

The Three Minute Read™

Insights from the Healing American Healthcare Coalition™

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From the Editor: The topics in the article summaries in this issue include the Shkreli Awards, fentanyl, LillyDirect, dialysis rate cuts, cancer statistics and rural hospital challenges. Click on the headline for the full article. If you enjoy this curated newsletter, please subscribe [here](#).



[10 healthcare names get Shkreli Awards for bad behavior](#), by Molly Gamble, Becker's

Hospital Review, 1/9/24

TMR Topline – The Lown Institute released [its 2023 Shkreli Awards](#), named for the infamous “pharma bro” Martin Shkreli who acquired Daraprim, a 62-year-old drug for treating toxoplasmosis and raised its price from \$7.50/pill to \$750. The 7th Annual list contains the “most egregious examples of profiteering and dysfunction in healthcare.” The 2023 awardees are:

1. Columbia and its affiliated hospital for “little intervention” in physician's sexual assaults.
2. Nonprofit CommonSpirit Health for paying its CEO \$35.5 million.
3. Pharmacy companies that claim Medicare drug price negotiation violates their constitutional rights.
4. Hospitals partnering with private equity to offer medical credit cards.
5. A vascular physician allowed to practice despite discipline in a dozen states.
6. GlaxoSmithKline for years of marketing Zantac despite its potential carcinogenic compound.
7. A cardiologist accused of placing dozens of unnecessary stents in patients.

8. Hospitals that allegedly “dump” sick, homeless patients on the street.
9. Physicians who test products on vulnerable patients for payments from medical device makers.
10. Hospital that proposed to transfer a comatose patient out of the country.

TMR's Take: Big Pharma should be #1 on the list. Complaining that being forced to negotiate with Medicare is unconstitutional? Seriously? US patients pay, on average, 3.44 times what patients in other [OECD member nations](#) pay for brand name drugs. Big Pharma isn't turning down business in those countries. Those who don't want to negotiate can either pay an [excise tax](#) on the designated drugs or elect to not participate in the Medicare and Medicaid programs. That's capitalism.



[Teen drug overdoses hit record high, driven primarily by fentanyl poisoning, says](#)

[new report](#), by Bryan Llenas, Fox News, 1/11/24

TMR Topline – The death rate for teens from drug overdoses has more than doubled since 2018 according to a study in the new England Journal of Medicine. The record number of 1,125 teen deaths in 2022 was driven primarily by fentanyl poisonings from counterfeit pills. It's the third-leading cause of death for teenagers across the country after firearm-related injuries and motor vehicle crashes. The study named Arizona, Colorado and Washington as hotspot states. Experts recommend that parents discuss the dangers of counterfeit pills and keep over-the-counter [Naloxone or Narcan](#) available at home.



[Eli Lilly weight-loss drug platform draws experts' concern](#), by Erica Carbajal, Becker's Hospital Review, 1/11/24

TMR Topline – Eli Lilly has [launched](#) LillyDirect, a website that connects people with independent providers for obesity medications, including Zepbound. It is working with Form, a telehealth provider that specializes in obesity medicine, for weight-loss prescriptions. Although physicians who prescribe Zepbound through Form will not be compensated by Eli Lilly, the American College of Physicians expressed concern that the direct-to-consumer approach lacks a valid patient-physician relationship. Other experts say LillyDirect will make access easier for many people who would benefit from weight-loss medications, particularly those who face barriers in getting to see a specialist in person.



[Safety net dialysis centers hit with CMS payment cuts](#),

by Diane Eastabrook, Modern Healthcare, 1/10/24

TMR Topline – CMS [launched](#)

its End Stage Renal Disease (ESRD) Treatment Choices model in 2021 to incentivize providers to move dialysis treatment to the home or encourage transplants to reduce health-care spending. Approximately 3,500 dialysis facilities were randomly selected to participate in the pilot program. Participants receive bonuses or reimbursement cuts based on their performance. A study of nearly 2,200 dialysis facilities found that facilities serving mostly Black and Hispanic patients experienced CMS reimbursement cuts more frequently in the first year of the payment model for not moving more treatments to the home.

CMS also released a report that found that the ESRD Treatment Choices model is not producing the results the agency intended. The payment model has not had any effect on the use of home dialysis or transplants during the model's first two calendar years. CMS is trying to reduce the overall cost of treating end-stage renal failure through this incentive program that runs through 2027. In 2019 kidney failure cost Medicare approximately \$37 billion, 7% of total spending. Home dialysis treatments cost about \$50 less, mostly due to the cost of facility staff. Uptake of home dialysis has been disappointingly slow. In 2021, about 11% of Black patients and 12% of Hispanic patients with renal failure used or received home dialysis compared with nearly 15% of white patients.

TMR's Take: Home dialysis requires a clean, safe environment and a caregiver supporting the patient. Many patients simply don't have the space or infrastructure to support home dialysis.



[More than 2 million Americans will get cancer this year: Here's what you should know](#), by Ken

Alltucker, USA Today, 1/17/24

TMR Topline – The American Cancer Society's annual [cancer statistics report](#) is a mixed bag: mortality rates down 33% from 1991 through 2021, but incidence is up, especially among obesity-driven cancers. The five-year survival rate improved from 49% in the mid-1970s to 69% from 2013 to 2019. Lung, colorectal and pancreas cancers cause the most deaths. Cervical cancer rates are declining in women under 30, reflecting the effectiveness of the HPV vaccine that was approved by the FDA in 2006. According to William Dahut, the Society's chief scientific officer, about 42% of all cancers can be prevented through lifestyle changes or other factors.

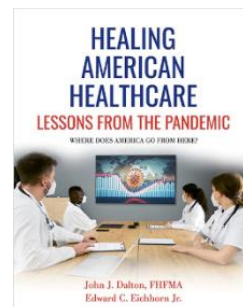


[Federal Program to Save Rural Hospitals Feels 'Growing Pains'](#),

by Sarah Jane Tribble and Tony Leys, KFF Health News, 1/16/24

TMR Topline – The Rural Emergency Hospital program guarantees hospitals extra cash if they provide emergency and outpatient services but end inpatient care. Hospitals receive a 5% increase in Medicare payments, plus an average annual payment of about \$3.2 million. Keokuk Area Hospital closed in 2022, but is one of only 18 out of 1,700 rural hospitals that has applied for the designation. Rural health leaders and federal lawmakers are working to tweak the new program to attract more applicants. Changes being considered include allowing overnight beds for patient who need a moderate level of care and participation in the 340B drug discount program.

TMR's Take: Rural hospitals need innovative, flexible approaches to preserve access to quality care at reasonable costs.



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