Healthcare Leadership and Policies During Trump Administration

Introduction

The Department of Health and Human Services (HHS) is one of the largest departments in the federal government, with several critical agencies falling under its jurisdiction. These include (but are not limited to) the Centers for Medicare and Medicaid Services (CMS), National Institutes of Health (NIH), Centers for Disease Control and Prevention (CDC), the Health Resources and Services Administration (HRSA), and the Food and Drug Administration (FDA). This collection of agencies, under Senate appointed leadership, are responsible for positive public health and healthcare outcomes, with a mission of “enhancing the health and well-being of all Americans.”

However, under the Trump administration, both HHS at a top-level, as well as the myriad agencies under its jurisdiction, frequently neglected their missions to enhance the health and well-being of all Americans. Instead, the Trump administration focused on serving corporate interests in the healthcare industry, even when doing so required denying scientific evidence and research.

Additionally, Trump’s repeated failures to properly address the Covid-19 pandemic effectively limited the healthcare agencies’ abilities to respond efficiently and accurately to pressing public health needs. What’s more, his demonization of proactive public health civil servants such as Dr. Anthony Fauci during the pandemic jeopardized the critical relationship between the public and the healthcare infrastructure within the federal government.

Health and Human Services (HHS)

Trump’s initial appointment for Secretary of Health and Human Services, Tom Price, lasted a mere six months in the position after it was uncovered that he chartered private jets on the public’s dime to the tune of $341,000. Not unlike many other Trump appointments, Price treated government funds as his personal fief, opting once for a $14,955 round-trip charter flight between Washington and Philadelphia. Following Price’s resignation, Trump appointed veteran revolver Alex Azar as HHS Secretary. Azar joined after a decade-long spell at Eli Lilly, where he had approved a tripling of the price of insulin.

The ideology driving the ‘reforms’ at HHS were consistent under both. Several departments and offices at HHS were disbanded and defunded, including the Science and Medicine team and the teen pregnancy program, which the Trump team justified by claiming that HHS was poorly managed and staff were all over the place. However, staff
have repeatedly noted that many of these cuts were explicitly political, rather than being evidence-driven, as public health agencies in the government were previously managed. For example, following an extensive campaign to repeal the Affordable Care Act, the first enrollment period for the healthcare marketplace under Trump's presidency saw a 30% decrease in enrollment from the previous year’s open enrollment.

Additionally, Trump repeatedly sought to defund the myriad of healthcare agencies within and surrounding HHS throughout his administration's budget requests, attempting to bring some of the lowest budgets for those offices in years. These proposals included significant decreases for CDC's programs and offices on infectious diseases, global health, and public health preparedness, a slashing of funding for the NIH and its research programs, and cuts for other public health programs within the Department of Energy on clean air and water.

Alex Azar’s Covid-19 Pandemic Legacy

Azar’s approach to managing the pandemic was a complete mess, especially at the onset. Under his stewardship, HHS misled the public on the pandemic’s severity and the department’s preparedness for handling it. Take, for example, his claim that the CDC had developed a diagnostic test to confirm if someone had the virus. The CDC and FDA came up with viable tests five and a half weeks after he lied to the public, even as other countries had already developed their own tests.

Azar also assured Americans that HHS had a playbook for managing the virus, but this involved the appointment of an aide with little to no public health health experience as the overseer of the department’s day-to-day response to the Covid-19 pandemic. In fact, the aide Brian Harrison’s most significant professional experience was in dog-breeding.

In addition to misleading the public on HHS’s preparedness, Azar sidelined other public health officials who sought to improve the country’s response to the pandemic. Notably, he disrupted the work of former Biomedical Advanced Research and Development Authority chief Rick Bright. In a now-settled whistleblower complaint, Bright claimed that he was demoted and essentially ousted for arguing for rigorous vetting of hydroxychloroquine, the anti-malarial drug Trump had touted as a Covid-19 treatment.

Centers for Medicare and Medicaid Services (CMS)

The Centers for Medicare and Medicaid Services (CMS) is a federal agency within HHS that works with state governments to oversee the two largest federal health-care programs, Medicare and Medicaid, as well as the Children’s Health Insurance Program (CHIP) and other health-related programs. CMS provides direction and technical guidance to plan, develop, manage, and evaluate health care financing programs and policies, and carries out its responsibilities via internal activities, grants, and contracts that support several health-care related programs. The agency relies on contractors to
help carry out its mission including program administration, program management, and oversight of its health programs.

As of May 2024, there are 67.1 million people enrolled in Medicare and as of February 2024, there are 76.3 million people enrolled in Medicaid and 7.1 million enrolled in CHIP. CMS serves the public interest by overseeing medical programs used by millions people nationwide, a task that was even more pressing during the 2020 pandemic. The agency also carries out the implementation of the Affordable Care Act (ACA), which could provide millions of Americans with coverage.

During his administration, Trump selected Seema Verma to head CMS, and her nomination was confirmed by the Senate in March of 2017. Prior to her arrival at CMS, Verma worked as a healthcare consultant, during which time she faced ethics concerns regarding conflicts of interests between clients served in the private and public sectors simultaneously.

Under Trump’s direction and Verma’s leadership, CMS drastically changed processes around Medicaid, harming insurance access and coverage for millions of families. Guidance inviting states to seek “block grant” waivers allowed for federal funding to be capped, and benefits and coverage to be cut. Additionally, rules around poverty line qualification and work requirements enabled states to take away Medicaid coverage from individuals at higher rates.

Modifications to Medicare programs sought to advance a longtime Republican effort towards privatization. One example of this was the direct contracting model, which allowed private insurance companies to participate in Medicare through the Medicare Advantage program. Unfortunately, many seniors across the country now find themselves trapped in these Medicare Advantage plans, which regularly “delay or prevent beneficiary access to medically necessary care; lead beneficiaries to pay out of pocket for services that are covered by Medicare.” Further, the passage of various tax cuts resulted in a decrease in tax revenues, including the excise tax on employer-sponsored group health insurance premiums at a certain threshold, leading to harms to solvency of the Medicare Hospital Insurance Trust Fund.

During her tenure, Verma relied heavily on consultants and contractors while at CMS, rather than the federal employees within her department. A report was issued by the Office of the Inspector General in 2020, which noted that Verma employed contractors where government workers should have been tasked with carrying out essential government functions. Verma even violated contracting rules and guidelines when she brought on communications contractors to improve her public image.
Food and Drug Administration (FDA)

Under the Trump Administration, the FDA was extremely industry friendly, both on the drug approvals that it routinely handles, as well as in its inaction on holding corporations accountable in food and drug standards.

Commissioner Scott Gottlieb, Trump's first appointee, had previously worked at the FDA under President Bush until 2007, following consulting work done for GSK. Between his FDA jobs, he had an extensive tour of the private sector, working in venture capital and serving on the boards of a variety of New Enterprise Associates (NEA)'s portfolio companies, which worked in a range of healthcare subsectors. Additionally, Gottlieb was also an independent director and board member at several pharmaceutical companies, helping advise on drugs to be taken to development. At the FDA, Gottlieb oversaw the fastest rate of ‘novel drug’ approvals in at least 15 years, and a record low number of rejections, with only 19.7% of all applications for new drugs, biologics, and efficacy supplements being rejected. After his time at the FDA, Gottlieb immediately joined the board of Pfizer, and defended himself against criticisms of the move, saying he was “proud” of the relationship he had with Pfizer's board.

The Trump FDA was also notoriously lenient on typical compliance and enforcement actions that routinely fall within the department’s responsibilities. “Warning letters”, typically used to keep dangerous or ineffective drugs and devices, and tainted foods away from consumers, fell by one third. Warnings from the Center for Devices and Radiological Health fell even more. The FDA was even sued in 2019 after repeated inaction in addressing toxic chemicals in food packaging.

Covid-19 Pandemic

Under Trump's administration, the ability to respond to the Covid-19 pandemic was hampered before the pandemic even started. While the Obama administration had established a pandemic preparedness office under the National Security Council following the Ebola Epidemic in 2014, the Trump administration disbanded the whole team in 2018, firing its head and redistributing its staff into other NSC functions.

Early in the pandemic, the administration did make an effort to accelerate vaccine efforts by providing funding to various pharmaceutical companies. Operation Warp Speed, a partnership between the Department of Health and Human Services and the Department of Defense, sought to provide funding for various candidates seeking to produce a Covid-19 vaccine. In practice, however, Operation Warp Speed led to decreased funding for other critical healthcare operations, and brought confusion and chaos to vaccination processes nationwide. Nearly $10 billion of the funding given to Operation Warp Speed was taken from a pool intended to help support hospitals and clinics in additional expenses during the pandemic, in staffing costs, protective equipment, and supporting uninsured patients, and was instead turned into a corporategra...
giveaway to the pharmaceutical industry. Additionally, Operation Warp Speed’s process of only notifying vaccination centers of doses and supply a week in advance led to chaos around scheduling and disseminating vaccines, and hampered an effective vaccination campaign during the height of the pandemic. Lastly, the overemphasis on vaccines led to other short term solutions to mitigating the harms of the virus, including monoclonal antibodies, to be undercut, and resulted in inadequate messaging of other prevention methods while waiting for a vaccine.

Throughout the pandemic, the crisis management grasp of the administration continued to falter and fail. Refusing to follow scientific evidence around masking, testing, and distancing, the Trump administration exacerbated the severity of the pandemic throughout its first 9 months. Instead, the administration touted nonsensical treatment options, including hydroxychloroquine and bleach, repeatedly attacked public health officials who were working on pandemic response as infringing on personal liberties and freedom, and ignored a rapidly rising death toll while assuring the public that early response measures had worked and were no longer needed. Due to this, the administration was already on the course of failure as it sought to improve its own reputation and image by limiting testing and accurate data collection of cases, and refusing to create public health plans or consider worst-case scenario approaches. Even after the 2020 election, the Trump Administration refused to keep the new administration-elect in the loop on pandemic related-planning during the transition. At the end of his term, the nation had seen around 400,000 deaths from the virus, many of which were preventable with better management and planning earlier in the pandemic.

Additionally, the rise of the Covid-19 pandemic saw a significant tension between the Trump Administration and the Centers for Disease Control and Prevention (CDC), where the administration began interfering with routine media briefings and information dissemination that had been a core component of the agency’s work for years.

Conclusion

Across a range of agencies and departments, the Trump administration was derelict in protecting the health and wellbeing of the Americans. Budget cuts significantly hampered agencies core responsibility to protect public health outcomes, while incessant political interference undermined agencies and public health officials’ critical relationship with the public. The Trump administration’s advancement of Medicare privatization schemes, and pharmaceutical industry giveaways, clearly highlighted a priority of corporate profit over the integrity of our healthcare programs. Beyond that, the administration’s approach to the Covid-19 pandemic, which prioritized the image of Trump and his appointments over public health exemplifies the former president’s complete disregard for the health and wellbeing of the American people.