

Weekly Digest

• June 10, 2024 •

EMPLOYEE
BENEFITS

CMS Redesigns the Medicare Part D Prescription Drug Program Beginning in 2025

"Employers are not required to offer creditable prescription drug benefits, and there is no penalty for employers who do not. The impact is only to Medicare eligible employees or their eligible dependents who are not offered creditable coverage and who do not enroll in Medicare Part D when they are initially eligible for benefits."

[Full Article](#)

Woodruff-Sawyer & Co.



The Rise of Fiduciary Health Plan Litigation

"Given the billions of dollars spent every year through ERISA-covered plans, the importance of that benefit to the personal well-being of American workers and the inconsistency in the amounts paid for pharmacy benefits from plan to plan, it is no surprise that litigation relating to ERISA-covered health plans is on the rise. We are seeing increased challenges to how plans choose to provide pharmacy benefits to their employees and, in particular, their choice of pharmacy benefit managers (PBMs)." [Full Article](#)

The Wagner Law Group

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Gag Clause Prohibition Compliance Attestation: Annual Submission Instructions

"By submitting a Gag Clause Prohibition Compliance Attestation (GCPCA) to the Departments, a plan or issuer is attesting that, for the period of the attestation, it has not entered into any agreement that violates Code that violates Code Section 9824, ERISA Section 724, and PHS Act Section 2799A-9." [Full Article](#)

***U.S. Department of Health and Human Services;
U.S. Department of Labor; and U.S. Treasury Department***



Back to the Future: HHS Publishes ACA Section 1557 Nondiscrimination Final Rule Similar to 2016-Era Regulations

"Covered entities have until July 5, 2025 to comply with the **Final Rule's** policies and procedures and notice of availability requirements. Health insurance coverage or other health-related coverage, including coverage that was not subject to Section 1557 prior to the Final Rule's publication, must make changes to their benefit designs by the first day of the first plan year beginning on or after January 1, 2025." [Full Article](#)

Groom Law Group

Congress Seeks to Extend COVID-19 Telehealth Flexibilities Through 2026 and Expand Reimbursement

"[The Telehealth Modernization Act of 2024 ([HR 7623](#))] largely seeks to continue Medicare's hospital-at-home program through 2029, which provides resources for at-home care for patients who need acute-level care. The Bill would also eliminate the geographic originating site restrictions on telehealth visits through 2026. Absent these changes, the programs will expire at the end of 2024." [Full Article](#)

Sheppard, Mullin, Richter & Hampton, LLP



Satisfaction With Various Aspects of Health Care Is High

"According to findings of the Employee Benefit Research Institute (EBRI)/Greenwald Research Consumer Engagement in Health Care Survey, most plan enrollees are satisfied with their health plan, but high-deductible health plan (HDHP) enrollees are less likely to be extremely or very satisfied than traditional plan enrollees." [Full Article](#)

Employee Benefit Research Institute [EBRI]