



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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Vaccines Fight Grows As Kennedy Appointees Alter Child Vaccine Schedule Amid Mounting Resistance

The Trump administration's vaccines war intensified this week, as the newly reconstituted Advisory Committee on Immunization Practices (ACIP) to the U.S. Centers for Disease Control and Prevention endorsed more controversial changes in COVID vaccines and the recommended vaccination schedule for children. The panel's move came as more U.S. senators, state governments, health plans, and others rejected the push – led by Health and Human Services Secretary Robert F. Kennedy Jr. – of governmental health oversight into an evidence- and science-free zone.

Meeting over two days, the new ACIP – augmented this week by [five additional appointees](#) with limited vaccines expertise – voted to recommend splitting the combined measles, mumps, rubella, varicella (MMRV) vaccine into two doses – one for MMR and the other for varicella (chicken pox) for children under 4. Although committee members voted separately for unclear reasons not to extend the latter recommendation to the [Vaccines for Children \(VFC\)](#) program, they subsequently reversed themselves and said it applied to the VFC. Originally scheduled on Thursday, the panel postponed the vote that would end its recommendation for newborn Hepatitis B vaccination, after some members [expressed](#) frustration over a lack of evidence of side effects and said more discussion was warranted. The panel is also expected to recommend sharp limits on COVID-19 vaccines in line with recent [decisions](#) by the Food and Drug Administration (FDA), ([Washington Update - August 29, 2025](#)) and to require a prescription for the vaccine before the panel adjourns late Friday.

Growing defiance: The committee's moves drew sharp rebukes from a broad array of experts and medical and health care organizations. With ACIP now stacked with many nonexperts and anti-vaccine enthusiasts, “we no longer believe this process is credible, so we don't think the outcomes can be trusted,” Susan Kressly, MD, president of the American Academy of Pediatrics, [told NPR](#). The potential recommendation not to vaccinate newborns against Hepatitis B had earlier been attacked by Senator Bill Cassidy (R-LA), a gastroenterologist, who [noted](#) that the disease is one of several sexually transmitted infections that can be transmitted from mothers to infants during birth and results in chronic lifelong disease for nearly all children who become infected.

Cassidy's remarks came at a [hearing](#) of the Senate Health, Education, Labor, and Pensions committee, which the senator chairs, and which probed the recent firing of former CDC director Susan Monarez, MD. Monarez [testified](#) that, before firing her, Kennedy had ordered her to approve “every ACIP recommendation regardless of the scientific evidence,” and “to dismiss career officials responsible for vaccine policy, without cause.” Broader concerns about the new ACIP's departures from established vaccine science also fueled these other key actions this week:

- The major national health insurer group AHIP [said](#) it would continue to cover all vaccines recommended as of September 1, 2025 with no-cost sharing through 2026.
- Along with a previously announced coalition of four Western states ([Washington Update - September 5, 2025](#)), more states – including Pennsylvania, Illinois, Wisconsin and [seven northeastern states](#) plus New York City – issued vaccine guidance contradicting the CDC's, even as [many also took steps](#) to ensure that in-state pharmacies would continue

providing COVID vaccines broadly without prescriptions.

APG is maintaining its position against the recent FDA moves and ACIP recommendations, joining a [statement](#) by the Common Health Coalition this week asserting that vaccination “remains the best way to protect against respiratory viruses” and to ensure that “children grow up safe from other preventable diseases.”



Government Shutdown Looms More Likely Amid Battle Over ACA Tax Credits

Just days before the fiscal year ends on Sept. 30, fights over health care – including extending the [enhanced Affordable Care Act premium tax credits](#) due to expire at year end – threaten final passage of a short-term measure to fund the government into late November.

In quick succession today, Republican House members adopted a [continuing resolution](#) (CR) extending fiscal 2025 spending levels until Nov. 21, without any provision to extend the enhanced tax credits, or EPTCs. The House bill immediately went to the Senate, where Republicans needed seven votes from Democrats or Independents to pass it, and the measure, as expected, failed. Democratic leaders demanded extension of the EPTCs and \$1 trillion in additional health care spending over ten years, which would effectively reverse provisions of reconciliation legislation enacted in July. The Senate promptly adjourned for recess until Sept. 29, and Speaker Johnson announced the House will recess until Oct. 1, meaning the Senate must pass the House CR or face at least a one-day shutdown.

It is unclear whether Sen. Chuck Schumer (D-NY), who was heavily [criticized](#) earlier this year for supporting a Republican funding bill, will now take the lead on forcing a shutdown or agree to pass a CR and negotiate over an EPTC extension later, as Republicans have proposed.

Failure to extend the ACA enhanced subsidies beyond the Dec. 31 expiration date is expected to further [destabilize](#) the individual ACA health insurance market on top of other recent legislative and regulatory changes. A newly released KFF [analysis](#) estimates that some individuals currently enrolled in ACA plans could face premium hikes ranging from 44 percent to 153 percent. Low-income enrollees who currently pay nothing for a [“benchmark” ACA plan](#) will have to begin paying premiums, while individuals with incomes above 400 percent of the federal poverty level – roughly \$63,000 for an individual in 2025 – will face a “double whammy,” losing their eligibility for the enhanced tax credits and facing steep increases in ACA plan premiums. By

contrast, a Congressional Budget Office [analysis](#) estimates that extending the subsidies will increase the number of Americans with health insurance by 3.8 million in 2035 and lower gross premiums for average ACA plans by 7.6 percent from 2026 to 2035.



Health-Related Bills Advance To Full House From Key Health Committees

Two House panels with jurisdiction over health care issues – the Ways and Means and Energy and Commerce committees –advanced several bills on a bipartisan basis to the full House this week, as follows:

- A [measure](#) to extend the [Acute Hospital Care at Home Medicare waiver](#) for an additional five years – much longer than the extension to Nov. 21 in the just-passed House continuing resolution.
- A [bill](#) to waive submission by Medicare Shared Savings Program ACO's of [electronic clinical quality measures \(eCQMs\)](#) to the Centers for Medicare and Medicaid Services (CMS) as required beginning this year. Instead, a pilot program would be created to test use of eCQMs as of 2028. APG supports the bill on the grounds that many electronic health records in use by physician practices aren't ready or able to record the needed information in proper format to submit it to CMS.
- A [bill](#) that would allow Medicare coverage beginning in 2028 for FDA-approved [multi-cancer early detection \(MCED\) tests](#) if CMS determines such coverage is appropriate. Such tests check blood for various cancer types but cannot diagnose cancer, requiring further tests. None have yet been approved or cleared by FDA. APG agrees with the American Cancer Society's [observation](#) that more research is needed before these tests can be recommended for widespread use.
- A [bill](#) that would reauthorize the [Telehealth Network Grant Program](#) and Telehealth Resource Center Program, appropriating \$42.05 million for both programs each year from fiscal 2026 through fiscal 2030.



In Case You Missed It

- CMS adopted a final Medicare Advantage [rule](#) that aims to improve accuracy of the MA provider directory in several ways. The agency will also adopt a temporary special election period for Medicare Advantage enrollees who may have based their

2026 plan selection off of inaccurate provider directory information, *Inside Health Policy* [reported](#).

- An APG [comment letter](#) to CMS on the proposed 2026 Medicare Physician Fee Schedule and MSSP program rule recommends that CMS continue increasing the [conversion factor](#) in each year's schedule to raise physician fees. Another [comment letter](#) on the [hospital outpatient proposed rule](#) agrees with CMS's recommendation to phase out the [list](#) requiring that certain procedures be performed only in hospitals.
- A federal appeals court ruling that once again [blocks](#) mass layoffs and HHS restructuring may now propel the case to the Supreme Court.
- States can now [apply](#) for a portion of the \$50 billion Rural Health Transformation program that was created to offset a portion of health care cuts enacted in H.R. 1, especially for rural hospitals.
- [Proposed legislation](#) sponsored by some Congressional Democrats would bar large insurers and their subsidiaries – including United Health Group's Optum Health and Humana's CenterWell – from owning medical practices. Multiple Optum groups and CenterWell are APG members. APG believes that the bill has little chance of advancing in the Republican-controlled Congress.
- A right-leaning lobbying group [calls for](#) eliminating CMS's Innovation Center, claiming that the Center lacks transparency and has wasted taxpayer dollars through "failed experimentation with Americans' healthcare."



APG Announcements And Offerings

- Registration is now open for the **APG Fall Conference 2025 - Purpose, Perseverance and Possibility: Staying the Course on Accountable Care, November 5-7 in National Harbor, MD**, near Washington, DC. **Please register by Friday, September 26**, to save up to \$200 with Early Bird registration.
- APG will host two upcoming sponsored webinars:
 - "Rewriting the Dementia Playbook: A Value-Based Blueprint for Brain Health," presented by Linus Health, on Thursday, October 2, at 3:00pm ET. [Register here](#).
 - "Bridging the Gap: Integrating Behavioral Health Into Evernorth Primary Care," Presented by evolvedMD, on Tuesday October 14, at 4:00pm ET. [Register here](#).
- APG will host a member-only focus group on the Federal Trade Commission's non-compete [RFI](#) on October 9, at 4:00pm ET. To register, please email Jenifer Callahan at jcallahan@apg.org.

- APG has partnered with **Champions for Vaccine Education, Equity and Progress (CVEEP)** to assist with vaccine outreach and education to patients during the upcoming respiratory virus season. Please access tailored materials for APG members [here](#).
- Want to get more involved in APG's Federal advocacy efforts? [Join APG Advocates today](#).

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