

23 Health Systems Dropping Medicare Advantage Plans | 2024

Medicare Advantage provides health coverage to more than half of the nation's older adults, but some hospitals and health systems are opting to end their contracts with MA plans over administrative challenges.

Among the most commonly cited reasons are excessive prior authorization denial rates and slow payments from insurers.

In 2023, Becker's began reporting on hospitals and health systems nationwide that dropped some or all of their Medicare Advantage contracts.

Data on this issue is limited. But in January, the Healthcare Financial Management Association released a survey of 135 health system CFOs, which found that 16% of systems are planning to stop accepting one or more MA plans in the next two years. Another 45% said they are considering the same but have not made a final decision. The report also found that 62% of CFOs believe collecting from MA is "significantly more difficult" than it was two years ago.

23 health systems dropping Medicare Advantage plans in 2024:

#13 - Houston-based Memorial Hermann Health System stopped contracting with Humana Medicare Advantage on Jan. 1.

Editor's note: This is not an exhaustive list. It will continue to be updated this year.

[Read More Here...](#)

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Advocates Rush To Congress, White House To Extend Telehealth Prescribing For Two Years, After DEA's Plans Leaked

The Drug Enforcement Administration is reaching the final steps of its proposed rulemaking process for the prescription of controlled substances via telehealth, but its plans have been leaked.

The agency's rule, which is under review at the White House, is a far cry from the unfettered access telehealth advocates were hoping for, a former DEA official told them, according to an anonymous source who spoke to Fierce Healthcare.

The telehealth prescribing flexibility has been used since 2020 to prescribe medications for conditions like substance use disorder and attention deficit disorder. The DEA proposed two rules for telehealth controlled substance prescribing early last year but pulled them back after receiving 38,000 public comments.

The new proposed rule was expected to be out in September, according to the administration's schedule of regulatory actions. The rule would set a post-pandemic norm for patients receiving medications through telehealth.

Though the proposed rule has not been approved by the White House's Office of Management and Budget, advocates are already scrambling to change course. [Read More Here...](#)



GLP-1s Could Become Medicare's Most Expensive Drugs

GLP-1 drugs could put a major strain on Medicare Part D's budget in the future, according to a study published on August 27 in the medical journal *Annals of Internal Medicine*.

Many Medicare beneficiaries can't get GLP-1 coverage because federal law currently doesn't allow the program to cover drugs prescribed only for weight loss. But in March 2024, after clinical trial results published in November 2023 showed that semaglutide-based GLP-1s such as Novo Nordisk's Wegovy can reduce cardiovascular incidents, Medicare announced that Part D plans could cover Wegovy for patients with an elevated body mass index (BMI) and "established cardiovascular disease."

Medicare has yet to provide an exact definition of established cardiovascular disease, so it's unclear how many beneficiaries would qualify for the coverage. But even conservative estimates have researchers projecting that GLP-1s such as Wegovy could become Part D's most expensive drugs.

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Payers Move To Ditch Deductibles

The trend of health insurers launching products without traditional deductibles is accelerating, reflecting a broader shift toward consumer-centric healthcare. As member expectations evolve, insurers are increasingly offering plans that emphasize transparency and simplicity.

Eliminating deductibles in health plans is associated with improving health outcomes. Research has indicated that high-deductible health plans may negatively impact health outcomes, particularly for individuals with chronic conditions like diabetes. A study recently published in JAMA Open Network found that adults with diabetes who switched to HDHPs were more likely to experience severe complications, such as myocardial infarction, stroke, and end-stage kidney disease, compared to those who remained on standard plans.

Employer interest in deductible-free health plans is also growing, driven by concerns over healthcare costs among employees. According to Mercer's "Health and Benefit Strategies for 2024" report, approximately 40% of employers now offer low or no-deductible plans, and 15% provide coverage with no premiums.

UnitedHealthcare's Surest plan, which eliminates deductibles, is a notable example of this trend, gaining traction as the company's fastest growing commercial product. The plan also leverages price transparency tools to help members make informed choices.

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US Will Still Pay At Least Twice As Much After Negotiating Drug Prices

The U.S. government's first-ever negotiated prices for prescription drugs are still on average more than double, and in some cases five times, what drugmakers have agreed to in four other high-income countries, a Reuters review has found.

The U.S. Medicare health plan, which covers more than 67 million people, recently unveiled new maximum prices, opens new tab for the first 10 high-cost medicines negotiated under the Biden Administration's Inflation Reduction Act.

This is the first time Medicare has disclosed actual drug prices, which are largely hidden behind a complicated U.S. system of rebates and discounts. The lower prices will result in savings of \$6 billion in 2026, the first year they take effect, Medicare said.

[Read More Here...](#)

Size Of Physician Networks Varies Widely Among ACA Marketplace Plans, Study Finds

One in five consumers with Marketplace plans reported that in the past year, a provider they needed was not covered by their insurance, according to the 2023 KFF Survey of Consumer Experiences with Health Insurance. Nearly 1 in 4 said a provider they needed to see who was covered by their insurance did not have appointments available.

“Enrollees with Marketplace coverage were more likely than those with employer coverage to face these challenges,” KFF reported. “While the Centers for Medicare and Medicaid Services establishes minimum standards for the adequacy of provider networks for Marketplace plans, insurers retain considerable flexibility in how they design networks and how many providers they include. As a result, the breadth of plan networks varies considerably within counties, presenting challenges for consumers who need to select a plan with little information on the network breadth of their options.”

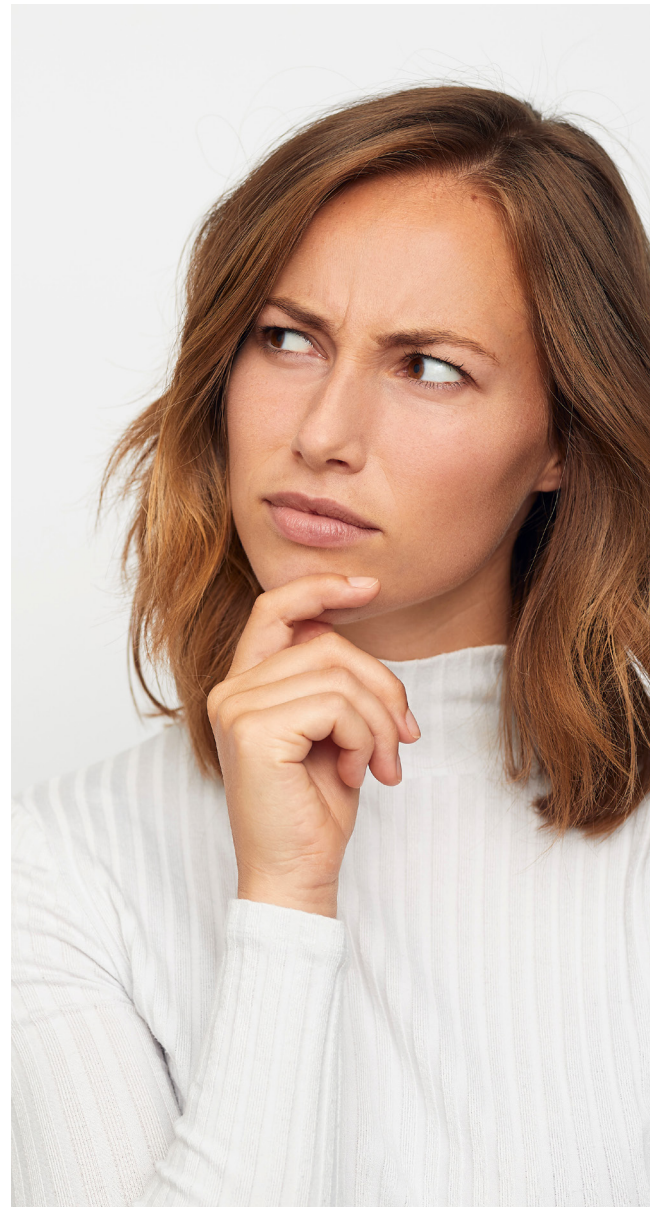
[Read More Here...](#)

The Dirty Trick Health Insurers Are Playing That You Don't Know About

When it comes to health insurance, there's a sneaky little metric known as the medical loss ratio (MLR). Never heard of it? Most members of Congress hadn't either until I talked about it when I testified before a Senate committee back in the day. A few months after I testified, President Obama signed the Affordable Care Act (ACA) into law, and it contains a provision that deals with the MLR.

Now, before your eyes glaze over and you start thinking about literally anything else, let's break it down in simple terms: The MLR tells you how much of your premium dollar your insurance company uses to pay for your medical care.

[Read More Here...](#)



Six Rating Agencies To Pay More Than \$49 Million Over Recordkeeping Failures

Six credit rating agencies agreed to pay a total of more than \$49 million in civil penalties to settle U.S. Securities and Exchange Commission charges they broke record-keeping rules, the regulator said Tuesday.

Moody's Investors Service, S&P Global Ratings, Fitch Ratings, HR Ratings de Mexico, A.M. Best Rating Services and Demotech each admitted to significant failures to maintain and preserve electronic communications, the SEC said.

Moody's and S&P agreed to pay \$20 million each, while Fitch agreed to pay \$8 million, the SEC said. A.M. Best will pay \$1 million, HR Ratings de México agreed to pay \$250,000, and Demotech will pay \$100,000.. [Read More Here...](#)



A Federal Judge Struck Down FTC's Ban On Noncompetes. What Does This Mean For Healthcare?

A federal judge in Texas recently blocked the FTC's noncompete ban, which was approved by the commission on a 3-2 vote in April and was set to take effect September 4. The ban would have made existing noncompetes for most workers unenforceable (except for senior executives). Employers also would have been banned from enforcing any new noncompetes, including with senior executives. The FTC argued that the ban would have increased innovation and given workers more freedom. It would not have applied to nonprofit organizations, however.

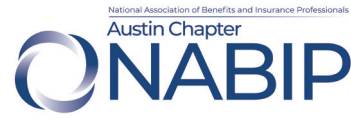
The judge's decision has important implications for healthcare including physicians, hospitals, private practice medical groups and others in the industry, according to Brandon Zarsky, partner in Frier Levitt's Healthcare Practice Group.

"Physicians are commonly subject to noncompetes, and a lot of other mid-level healthcare providers — like physician assistants, nurse practitioners, etc — are subject to them as well. ... [If the ban had gone through] there would have been a lot more availability for mobility for providers, which would have been beneficial to employees, but would have caused a lot of chaos for management," Zarsky said in an interview. [Read More Here...](#)



April Chapter Agendas

AUSTIN



www.austinahu.org

NABIP Austin Annual Golf Tournament



September 16, 2024
9:00 AM - 5:00 PM
[Add to Calendar](#)



BALCONES COUNTRY CLUB
8600 Balcones Club Drive
Austin, TX 78750
[Venue website](#)
[Directions](#)

REGISTER NOW



LONESTAR

COASTAL BEND



www.lonestarahu.org




www.nabipcoastalbendtx.org

Bloodies, Benefits, and Brunch: GA's Meeting

October 10 @ 11:00 am - 1:00 pm



 [ADD TO CALENDAR](#) ▾

DETAILS

Date:

October 10

Time:

11:00 am - 1:00 pm

Event Category:

Monthly Meeting

ORGANIZER

NABIP-FW

[View Organizer Website](#)

VENUE

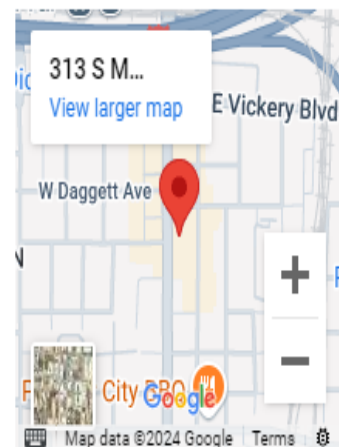
Hot Box Biscuit Club

313 S Main St

Fort Worth, TX 76104

United States + [Google](#)

[Map](#)



DALLAS

www.dahu.org



NABIP-Dallas (DAHU) Monthly Luncheons and special events will be held at Vouv Dallas!

Vouv Event Space, 4445 Sigma Road,
Dallas, TX 75244
<https://vouvallas.com>



September 18 2024 | MONTHLY LUNCHEON 11:30 - 1:00

Speaker: Michelle McLaren – "Marketing Yourself: Letting people know who you are and what you do while remaining compliant."

[REGISTER HERE](#)

NABIP-Dallas (DAHU) Upcoming Dates - Details to follow

October 16 2024 | MONTHLY LUNCHEON 11:30 - 1:00

Speaker: Take Command Health – "Understanding and working with ICHRAs and QSEHRAs."

November 20 2024 | MONTHLY LUNCHEON 11:30 - 1:00

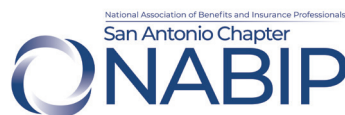
Speakers: Mike and Shannon Meroney – Legislative update

December 2024 (TBD) | Happy Hour

Time and Location to be determined. This end of year celebration will include Happy Hour, dinner and awards...stay tuned!

SAN ANTONIO


www.sanantonioahu.org





FUTURE MEETINGS



NABIP SAN ANTONIO BOARD MEETING

 September 18, 2024

 10:00 AM to 11:00 AM

 [REGISTRATION LINK TO FOLLOW](#)

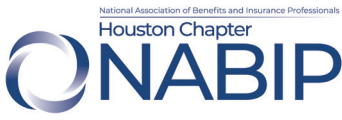
BOD Meeting

[REGISTER NOW](#)

[View Details](#) ▶

HOUSTON

www.nabip-htx.org



Legislative Happy Hour



September 19, 2024 | 3:00 PM - 5:00 PM
[Add to Calendar](#)

Eureka Heights | 941 W 18th Street
Houston, TX 77008
<https://www.eurekaheights.com/Directions>

Post Share Share

REGISTER NOW

Legislation on Tap!

A Happy Hour with a Purpose!

Tickets

\$20.00 Member Ticket - Gets you 2 Drink Tickets

\$25.00 Guest Ticket - Gets you 2 Drink Tickets

EAST TEXAS

www.nabip-etx.org



NABIP-ETX September Monthly Luncheon - Boomer Benefits

When September 20, 2024
11:30 AM - 1:00 PM (CST)
Location Heartland Security Insurance Group, 501 Shelley Drive, Tyler, TX 75701 - Main Floor Conference Room



Boomer Benefits
CMS Proposed Rules for Medicare Advantage/PDP
1-Hour CE
Presented by
Danielle Kunkle Roberts

Registration

- **Member Monthly Luncheon - \$20.00**
Lunch begins at 11:30 - Session starts at 12pm
- **Multiple Members Monthly Luncheon - \$20.00**
For use when registering multiple members
- **Non-Member Monthly Luncheon - \$25.00**
11:30 lunch - Sessions begins at 12pm
- **Non-Member, No lunch - \$5.00**
Session begins at 12pm

SOUTH TEXAS

SUMMIT - 5HR CE
SEPTEMBER 5/6, 2024



www.nabipsotx.org



It's A Wrap - NAVBIP-SOTX 2024 Summit

