

The Smarter Health Care Coalition has been hard at work in 2022 advocating for policies to make health care smarter. Below is a brief summary of some of our recent successes – that wouldn't have been possible without the impressive breadth and diversity of our membership and your hard work – in addition to our areas of focus for next year. As you can see below, we've made noticeable progress (the check marks), yet much work remains (the circles we hope to turn into checks with your help and support next year).

We are counting on your continued engagement to help us expand our track record to ensure easier access to high-value care for Americans and their families.

# 2022 in Review Goals for 2023

## Smarter Health Care Coalition

# Expand pre-deductible coverage of chronic disease prevention for Health Savings Account-eligible health plans

- Celebrated the new insulin safe harbor enacted as part of the Inflation Reduction Act (IRA) of 2022, which allows Health Savings Account-eligible plans to cover "selected insulin products" pre-deductible, without regard to whether the individual has been diagnosed with diabetes (1).
- Worked with SHCC members to continue educating employers and health plans about Notice 2019-45, including estimates that 75-80% of surveyed health plans expanded coverage and 76% of surveyed employers expanded coverage.
- Shared new data from the Employee Benefit Research Institute on the premium impact of expanding pre-deductible coverage to chronic disease management medications in HSA-eligible plans. The EBRI brief details key findings on the effect of expanding pre-deductible coverage to 116 drug classes used to manage chronic conditions.
- Met with US Department of Treasury and the Internal Revenue Service to discuss the <u>letter</u> from the Smarter Health Care Coalition to the administration raising awareness about the overwhelming, positive response to IRS Notice 2019-45 + asked Treasury and IRS for additional flexibility, especially allowing employers and plans to cover mental and behavioral health pre-deductible.
  - Follow up conversations with White House staff and the Department of Health and Human Services requested.
  - Continue sharing additional data and resources with the administration and congressional staff, to encourage expansion of the guidance.
- Conducted nearly a dozen meetings (2) with Finance committee staff +
   bipartisan congressional champions to advocate for the enactment of S. 1424
   and H.R. 3563, the Chronic Disease Management Act, which allows employers
   and plans more flexibility to determine what high-value care can be provided
   pre-deductible, with an emphasis on mental and behavioral health drugs and
   services.
  - Host a virtual policymaker briefing on the need for Congress to enact the Chronic Disease Management Act in 2023, include a patient + business that expanded pre-deductible coverage and underscore the need for additional flexibility CDMA provides.
  - Continue additional advocacy to advance CDMA + lean in on the connection between chronic disease and mental and behavioral health.



<sup>(1)</sup> The IRA defines "selected insulin products" as any dosage form (including vial, pump, or inhaler) of any type of insulin (rapid-acting, short-acting, intermediate-acting, long-acting, ultra long-acting, and premixed)

## 2022 in Review Goals for 2023

## Smarter Health Care Coalition

# Protect the ability of employers and health plans to offer preventive services pre-deductible

- The Coalition continues to analyze the implications of Braidwood Management Inc. v. Becerra (formerly Kelley v. Becerra), which strikes down as unconstitutional an Affordable Care Act (ACA) requirement that health plans cover and waive costsharing for certain high-value preventive services.
- The Coalition held multiple convenings with academics and experts following the U.S. District Court in the Northern District of Texas <u>issuing</u> a ruling to strike down key parts of the preventive services provision of the ACA. The convenings provided members with critical information on the lawsuit and potential next steps for the Court.
  - The Coalition will send a letter to Treasury and IRS early in the new year emphasizing the importance of Notice 2013-57 and the continued allowance of Health Savings Account-eligible plans to cover high-value services pre deductible.
  - The Coalition continues following the case and strategizing a potential congressional response with key committee staff.

### Expand access to anti-obesity therapy and medications

- The Coalition submitted a <u>letter</u> to both the House and Senate (Chairman Richard Neal and Ranking Member Kevin Brady, and Chairman Ron Wyden and Ranking Member Mike Crapo) advocating for the passage of the Treat and Reduce Obesity Act (H.R. 1577 and S.596). The Treat and Reduce Obesity Act would enhance Medicare beneficiary access to health care providers providing intense behavioral therapy for obesity and allow Medicare Part D to cover FDA-approved obesity drugs.
  - The Coalition will advocate for enactment of this important legislation next year, emphasizing the disparity that plans participating in the Federal Employee Health Benefit Program are required to cover these important medications, yet Medicare Part D plans are prohibited from covering them.

# Decrease the prevalence of low-value care and re-direct resources to high-value care

- The Coalition hosted a virtual policymaker briefing focusing on the prevalence of low-value care and the additional resources that would be available for high-value care if spending on low-value care decreases.
  - Recruit members of Congress to champion legislation that will reduce low-value care.
  - Host a virtual policymaker briefing featuring the legislation.



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## Smarter Health Care Coalition

#### Address social determinants of health (SDOH)

- The Coalition met with CMMI's V-BID team to discuss the recommendations laid out in the SDOH white paper released by SHCC in 2020. We introduced CMMI to the Coalition's definition of "value" for SDOH services in the context of benefit design, and outlined our key recommendations for federal regulators and legislators. This was the first step in engaging in a long-term dialogue with CMMI regarding SDOH.
  - Work with Members of Congress to build cosponsors and advance introduced legislation addressing SDOH (<u>H.R. 3969</u> and <u>H.R. 4074</u>).

**Expand the Medicare Advantage demonstration program and** advocate for the extension of uniformity flexibility to Medicare Part D Arranged for an update from the CMMI staffer responsible for running the CMS V-BID model demonstration. • Continue working with CMMI and health plans to expand awareness of the V-BID model demonstration. Work with hill champions to extend flexibilities to Part D that allow Medicare Advantage plans participating in the V-BID model demonstration to alter cost sharing and extend supplemental benefits to more beneficiaries. Kept members up to date and provided summaries on relevant Medicare Advantage reports released by CMS, which includes the first evaluation report of Phase II of the Medicare Advantage Value Based Insurance Design (VBID) Model. Other important areas to protect and expand value-based payment and benefit design **C**Lauded the passage of the provision in the IRA that extends first-dollar coverage of high-value vaccines to approximately 50 million seniors enrolled in Medicare Part D, and provides states with incentives to implement the same coverage for adults in traditional Medicaid. SHCC previously sent a letter of support for two vaccine bills which would make it easier for more people in Medicare and Medicaid to learn about and gain access to high value vaccines. Applauded CMS for ensuring coverage of high-value screenings by finalizing their proposal in the CY 2023 Medicare Physician Fee Schedule by reducing the minimum age payment and coverage limitation from 50 to 45 years for certain colorectal cancer screening tests and expanding the regulatory definition of colorectal cancer screening tests to include a complete colorectal cancer screening. where a follow-on screening colonoscopy after a Medicare covered non-invasive stool-based colorectal cancer screening test returns a positive result (3). (3) Mark Fendrick, Director of the University of Michigan Center for Value-Based Insurance Design and Coalition member, co-authored a new study. published by JAMA Network Open on cost-sharing for colorectal cancer screening. The study, which examines the effects of policies in Oregon and Kentucky that eliminate insurance cost-sharing for colorectal cancer screening procedures, revealed findings that suggest the removal of financial barriers for the entire colorectal cancer screening process will lead to improved patient centered outcomes, enhanced equity and lower healthcare expenditures.



#### **Annual Policy Summit**

On April 7, 2022, the Coalition in partnership with the <u>Center for Value-Based Insurance Design (V-BID)</u> held a Virtual Policy Summit: *Innovations in Benefit Design for Chronic Disease Management*. The Summit featured keynote remarks by Centers for Medicare & Medicaid Services Director, Dr. Meena Seshamani. Policymakers also heard from a range of thought leaders on a variety of topics including obesity, low-value care, chronic disease management, and more.

 The Coalition is committed to hosting the 2023 Policy Summit in-person in Washington, DC in early 2023. We will convene policymakers, stakeholders and leading experts to advance our shared goal of achieving smarter health care for all.

#### & More!

The Coalition continues to host monthly discussions to collaborate, share updates on Coalition activities, and strategize our approach to advancing our ongoing priorities. In 2022, we heard from:

- Asha Samuel, Congressman Blumenauer's Office
- Anna Marshall, Senator Cortez Masto's Office
- Caleb Graff, Senate Finance Committee Ranking Member Crapo's Office
- Mark Fendrick, Director of the University of Michigan Center for Value-Based Insurance Design
- Dr. Purva Rawal, Chief Strategy Officer, CMMI
- Katie Keith, Associate Research Professor, Center on Health Insurance Reforms at Georgetown University
- Danielle Janowski, Senator Thune's Office

Thank you for a fantastic year!
We look forward to continuing our important work
with you in 2023.

Sincerely,

Katy, Ray, and Andrew Co-Directors, Smarter Health Care Coalition