Top news stories from AMA Morning Rounds®: Week of June 7, 2021

Read AMA Morning Rounds®’ most popular stories in medicine and public health from the week of June 7, 2021–June 11, 2021.

Health industry leaders, patient advocates urge administration to preserve telehealth expansion

USA Today (6/4, Levey) reported, “As the COVID-19 crisis wanes and life approaches normal across the U.S., health industry leaders and many patient advocates are pushing Congress and the Biden administration to preserve the pandemic-fueled expansion of telehealth that has transformed how millions of Americans see the doctor.” This “broad effort reaches across the nation’s diverse health care system, bringing together consumer groups with health insurers, state Medicaid officials, physician organizations and telehealth vendors.” In addition, “it represents an emerging consensus that many services that once required an office visit can be provided easily and safely—and often more effectively—through a video chat, a phone call or even an email.” AMA President Susan R. Bailey, M.D., “said Medicare should continue to allow patients to receive virtual care in their homes and in all areas of the country, not just rural areas.” Furthermore, the association is “pushing for Medicare to keep reimbursing doctors for consulting with patients by phone, a move Bailey said would ensure that patients without broadband internet service aren’t left behind.”

FDA approves treatment for patients with Alzheimer’s disease

The Washington Post (6/7, A1, McGinley) reports on Monday, the U.S. Food and Drug Administration “approved the first Alzheimer’s treatment intended to slow cognitive decline, a move hailed by patients and advocates but sharply criticized by others who argued there was not sufficient evidence that the drug works.” Aducanumab “is the first drug cleared for Alzheimer’s that is designed to alter the course of the disease by slowing the deterioration of brain function.” The FDA approved it “based on its ability to reduce clumps of amyloid beta in the brain,” but ordered Biogen “to conduct a post-approval study confirming the medicine actually slows cognitive deterioration.”

The New York Times (6/7, A1, Belluck, Robbins) reports the approval was “a contentious decision,
made despite opposition from the agency’s independent advisory committee and some Alzheimer’s experts who said there was not enough evidence that the drug can help patients.” The medication “is a monthly intravenous infusion.”

USA Today (6/7, Alltucker) reports, “The FDA’s approval comes despite a contradictory recommendation from experts on the agency’s Peripheral and Central Nervous System Drugs Advisory Committee, which last November cited conflicting results from two main clinical trials.”

COVID-19 vaccines may be available for young children in U.S. by fall

The New York Times (6/8, Mandavilli) reports, “Coronavirus vaccines may be available in the fall for U.S. children as young as 6 months, drugmakers say.” Pfizer and Moderna are currently “testing their vaccines in children under 12 years, and are expected to have results in hand for children aged 5 through 11 by September.”

Reuters (6/8, Erman, Banerjee) reports Pfizer on Tuesday “said...it will begin testing its COVID-19 vaccine in a larger group of children under age 12 after selecting a lower dose of the shot in an earlier stage of the trial.”

Administration warns physicians, hospitals, insurers and pharmacies not to bill patients for COVID-19 vaccines

The New York Times (6/9, Kliff) reports the Biden Administration is reminding physicians, “hospitals, pharmacies and insurers that it is illegal to bill patients for coronavirus vaccines, a letter obtained by The Times shows.” This “new warning responds to concerns among unvaccinated Americans that they could receive a bill with their shot.”

Modern Healthcare (6/9, Brady, Subscription Publication) reports that providers who violate these rules could be penalized by the HHS-OIG.

OSHA announces COVID-19 safety rule

The New York Times (6/10, Scheiber) reports that on Thursday, the Occupational Safety and Health Administration “announced a rule...outlining steps that employers must take to protect workers from the risk of [COVID-19], but it will apply only to the health care industry, not to other high-risk
workplaces, as the Biden administration initially indicated.” According to the Times, “The rule will require health care employers to provide protective equipment like masks, to screen and triage patients for the risk of [COVID-19] and to ensure adequate ventilation and distancing, among other measures.”

The Washington Post (6/10, Rosenberg) reports that the rule, called the emergency temporary standard (ETS), “will apply only to health care facilities.” The department also plans to “issue updated guidance for facilities that have an elevated risk of transmission, such as meatpacking plants, grocery stores and high-volume retail locations.”

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