



Welcome to *Washington Update*, the weekly e-newsletter on the latest health care happenings in the nation's capital that affect APG's members.

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Nomination Of Robert F. Kennedy Jr. To Lead Department Of Health And Human Services Prompts Concerns Over His Anti-Science Proposals

With Republican [control](#) of the White House, Senate, and House now a reality come January, speculation is rife over the fate of multiple high-profile health policy matters. At the top of the list as of this week is the nomination by President-elect Trump of [Robert F. Kennedy Jr.](#) to be Secretary of Health and Human Services (HHS).

As widely reported, the Kennedy family scion, a longtime environmental lawyer and former Democrat turned politician and Trump supporter, has limited expertise in health care and health policy, no record of government service, and unknown qualifications for overseeing a federal department whose [2024 budget](#) includes roughly \$144 billion in discretionary and \$1.7 trillion in mandatory programs such as Medicare and Medicaid. He appears to have won the nomination in part by [promoting](#) a "[Make America Healthy Again](#)" agenda targeting chronic disease and children's health.

Conventional versus Extreme? In addition to holding some more conventional health views – such as concerns over the ill effects of highly processed foods in children’s school lunches – Kennedy is a longtime [proponent of false claims](#) on vaccines, COVID-19, and other health matters. He has also threatened to overthrow scientific review processes at such HHS agencies as the Food and Drug Administration (FDA) and the Centers for Disease Control and Prevention, along with [massive reorganization](#) of the National Institutes of Health.

For example, in an October [entry](#) on the social media site X, he attacked FDA for its “aggressive suppression of psychedelics, peptides, stem cells, raw milk, hyperbaric therapies, chelating compounds, ivermectin, hydroxychloroquine, vitamins, clean foods, sunshine, exercise, nutraceuticals and anything else that advances human health and can’t be patented by Pharma.” His message continued: “If you work for the FDA and are part of this corrupt system, I have two messages for you: 1. Preserve your records, and 2. Pack your bags.”

Some Republican senators offered measured support, with Bill Cassidy (R-LA), the current ranking member who may chair the Health, Education, Labor and Pensions committee in the next Congress, saying in a statement on X, “I look forward to learning more about his other policy positions and how they will support a conservative, pro-American agenda.” But at APG’s fall conference this week in Washington, DC, former HHS Secretary Donna Shalala said that she doubted Kennedy could be confirmed by the Senate, as his anti-science posture is likely to eclipse his more conventional concerns, such as the root causes of chronic disease. News reports suggest that there is a group of at least some [Republican senators](#) who may be reluctant to support Kennedy’s nomination, and possibly the appointment of other cabinet [nominees](#) named to date.

As Senators grapple with their desire to support Trump and their constitutional duty to offer “[advice and consent](#)” on key appointments, any prolonged nominations process could eat up the early weeks and months of the new administration. *Washington Update* will keep readers informed of key developments.



Odds Dwindling For A Potential “Lame Duck” Session Dealing With Budget And Multiple Health-Care-Related Matters

The current Congress seems increasingly likely to punt multiple key health care matters to March, when its Republican-dominated successor Congress can assemble a broader [budget reconciliation](#) package that includes a massive tax cut, APG board members heard during congressional visits this week. If that scenario materializes, any roll back or reduction in the [scheduled 2.8 percent reduction](#) in the 2025 Medicare Physician Fee schedule could be deferred to next year as well.

The current continuing resolution (CR) extending fiscal 2024 government spending levels is set to expire on December 21, and there had been hopes that any extension of the CR into next year could include modifications to the fee cut. Also key among APG's legislative priorities is extension of the Advanced Alternative Payment Model [bonuses](#) for participating clinicians, as under current law, 2024 is the last eligible performance year. That measure, too, now seems uncertain, as does extension of Medicare's pandemic-era telehealth payment flexibilities – despite a desire among many lawmakers to avoid angering Medicare beneficiaries who could lose access to telehealth coverage, if temporarily.

APG will continue to watch this rapidly evolving situation and keep its members apprised of additional opportunities for advocacy.



Incoming Trump Administration Policies On Medicare Advantage, Other Value-Based Payment Models Are Key Topics at APG's Fall Conference

The next administration and Congress are likely to maintain a bipartisan embrace of value-based health care, while tilting more favorably toward Medicare Advantage than the Biden administration, speakers told attendees at APG's fall conference in Washington this week.

Former HHS Secretaries Shalala, who served under President Bill Clinton, and Alex Azar, who served from 2019-2021 under the first Trump administration, agreed that a bipartisan commitment still exists to shifting more health care payment away from fee-for-service toward more alternative payment models (APMs). And even though the Centers for Medicare and Medicaid Innovation (CMMI) has come under fire from House Republicans recently, that dynamic could change once a Trump appointee takes the reins at the agency, albeit with potentially an even stronger emphasis on generating more savings from APMs.

Speakers emphasized, for example, that efforts to integrate primary and specialty care through such models as [Kidney Care Choices](#) originated in the first Trump administration. Such ongoing integration under [total costs of care models](#) is likely to remain a priority, even notwithstanding some health-sector resistance.

Policy shifts: Other speakers and attendees at APG's ACO coalition meetings at the conference said a Trump-led CMMI is likely to take steps to preserve and extend the ACO REACH direct contracting model once it expires at year-end 2026. And both the administration and next Congress are likely to be favorably disposed to ongoing growth in Medicare Advantage, while maintaining scrutiny of health plan practices that contribute to excessive cost growth.

On that score, at APG's Medicare Advantage Coalition meeting, economist [Boris Vabson](#) presented newly published [research](#) evaluating the Medicare Payment Assessment Commission's [assertion](#) that Medicare Advantage costs the federal government 22 percent more per beneficiary than does the traditional Medicare program. Vabson's and colleagues' study estimates that 75 percent of this "overpayment" goes to beneficiaries, mostly in the form of "bread and butter" health care services rather than supplemental benefits, as well as reductions in out-of-pocket costs that especially benefit sicker patients.



In Case You Missed It

- Greater coordination across government agencies and with the private sector should **speed the advance of "convergence science,"** a recently released [report](#) from the National Academy of Medicine says. Such measures to enhance collaboration across multiple scientific disciplines could help to address increasingly complex and interconnected challenges, such as the health-related effects of climate change. As an example, the report points to the public-private [partnerships](#) that rapidly advanced science and development of countermeasures during COVID-19 pandemic, but that "should not be relegated to times of crisis."



APG Announcements And Offerings

- APG will host a **Learning Session Webinar on Wednesday, November 20, 3:00-4:00 pm ET**, about the Centers for Medicare & Medicaid Services' (CMS) 2025 Medicare Physician Fee Schedule Final Rule. Register for the webinar [here](#).
- The next APG Hosted Webinar, "**Approaches to Systemic Obesity Care: Utilization of Pathways & Protocols to Create a Comprehensive Obesity-Care Program,**" will take place on **Tuesday, December 3, 3:00-4:00 pm ET, featuring [Angela Fitch, MD](#)**. The webinar will be presented by Novo Nordisk. Register [here](#).
- Want to get more involved in APG's Federal advocacy efforts? [Join APG Advocates today](#).

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Valinda Rutledge, EVP, Advocacy and Education vrutledge@apg.org
Jennifer Podulka, Senior Vice President, Federal Policy jpodulka@apg.org