



Federal Issues

Legislative

U.S. Senate Passes Bipartisan Maternal Health Bill

On Thursday, the U.S. Senate passed the [Protecting Moms Who Served Act](#) -- bipartisan legislation that is part of the twelve bill "[Mominibus](#)" package, aimed at improving black maternal health. The legislation invests in Department of Veterans Affairs (VA) programs to implement maternity care coordination and requires the Government Accountability Office (GAO) to report on maternal mortality and severe maternal morbidity among pregnant and postpartum veterans.

In May, the [House version](#) of the legislation cleared the chamber by voice vote. The House is now likely to bring up the Senate-passed version for final passage. Other pieces of the Mominibus package are likely to be included in the broader budget reconciliation bill currently being negotiated in Congress.

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Regulatory

HHS Releases Draft Strategic Plan for FY 2022-2026 with Focus on Health Equity and Infrastructure

The Department of Health and Human Services (HHS) is seeking public comment on its draft [Strategic Plan for Fiscal Years 2022 - 2026](#). In this plan, HHS outlines five strategic goals:

1. Protect and Strengthen Equitable Access to High Quality and Affordable Health Care
2. Safeguard and Improve National and Global Health Conditions and Outcomes
3. Strengthen Social Well-being, Equity, and Economic Resilience
4. Restore Trust and Accelerate Advancements in Science and Research for All
5. Advance Strategic Management to Build Trust, Transparency, and Accountability

Why this matters: HHS updates its strategic plan every four years. The strategic plan defines the agency's mission, goals, objectives, and how it will measure its progress in addressing specific national problems over a four-year period. The 2022-2026 Strategic Plan emphasizes the agency's commitment to reducing healthcare disparities and promoting health equity, addressing social determinants of health, increasing access to quality healthcare while reducing costs, and strengthening the system's disaster preparedness and the nation's public health infrastructure.

OSHA Submits Vaccine Rule to OMB

On Tuesday, the Occupational Safety and Health Administration submitted text for COVID-19 Vaccination and Testing Emergency Temporary Standard Rulemaking (RIN 1218-AD42) to the Office of Management and Budget. After OMB reviews the final rule, the emergency temporary standard will be published in the Federal Register when it goes into effect.

Why this matters: President Biden announced last month that the Labor Department would draft an emergency rule compelling private companies with 100 or more employees to require vaccinations or weekly testing. Biden also called for an expedited process for the OSHA rule. The rule can be released any day, but there are many questions about the 100-employee threshold calculation and the regulatory enforcement process for not complying with the rule.

Additionally, last week, CMS submitted its interim final rule Omnibus COVID-19 Health Care Staff Vaccination (CMS-3415) to OMB. This emergency regulation requires vaccinations for nursing homes, hospitals, dialysis facilities, ambulatory surgical settings, and home health agencies, among others, as a condition for participating in the Medicare and Medicaid programs.

COVID-19 Updates

Moderna Booster Vaccine Shot

The [Food and Drug Administration \(FDA\) Vaccine and Related Biological Products Advisory Committee \(VRBPAC\)](#) voted to unanimously (19-0) endorse a booster dose for the Moderna COVID-19 vaccine for persons:

- 65 years of age and older;
- 18 through 64 years of age at high risk of severe COVID-19; and
- 18 through 64 years of age whose frequent institutional or occupational exposure to SARS-CoV-2 puts them at high risk of serious complications of COVID-19 including severe COVID-19.

The Advisory Committee reviewed data from Israel on the state of their booster program and from Moderna on the evidence from booster trials. As was debated before recommending the Pfizer booster dose, Committee members expressed caution about recommendations for individuals aged 18 to 64, given the limited evidence that boosters would reduce severe COVID-19 and mortality for these individuals.

Johnson & Johnson Booster Vaccine Shot

The [Food and Drug Administration \(FDA\) Vaccine and Related Biological Products Advisory Committee \(VRBPAC\)](#) voted to unanimously (19-0) endorse emergency use authorization for an additional, booster dose of the Johnson & Johnson (J&J) COVID-19 vaccine for adults 18 and older at least 2 months after the primary single-dose vaccine.

The Advisory Committee additionally reviewed data from the National Institutes of Health (NIH) on the use of heterologous booster doses following an initial COVID-19 vaccine dose. Heterologous boosters proved to be more effective at boosting antibody titers in study participants than homologous boosters, though the response differed depending on formulation of the primary series and booster.

The American Medical Association (AMA) has not yet announced updates to the Current Procedural Terminology® (CPT) COVID-19 vaccine and vaccine administration code set to account for authorization of the Johnson & Johnson additional dose. Coding developments are announced via the AMA's CPT COVID-19 [landing page](#).

The Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) will meet to discuss recommending the Moderna and Johnson & Johnson vaccine boosters on [October 20-21](#).

State Issues

Delaware

Legislative

Governor Signs Insulin Pump Bill into Law

[Senate Bill 107 w/ House Amendment 1](#) was signed into law last week, requiring coverage of medically necessary insulin pumps at no cost to the covered individual. The Act applies to fully insured individual plans, fully insured group plans, the State Employee Group Health Insurance Program's plans, and Medicaid. The requirement that medically necessary insulin pumps be covered at no cost to the covered individual applies whether or not the deductible has been met.

The Act creates exemptions to the *pre-deductible* 100% coverage requirement for catastrophic (CAT) plans and qualified high deductible health plans (QHDHPs) because the pre-deductible 100% coverage requirement currently conflicts with federal law requirements for these plans. Both exemptions apply *only if* the requirements of the Act conflict with federal law governing these types of health plans; the exemption of these plans from the pre-deductible 100% coverage requirement will cease to operate if federal law is amended or federal guidance is issued to allow for such coverage by these plans.

Interested in reviewing a copy of a bill(s)? Access the following web sites:

Delaware State Legislation: <http://legis.delaware.gov/>.

New York Legislation: <https://nyassembly.gov/leg/>

Pennsylvania Legislation: www.legis.state.pa.us.

West Virginia Legislation: <http://www.legis.state.wv.us/>

For copies of congressional bills, access the Thomas website – <http://thomas.loc.gov/>.

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