blog

*September 19- [Save time & paper—get “Medicare & You” handbook electronically!](#) Have you signed up yet to get your “Medicare & You” handbook electronically? It’s an easy way to get the Medicare information you need while helping us reduce paper waste. The eHandbook is an online version of your trusted “Medicare & You” handbook, with all the same information as your paper copy. The “Medicare & You” eHandbook is searchable, letting you find the information you need quickly and easily.

*September 25- [Get Medicare information in an accessible format.](#) Just as there are many types of people with Medicare, there are many ways for you to get information about our program. Did you know you have the right to get Medicare information in an accessible format, like Braille, large print, data/audio files, relay services and TTY communications?

Upcoming Events and Items of Interest:

***Back-to-School and School-Based Outreach on Medicaid and CHIP**

Before and during the school year, there are a variety of ways to let parents and caregivers know that their children and teens may be eligible for free or low-cost health insurance through Medicaid and the Children’s Health Insurance Program (CHIP). With health insurance, they can get the immunizations, check-ups, eye exams, dental visits and other care they may need to fully participate in classroom, after-school and summer activities. Schools are great partners to help reach and enroll families with children who are eligible for Medicaid and CHIP.

The Insure Kids Now Campaign has outreach tools and materials to support school-based outreach efforts. Below are outreach materials specifically tailored for Back-to-School and other school-based outreach. You can learn about how others have used these and other campaign materials in our eNewsletters, webinars and videos.

The School-Based Outreach and Enrollment Toolkit can be found [here](#). Tips and ideas, palmcards, posters, social media messages, sample newsletter articles and Public Service Announcements (PSAs) scripts can be found [here](#).

For more information please email partnership@cms.hhs.gov