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### Editor's note

<u>This series</u> is produced by KPMG Healthcare and is intended to be short and succinct, less than 360 words, to provide a weekly digestible bite of healthcare regulatory, policy, and industry news relevant to our clients. Links are provided to source material (proposed and final regulations, agency guidance and press releases, reports, research, etc.) when available. Please share this email with colleagues and other interested individuals, and encourage them to <u>subscribe</u> to our mailing list here.

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Donald J. Trump was elected as the 47<sup>th</sup> president of the United States, Republicans won the majority in the Senate, and the House – while not yet formally called – appears to be headed for a continuation of its slim Republican majority. Although health policy was not a significant focus during this election cycle, several issues have emerged as potential areas for change in the coming years.

President-elect Trump's political appointments at HHS will be extremely important as a first gauge of whether Medicaid spending levels and work requirements will be revisited. Medicare Advantage will likely come under less scrutiny in the Trump administration, while there is still uncertainty about the future of enhanced tax credits for Marketplace enrollees that are scheduled to expire at the end of 2025.

The FDA, the NIH, and the CDC <u>are expected</u> to undergo organizational changes, and there is speculation that the new administration will <u>streamline</u> regulatory actions concerning guardrails around AI in healthcare.

Bipartisan health priorities <u>may remain</u> under the new Congress and administration, with both parties likely willing to work together to increase PBM transparency, establish site neutral payments, make permanent telehealth flexibilities, prioritize price transparency, and reform the physician payment system.



# Healthcare regulatory news

CMS issued the final 2025 <u>payment rule</u> for End-Stage Renal Disease (ESRD), which included a 2.7% increase for dialysis providers and finalized a proposal to include oral-only drugs to the ESRD bundled payment.

The FDA will <u>investigate</u> Mark Cuban's Cost-Plus Company 503b compounding facility, due to <u>concerns</u> around microorganism contamination.





# Healthcare law and policy news

Sen. Bill Cassidy (R-LA) and Sen. Maggie Hassan (D-NH) <u>released a policy memo</u> outlining potential options to mitigate the financial impact rural hospitals could face under site-neutral payment reforms, for which there is bipartisan support.

According to a <u>study</u> published in Health Affairs, one in five veterans are enrolled in Medicare Advantage (MA) plans, but most are likely receiving care through the Veterans Health Administration instead of using their MA benefits, leading to duplicative spending by the federal government.

A study <u>published</u> in JAMA found that Medicare Advantage (MA) enrollees generally use low-value services less frequently than those

enrolled in traditional Medicare; however, the authors noted that there is variability in the use of low-value care across different MA plans.

A recent report by ASPE found that uninsured rates among adults in rural communities have fallen from 23.8% to 12.6% since the passage of the ACA, with uninsured rates much higher in states that have not adopted Medicaid expansion.

Recently <u>published studies</u> from the Human Tumor Atlas Network (HTAN), a NIH Cancer Moonshot Initiative, provide insight into how cancer tumors develop, spread, and respond to treatment... One in five humans will develop cancer within their lifetime with the rate steadily rising, making cancer one of the most burdensome diseases for society.





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