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# Health Policy Under The Trump Administration: The First 50 Days

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**MARCH 10, 2025** DOI: 10.1377/forefront.20250310.638022

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## Editor's Note

*This article is the latest in the Health Affairs Forefront [featured topic](#), “[Health Policy at a Crossroads](#).” Articles in this topic will offer timely analysis of regulatory, legislative, and judicial developments in health policy under the Trump-Vance Administration and the 119th Congress.*

In the less than two months since inauguration, President Trump and his administration have issued a dizzying array of health policy and related actions—from new executive orders to federal funding freezes to aggressive moves to reshape the federal government. This article briefly summarizes several of these recent actions on topics that include health care price transparency, COVID-19 vaccine mandates, the Make America Healthy Again Commission, fertility services, gender-affirming care, and funding cuts for navigators. This article also discusses the Trump administration’s initial approach to several significant health policy lawsuits.

## New Health Policy Actions And Priorities

Federal agencies have begun to issue new guidance in response to President Trump’s various executive orders. While there are several health policy regulations under review

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Major Health Care Rule.

One issue to watch is how much the Trump administration's health policy agenda will be affected by the chaos and turmoil at federal agencies as a result of [layoffs and other actions](https://www.npr.org/sections/shots-health-news/2025/02/17/nx-s1-5300052/federal-employees-layoffs-cdc-nih-fda) <<https://www.npr.org/sections/shots-health-news/2025/02/17/nx-s1-5300052/federal-employees-layoffs-cdc-nih-fda>> by the Department of Government Efficiency and [other directives](https://www.federalregister.gov/documents/2025/02/25/2025-03133/commencing-the-reduction-of-the-federal-bureaucracy) <<https://www.federalregister.gov/documents/2025/02/25/2025-03133/commencing-the-reduction-of-the-federal-bureaucracy>> from President Trump and the Office of Management and Budget on [staffing reductions](https://www.federalregister.gov/documents/2025/02/14/2025-02762/implementing-the-presidents-department-of-government-efficiency-workforce-optimization-initiative) <<https://www.federalregister.gov/documents/2025/02/14/2025-02762/implementing-the-presidents-department-of-government-efficiency-workforce-optimization-initiative>>, [agency reorganizations](https://www.opm.gov/policy-data-oversight/latest-memos/guidance-on-agency-rif-and-reorganization-plans-requested-by-implementing-the-president-s-department-of-government-efficiency-workforce-optimization-initiative.pdf) <<https://www.opm.gov/policy-data-oversight/latest-memos/guidance-on-agency-rif-and-reorganization-plans-requested-by-implementing-the-president-s-department-of-government-efficiency-workforce-optimization-initiative.pdf>>, and the [use of federal funds](https://www.federalregister.gov/documents/2025/03/03/2025-03527/implementing-the-presidents-department-of-government-efficiency-cost-efficiency-initiative) <<https://www.federalregister.gov/documents/2025/03/03/2025-03527/implementing-the-presidents-department-of-government-efficiency-cost-efficiency-initiative>>. These layoffs are expected to have short- and long-term consequences for the public's health and the health programs that millions of Americans rely on, including Trump administration health policy priorities. As just some examples, media has reported on concerns that the layoffs and other changes could:

- Limit the ability of the Centers for Disease Control and Prevention (CDC) and the Administration for Strategic Preparedness and Response to respond to [outbreaks](https://www.inquirer.com/health/expert-opinions/cdc-cuts-negatively-impact-public-health-20250226.html) <<https://www.inquirer.com/health/expert-opinions/cdc-cuts-negatively-impact-public-health-20250226.html>> and [other public health emergencies](https://www.npr.org/sections/shots-health-news/2025/02/25/nx-s1-5307117/cdc-firings-infectious-disease-response) <<https://www.npr.org/sections/shots-health-news/2025/02/25/nx-s1-5307117/cdc-firings-infectious-disease-response>>;
- Make it harder for the Centers for Medicare and Medicaid Services to [assess the quality of nursing homes](https://www.politico.com/newsletters/politico-pulse/2025/02/19/trumps-pro-ivf-stance-has-his-base-divided-00204742) <<https://www.politico.com/newsletters/politico-pulse/2025/02/19/trumps-pro-ivf-stance-has-his-base-divided-00204742>>, address a [significant backlog of Medicare appeals](https://www.law360.com/publicpolicy/articles/2305847) <<https://www.law360.com/publicpolicy/articles/2305847>>, enforce [surprise medical bill protections](https://kffhealthnews.org/news/article/trump-surprise-medical-bills-agency-responsible-job-cuts-doge/?s=03) <<https://kffhealthnews.org/news/article/trump-surprise-medical-bills-agency-responsible-job-cuts-doge/?s=03>> under the No Surprises Act, and [fight Affordable Care Act enrollment fraud](#)

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- Undermine the Food and Drug Administration's (FDA's) efforts to [regulate](#) <https://www.nytimes.com/2025/02/21/health/fda-trump-layoffs-device-and-food-safety.html> medical devices, food safety, artificial intelligence, digital health, and tobacco products; and
- Disrupt [scientific research](#) <https://www.science.org/content/article/more-nih-job-cuts-coming-agency-scientists-already-reeling-after-week-firings> at NIH through the loss of scientists and lab managers, losses that are likely contributing to [high-profile retirements from NIH](#) <https://www.npr.org/sections/shots-health-news/2025/03/01/g-s1-51514/francis-collins-nih-national-institutes-health-resigns>.

Perhaps unsurprising given the significance of these impacts, the Trump administration has reportedly rescinded at least some of the terminations at agencies like the [CDC](#) <https://thehill.com/policy/healthcare/5180118-cdc-employees-reinstated/> and the [FDA](#) <https://apnews.com/article/fda-layoffs-trump-doge-rehired-medical-devices-85d4743e4ce88dbe3b99c813bad4b702>. But the scope of the rescissions, and the ultimate overall effect of the layoffs on the Trump administration's health policy agenda, remains unclear.

## Health Care Price Transparency

In 2019, President Trump issued an [executive order](#) to improve health care price and quality transparency that led to new disclosure requirements on hospitals, health plans, and insurers. In response, HHS issued [new rules](#) <https://www.hhs.gov/sites/default/files/cms-1717-f2.pdf> that required hospitals to publicly post standard charge information and display certain shoppable services; these requirements went into effect in 2021. HHS, alongside the Departments of Labor and the Treasury, also issued [new rules](#) requiring health plans and insurers to maintain a consumer-facing tool with price information and to publicly disclose negotiated rates, allowed amounts, billed charges, and prescription drug prices.

The Biden administration revised these rules in [2021](#) <https://www.federalregister.gov/documents/2021/11/16/2021-24011/medicare-program-hospital-outpatient-prospective-payment-and-ambulatory-surgical-center-payment> and [2023](#) <https://www.federalregister.gov/documents/2023/11/22/2023-24293/medicare-program-hospital-outpatient-prospective-payment-and-ambulatory-surgical-center-payment>; took [enforcement action](#)

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[transparency/enforcement actions](#) against some hospitals for failing to comply with the requirements; issued [new data <https://data.cms.gov/provider-characteristics/hospitals-and-other-facilities/hospital-price-transparency-enforcement-activities-and-outcomes>](https://data.cms.gov/provider-characteristics/hospitals-and-other-facilities/hospital-price-transparency-enforcement-activities-and-outcomes) and [tools <https://cmsgov.github.io/hpt-tool/>](https://cmsgov.github.io/hpt-tool/); and [increased penalties <https://www.cms.gov/newsroom/press-releases/cms-opsasc-final-rule-increases-price-transparency-patient-safety-and-access-quality-care>](https://www.cms.gov/newsroom/press-releases/cms-opsasc-final-rule-increases-price-transparency-patient-safety-and-access-quality-care) for noncompliance. Even so, [patient advocates <https://www.patientrightsadvocate.org/seventh-semi-annual-hospital-price-transparency-report-november-2024>](https://www.patientrightsadvocate.org/seventh-semi-annual-hospital-price-transparency-report-november-2024), [researchers <https://www.healthsystemtracker.org/brief/ongoing-challenges-with-hospital-price-transparency/>](https://www.healthsystemtracker.org/brief/ongoing-challenges-with-hospital-price-transparency/), and the [HHS Office of the Inspector General <https://oig.hhs.gov/reports/all/2024/not-all-selected-hospitals-complied-with-the-hospital-price-transparency-rule/>](https://oig.hhs.gov/reports/all/2024/not-all-selected-hospitals-complied-with-the-hospital-price-transparency-rule/) have continued to document lackluster compliance by hospitals.

To bolster these efforts, President Trump issued an [executive order <https://www.federalregister.gov/documents/2025/02/28/2025-03440/making-america-healthy-again-by-empowering-patients-with-clear-accurate-and-actionable-healthcare>](https://www.federalregister.gov/documents/2025/02/28/2025-03440/making-america-healthy-again-by-empowering-patients-with-clear-accurate-and-actionable-healthcare) on February 25, 2025 directing these agencies to, within 90 days, further implement and enforce the transparency rules. Specifically, the agencies must require the disclosure of actual prices (rather than estimates); improve standardization to make prices comparable across hospitals, health plans, and insurers; and update enforcement policies to improve compliance. Following the executive order, HHS issued guidance affirming that federal officials are “planning a more systematic monitoring and enforcement approach” to enforcing the hospital transparency rule and that hospital noncompliance will be met with “swift enforcement.” (This pledge notwithstanding, the staffing cuts noted above could limit the agency’s ability to aggressively enforce these requirements.)

Both the executive order and accompanying [fact sheet <https://www.whitehouse.gov/fact-sheets/2025/02/fact-sheet-president-donald-j-trump-announces-actions-to-make-healthcare-prices-transparent/>](https://www.whitehouse.gov/fact-sheets/2025/02/fact-sheet-president-donald-j-trump-announces-actions-to-make-healthcare-prices-transparent/) emphasize that health plans must disclose prescription drug prices. The Biden administration had provided [enforcement discretion <https://www.dol.gov/agencies/ebsa/about-ebsa/our-activities/resource-center/faqs/aca-part-61>](https://www.dol.gov/agencies/ebsa/about-ebsa/our-activities/resource-center/faqs/aca-part-61) for the rule’s prescription drug requirements through September 2023. Since then, enforcement has been addressed on a case-by-case basis. The executive order’s emphasis suggests that the agencies will take a renewed look at prescription drug price reporting.

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rules. But it also leaves room for other transparency-related policies by directing federal agencies to identify additional opportunities to empower patients with meaningful price information and expand existing transparency requirements. The Trump administration could, for instance, issue new guidance or rules to further implement [transparency requirements](#) related to [good faith estimates and advanced explanations of benefits](#) <https://www.cms.gov/files/document/progress-aeob-rulemaking-december-2024-update1pm.pdf>. These are policies that were included in the Consolidated Appropriations Act of 2021 but that have not been fully implemented.

## Public Health

The Trump administration has already ushered in significant shifts for public health. To comply with early executive orders, federal officials [pulled down or modified](#) <https://www.usnews.com/news/health-news/articles/2025-02-03/q-amp-a-the-risks-of-trumps-purge-of-federal-health-care-websites> a wide range of public health-related websites and datasets that are maintained by HHS, including by the CDC and FDA. [Affected websites](#) <https://www.cnn.com/2025/01/31/health/cdc-websites-gender-lgbtq-datasets/index.html> include the site for the Youth Risk Behavior Surveillance System, the National Assisted Reproductive Technologies Surveillance System, pages with information on HIV, and resources on addressing health disparities among LGBTQ youth. In a [lawsuit](#) <https://www.citizen.org/wp-content/uploads/1-Complaint-8.pdf> filed by Doctors for America, a federal district court judge issued a [temporary restraining order](#) <https://fingfx.thomsonreuters.com/gfx/legaldocs/gdpzkzmekvw/DFA%20v%20OPM%20opinion%202-11.pdf>, and federal agencies have restored access to [many](#) <https://www.npr.org/sections/shots-health-news/2025/02/06/nx-s1-5288113/cdc-website-health-data-trump> of these websites as the litigation proceeds.

In stark contrast to the Biden administration's approach to fighting the COVID-19 pandemic, President Trump signed executive orders to (1) [reinstate more than 8,000 servicemembers](#) <https://www.federalregister.gov/documents/2025/02/03/2025-02180/reinstating-service-members-discharged-under-the-militarys-covid-19-vaccination-mandate> who had been discharged from the military for refusing the COVID-19 vaccine; and (2) develop new guidelines to [withhold federal funds from schools and educational agencies](#) <https://www.federalregister.gov/documents/2025/02/20/2025-02931/keeping-education-accessible-and-ending-covid-19-vaccine-mandates-in-schools> that require students to receive a COVID-19 vaccination. In addition, HHS is [reportedly reconsidering](#)

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<https://public3.pagerfuzzer.com/browse/HHS.gov/21-01-2025To7:38/https://www.hhs.gov/about/news/2025/01/17/hhs-provides-590-million-accelerate-pandemic-influenza-mrna-based-vaccine-development-enhance-platform-capability-other-emerging-infectious-disease.html> with Moderna to develop an mRNA vaccine for bird flu. HHS also canceled two major vaccine-related public advisory meetings held by the [FDA](https://www.nytimes.com/2025/02/26/us/politics/fda-flu-vaccine.html) (to inform its recommendations for flu vaccines for the next flu season) and the [CDC](https://www.statnews.com/2025/02/20/acip-cdc-vaccine-meeting-postponed/) (to discuss recommendations on newly approved and updated vaccines). Finally, media reports [indicate](https://www.nytimes.com/2025/03/07/health/vaccines-autism-cdc-rfk-jr.html) that the CDC is planning a new study on whether there is a connection between vaccines and autism, even though existing studies have failed to find evidence of any such link.

The Trump administration is also severely disrupting global public health efforts. On inauguration day, President Trump issued an executive order to initiate the process of [withdrawing](https://www.whitehouse.gov/presidential-actions/2025/01/withdrawing-the-united-states-from-the-worldhealth-organization/) the United States from the World Health Organization, a move he also attempted in 2020 in the midst of the COVID-19 pandemic and that could hinder the nation's global health security and ability to prepare for, and respond to, future pandemics. Further, the Trump administration's decision to dismantle the United States Agency for International Development (USAID) is severely undermining global health—from HIV prevention to infectious disease response to food security to malaria prevention. Larry Gostin and colleagues discuss these impacts, as well as ongoing litigation over these unprecedented USAID changes, in more detail [here](#) for *Forefront*. (I'd also recommend [this piece](https://www.stevevladeck.com/p/129-untangling-the-foreign-aid-ruling) by Steve Vladeck for those who want to dig in on the Supreme Court's recent ruling in these cases.)

## MAHA Commission

On February 13—to coincide with the [Senate's confirmation](https://www.npr.org/sections/shots-health-news/2025/02/13/nx-s1-5294591/rfk-jr-trump-health-human-services-hhs-vaccines) of Robert F. Kennedy, Jr. as the new Secretary of HHS—President Trump issued an [executive order](https://www.federalregister.gov/documents/2025/02/19/2025-02871/establishing-the-presidents-make-america-healthy-again-commission) to establish the Make America Healthy Again (MAHA) Commission. The MAHA Commission is tasked with

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in particular. The cabinet-level MAHA Commission will be chaired by Secretary Kennedy with leadership from a variety of agencies, including the FDA, CDC, and National Institutes of Health.

The MAHA Commission must issue a Make Our Children Healthy Again Assessment within 100 days with findings that will inform a new Make Our Children Healthy Again Strategy within 180 days. The assessment must cover a range of topics; examples include the “threat” posted by certain prescription medications (e.g., anti-depressants, weight-loss drugs, etc.), best practices for preventing childhood health issues, and the effectiveness of federal childhood health data and metrics (e.g., the National Survey of Children's Health). The executive order allows public hearings, meetings, and roundtables to solicit public input; it will be important to monitor the extent of input from public health leaders, scientists, researchers, and other experts.

Beyond these reports, the executive order directs agencies to promote transparency and open-source data for all federally funded health research, avoid or eliminate conflicts of interest, fund research on the root causes of chronic conditions, work with farmers, and expand treatment options and flexible health insurance options to support disease prevention.

## In Vitro Fertilization

During his 2024 presidential campaign, President Trump [announced](https://www.politico.com/news/2024/09/12/trump-ivf-gop-roe-abortion-00178760) [<https://www.politico.com/news/2024/09/12/trump-ivf-gop-roe-abortion-00178760>](https://www.politico.com/news/2024/09/12/trump-ivf-gop-roe-abortion-00178760) that, under his administration, the government would pay for and mandate the coverage of all IVF costs [video.html](https://www.washingtonpost.com/video/politics/trump-says-he-wants-to-cover-ivf-costs-as-president/2024/08/29/d480c9ec-d495-4ee7-a1fe-9142abo334do_video.html) [<https://www.washingtonpost.com/video/politics/trump-says-he-wants-to-cover-ivf-costs-as-president/2024/08/29/d480c9ec-d495-4ee7-a1fe-9142abo334do\\_video.html>](https://www.washingtonpost.com/video/politics/trump-says-he-wants-to-cover-ivf-costs-as-president/2024/08/29/d480c9ec-d495-4ee7-a1fe-9142abo334do_video.html) for all Americans [video.html](https://www.nbcnews.com/video/trump-ivf-to-be-paid-for-by-government-or-insurance-companies-if-elected-218264645586) [<https://www.nbcnews.com/video/trump-ivf-to-be-paid-for-by-government-or-insurance-companies-if-elected-218264645586>](https://www.nbcnews.com/video/trump-ivf-to-be-paid-for-by-government-or-insurance-companies-if-elected-218264645586). His pledge followed increased attention on how state abortion bans threaten IVF access in the wake of an [Alabama Supreme Court decision](https://law.justia.com/cases/alabama/supreme-court/2024/sc-2022-0579.html) [<https://law.justia.com/cases/alabama/supreme-court/2024/sc-2022-0579.html>](https://law.justia.com/cases/alabama/supreme-court/2024/sc-2022-0579.html) in February 2024. In that decision, the Alabama Supreme Court interpreted [state law](https://www.cnn.com/2024/02/24/health/alabama-ivf-roe-v-wade/index.html) [<https://www.cnn.com/2024/02/24/health/alabama-ivf-roe-v-wade/index.html>](https://www.cnn.com/2024/02/24/health/alabama-ivf-roe-v-wade/index.html) to conclude that frozen embryos were children, endorsing fetal personhood. The ruling led IVF providers in Alabama to halt their services, leading to severe and heart-wrenching disruption for families, until Alabama passed [new legislation](#)

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shield providers from liability. (Although IVF services have resumed, the new protections could be [short lived](https://1819news.com/news/item/pro-ivf-group-calls-for-alabama-lawmakers-to-pass-ivf-constitutional-amendment) [as the new legislation is being challenged](https://1819news.com/news/item/pro-ivf-group-calls-for-alabama-lawmakers-to-pass-ivf-constitutional-amendment) [as inconsistent with the Alabama constitution.](https://www.nytimes.com/2024/06/14/us/politics/alabamas-ivf-shield-law.html))

Almost exactly one year after the Alabama Supreme Court's decision, President Trump signed a short [executive order](https://www.federalregister.gov/documents/2025/02/24/2025-03064/expanding-access-to-in-vitro-fertilization) [that broadly directed his administration to expand IVF coverage and lower out-of-pocket costs.](https://www.federalregister.gov/documents/2025/02/24/2025-03064/expanding-access-to-in-vitro-fertilization) Specifically, the order directs the Domestic Policy Advisor to develop a list of policy recommendations to “protect[] IVF access” and “aggressively reduc[e] out-of-pocket and health plan costs for IVF treatment.” This list of recommendations—which will include both statutory and regulatory proposals—is due to President Trump within 90 days. Notably, the executive order references the need to support “mothers and fathers,” indicating that future IVF policies *may* not extend to same-sex couples or single Americans (which, if true, would invite legal challenges).

These broad directives notwithstanding, neither the executive order or accompanying [fact sheet](https://www.whitehouse.gov/fact-sheets/2025/02/fact-sheet-president-donald-j-trump-expands-access-to-in-vitro-fertilization-ivf/) [include details \(or even hints\)](https://www.whitehouse.gov/fact-sheets/2025/02/fact-sheet-president-donald-j-trump-expands-access-to-in-vitro-fertilization-ivf/) regarding the mechanisms or programs that the Trump administration intends to target to meet these goals. For instance, will the Trump administration try to mandate that private health insurers or state Medicaid programs expand IVF coverage? As they look for ways to reduce health and other federal spending to pay for tax cuts, will the administration or Congress really commit additional federal funds to expand access to IVF? And, if so, will Republican policymakers include restrictions to appease [critics of IVF](https://www.axios.com/2025/02/19/trumps-order-may-rekindle-ivf-debate-among-conservatives) [?](https://www.axios.com/2025/02/19/trumps-order-may-rekindle-ivf-debate-among-conservatives)

Whatever the Trump administration eventually does, it will build on actions taken by the Biden administration to expand access to IVF. For instance, the Biden administration [significantly expanded fertility benefits](https://web.archive.org/web/20241104014852/https://www.opm.gov/news/releases/2024/09/2024-open-season-ivf-fact-sheet/) [through the Federal Employees Health Benefits \(FEHB\) Program.](https://web.archive.org/web/20241104014852/https://www.opm.gov/news/releases/2024/09/2024-open-season-ivf-fact-sheet/) For 2025, all federal employees and their families, regardless of where they live, were able to choose between at least two national plan options with comprehensive IVF coverage (up from one national plan option for 2024). This built on

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<https://www.opm.gov/healthcare-insurance/healthcare/reference-materials/reference/2024-federal-benefits-open-season-highlights.pdf>> to cover artificial insemination procedures and IVF drugs for three cycles annually.

In March 2024, the [Departments of Defense](https://www.defense.gov/News/News-Stories/Article/Article/3702693/dod-amends-assisted-reproductive-services-policy-for-seriously-severely-ill-or/) <<https://www.defense.gov/News/News-Stories/Article/Article/3702693/dod-amends-assisted-reproductive-services-policy-for-seriously-severely-ill-or/>> and [Veterans Affairs](https://news.va.gov/press-room/va-expands-in-vitro-fertilization-for-veterans/) <<https://news.va.gov/press-room/va-expands-in-vitro-fertilization-for-veterans/>> expanded IVF eligibility for certain qualifying servicemembers and veterans, enabling those eligible to be unmarried or use donor gametes. President Biden also signed the [2025 National Defense Authorization Act](https://www.congress.gov/bill/118th-congress/house-bill/5009/text) <<https://www.congress.gov/bill/118th-congress/house-bill/5009/text>>, which requires the Department of Defense to establish a three-year pilot program on gamete cryopreservation for qualifying active duty servicemembers. The Biden administration was also [vocal in its support](https://www.whitehouse.gov/wp-content/uploads/2024/06/SAP_S4445.pdf) <[https://www.whitehouse.gov/wp-content/uploads/2024/06/SAP\\_S4445.pdf](https://www.whitehouse.gov/wp-content/uploads/2024/06/SAP_S4445.pdf)> for federal legislation such as the [Right to IVF Act](https://www.congress.gov/bill/118th-congress/senate-bill/4445) <<https://www.congress.gov/bill/118th-congress/senate-bill/4445>>, which would have protected the right to IVF, required coverage across federal programs, and lowered costs for families but was [repeatedly blocked](https://www.nbcnews.com/politics/congress/republicans-block-another-vote-ivf-protections-harris-makes-2024-issue-rcna171463) <<https://www.nbcnews.com/politics/congress/republicans-block-another-vote-ivf-protections-harris-makes-2024-issue-rcna171463>> by Senate Republicans.

## Treatment For Gender Dysphoria

The Trump administration has been aggressive in discouraging treatment for gender dysphoria, especially for minors. As discussed more [here](#) by Caroline Medina and colleagues for *Forefront*, President Trump has already issued three executive orders that target gender-affirming care and will further enable health care discrimination against transgender people. Each of these orders disputes the evidence base (and ignores support from major medical associations) that a range of treatments can be medically necessary, effective, and safe when clinically indicated to alleviate gender dysphoria.

Even though full implementation of these executive orders will take time, President Trump's directives are already having a significant chilling effect as [several hospitals and other providers](https://www.usatoday.com/story/news/health/2025/02/04/transgender-hospitals-gender-affirming-care/78204417007/) <<https://www.usatoday.com/story/news/health/2025/02/04/transgender-hospitals-gender-affirming-care/78204417007/>> have ceased offering gender-affirming care to patients out of fear and confusion. (The White House [touted this as a victory](https://www.whitehouse.gov/articles/2025/02/president-trump-is-delivering-on-his) <<https://www.whitehouse.gov/articles/2025/02/president-trump-is-delivering-on-his>

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to access care and understand their legal rights and options.) Unsurprisingly, the President's directives have also been challenged in court. As of this writing, two federal district courts have blocked enforcement of the President's [executive order <https://www.federalregister.gov/documents/2025/02/03/2025-02194/protecting-children-from-chemical-and-surgical-mutilation>](https://www.federalregister.gov/documents/2025/02/03/2025-02194/protecting-children-from-chemical-and-surgical-mutilation) that directed federal agencies to ban or otherwise limit access to gender-affirming care for those under 19. These lawsuits were filed by [Democratic attorneys general <https://www.npr.org/2025/02/15/nx-s1-5298655/gender-affirming-care-trans-youth-judge-ruling>](https://www.npr.org/2025/02/15/nx-s1-5298655/gender-affirming-care-trans-youth-judge-ruling) and [transgender youth <https://www.politico.com/news/2025/02/13/trump-transgender-minors-judge-block-00204196>](https://www.politico.com/news/2025/02/13/trump-transgender-minors-judge-block-00204196); one of these court rulings currently applies on a nationwide basis.

Meanwhile, federal agencies have begun issuing new policies in response to President Trump's directives. For instance, HHS recently [withdrew <https://www.hhs.gov/about/news/2025/02/20/hhs-civil-rights-office-takes-action-support-president-trumps-executive-orders-protect-minors-restore-biological-truth.html>](https://www.hhs.gov/about/news/2025/02/20/hhs-civil-rights-office-takes-action-support-president-trumps-executive-orders-protect-minors-restore-biological-truth.html) [Biden-era guidance from 2022](#) that clarified civil rights protections for transgender youth, their families, and providers that offer treatment for gender dysphoria. Specifically, the guidance explained how attempts to restrict access to gender-affirming care, or disclose patient information about this care, could violate federal nondiscrimination protections and the Health Insurance Portability and Accountability Act. The 2022 guidance was issued after Gov. Abbott (R-TX) directed the Texas child welfare agency to investigate parents and providers for "child abuse" in instances where a child receives gender-affirming care. In rescinding the 2022 guidance, the Trump administration [disputed <https://www.hhs.gov/sites/default/files/ocr-rescission-february-20-2025-notice-guidance.pdf>](https://www.hhs.gov/sites/default/files/ocr-rescission-february-20-2025-notice-guidance.pdf) HHS's prior conclusions about whether and how federal law protects transgender people and asserted that the guidance's prior legal bases had been called into question by subsequent court decisions.

On March 5, HHS issued a new [quality and safety memo <https://www.cms.gov/newsroom/press-releases/cms-alerts-hospital-providers-protecting-children-chemical-and-surgical-mutilation>](https://www.cms.gov/newsroom/press-releases/cms-alerts-hospital-providers-protecting-children-chemical-and-surgical-mutilation) to alert hospitals and other facilities to (1) HHS's concerns about the provision of gender-affirming care to minors; and (2) the fact that HHS "may begin taking steps" to update its policies to address its concerns about gender-affirming care. This could be a reference to future regulatory action through Medicare and Medicaid [conditions of participation and conditions for coverage <https://www.cms.gov/medicare/health-safety-standards/conditions-coverage-participation>](https://www.cms.gov/medicare/health-safety-standards/conditions-coverage-participation), a policy lever that was mentioned in the President's executive order. As Medina discussed [here](#), HHS could try to revise these standards so that a

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conditions and thus subject to civil monetary penalties or loss of Medicare or Medicaid certification. Much of the memo is dedicated to describing [various studies](#) [<https://healthjournalism.org/blog/2024/09/heres-what-the-limited-research-we-have-on-transgender-health-tells-us/>](https://healthjournalism.org/blog/2024/09/heres-what-the-limited-research-we-have-on-transgender-health-tells-us/) on the purported effects of gender-affirming care on minors.

HHS also issued [new guidance](#) [<https://womenshealth.gov/article/sex-based-definitions>](https://womenshealth.gov/article/sex-based-definitions) on how the agency will define sex and related terms going forward, a change that could have widespread implications for agency operations. HHS also launched a [new webpage](#) [<https://www.washingtonpost.com/health/2025/02/19/hhs-transgender-rfk-sex-definition/>](https://www.washingtonpost.com/health/2025/02/19/hhs-transgender-rfk-sex-definition/) featuring these and related actions. Separately, the Department of Defense issued a [new policy](#) [<https://storage.courtlistener.com/recap/gov.uscourts.dcd.276845/gov.uscourts.dcd.276845.63.1.pdf>](https://storage.courtlistener.com/recap/gov.uscourts.dcd.276845/gov.uscourts.dcd.276845.63.1.pdf) that essentially bans servicemembers diagnosed with gender dysphoria from the military and rescinded prior policies from 2016, 2019, 2021, and 2023. The new policy—which became public in light of [ongoing litigation](#) [<https://www.politico.com/news/2025/02/27/trump-transgender-troops-military-00206479?nname=women-rule&nid=00000169-5991-d01a-a169-5d9f0cc10001&nrid=0000015b-35b5-d5c0-a17b-77f714d40000>](https://www.politico.com/news/2025/02/27/trump-transgender-troops-military-00206479?nname=women-rule&nid=00000169-5991-d01a-a169-5d9f0cc10001&nrid=0000015b-35b5-d5c0-a17b-77f714d40000) filed by transgender servicemembers—notes that a current diagnosis or history of gender dysphoria is “incompatible with military service” and “not in the best interests” of national security or military service. The litigation is ongoing.

Additional policy actions are expected soon based on the timelines included in President Trump’s various executive orders. KFF [describes](#) [<https://www.kff.org/other/fact-sheet/overview-of-president-trumps-executive-actions-impacting-lgbtq-health/>](https://www.kff.org/other/fact-sheet/overview-of-president-trumps-executive-actions-impacting-lgbtq-health/) in additional detail how other Trump administration directives are impacting the health of LGBTQ people.

## Other Action: Navigator Funds, Medicaid Guidance, And Telehealth

In addition to the high-profile actions noted above, federal agencies have begun making other quieter changes to reverse Biden-era policies. For instance, HHS is [significantly reducing](#) [<https://www.cms.gov/newsroom/press-releases/cms-announcement-federal-navigator-program-funding>](https://www.cms.gov/newsroom/press-releases/cms-announcement-federal-navigator-program-funding) funding for the Affordable Care Act’s navigator program—from a record high of [\\$100 million](#) [<https://www.cms.gov/newsroom/press-releases/biden-harris-administration-awards-100-million-navigators-who-will-help-millions-americans>](https://www.cms.gov/newsroom/press-releases/biden-harris-administration-awards-100-million-navigators-who-will-help-millions-americans) under the Biden administration to \$10 million annually. As

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administration, leave some consumers without [the help they need](#) [<https://www.kff.org/quick-take/a-90-cut-to-the-aca-navigator-program/>](https://www.kff.org/quick-take/a-90-cut-to-the-aca-navigator-program/) to enroll in marketplace or Medicaid coverage (especially ahead of potentially significant changes to both programs that are being considered by Congress).

More Affordable Care Act regulatory changes are on the horizon: HHS is working on a [draft proposed rule](https://www.reginfo.gov/public/do/eoDetails?rrid=849612) <https://www.reginfo.gov/public/do/eoDetails?rrid=849612> that could revise marketplace standards ahead of the 2026 plan year. It is not clear what the administration will propose. But, in 2017, the Trump administration issued an [early rule](#) that included policies that made it harder for consumers to enroll in marketplace coverage by, for instance, shortening the annual open enrollment period and limiting special enrollment opportunities. A [report](https://files.americanexperiment.org/wp-content/uploads/2025/01/It-All-Adds-Up.pdf?v=1736974481&_gl=1*166m7kb*_gcl_au*ODYwNTQ1OTEuMTczOTM3ODAwMA) [https://files.americanexperiment.org/wp-content/uploads/2025/01/It-All-Adds-Up.pdf?v=1736974481&\\_gl=1\\*166m7kb\\*\\_gcl\\_au\\*ODYwNTQ1OTEuMTczOTM3ODAwMA](https://files.americanexperiment.org/wp-content/uploads/2025/01/It-All-Adds-Up.pdf?v=1736974481&_gl=1*166m7kb*_gcl_au*ODYwNTQ1OTEuMTczOTM3ODAwMA), published in January 2025 by the new leader of marketplace policy at HHS, could offer more clues about the Biden-era policies that the Trump administration might roll back—whether in this rule or a future rule.

Separately, HHS [rescinded](https://www.medicaid.gov/federal-policy-guidance/downloads/cib03042025.pdf) <https://www.medicaid.gov/federal-policy-guidance/downloads/cib03042025.pdf> Biden-era guidance for state Medicaid and CHIP programs on the use of Medicaid funding for health-related social needs. The rescinded guidance—two bulletins from [2023](https://www.medicaid.gov/federal-policy-guidance/downloads/cib11162023.pdf) <https://www.medicaid.gov/federal-policy-guidance/downloads/cib11162023.pdf> and [2024](https://www.medicaid.gov/federal-policy-guidance/downloads/cib12102024.pdf) <https://www.medicaid.gov/federal-policy-guidance/downloads/cib12102024.pdf> and a [framework](https://www.medicaid.gov/media/166291) <https://www.medicaid.gov/media/166291> from 2023—was designed to support states in covering services and supports that address health-related social needs (e.g., rent support, nutritional support, etc.). HHS did not provide a substantive rationale for rescinding the policies other than noting its intent to “evaluate policy options consistent with Medicaid and CHIP program requirements and objectives.” The new guidance does not disturb [existing health-related social needs waivers](https://www.kff.org/medicaid/issue-brief/section-1115-medicaid-waiver-watch-a-closer-look-at-recent-approvals-to-address-health-related-social-needs-hrsn/) <https://www.kff.org/medicaid/issue-brief/section-1115-medicaid-waiver-watch-a-closer-look-at-recent-approvals-to-address-health-related-social-needs-hrsn/> that have already been approved, and HHS makes clear that it will continue to consider states’ applications to cover relevant services and supports on a case-by-case basis.

Finally, citing the Trump administration’s “[regulatory freeze](#)” policy, HHS and the Department of Justice [extended](https://www.federalregister.gov/documents/2025/02/19/2025-02793/expansion-of-) <https://www.federalregister.gov/documents/2025/02/19/2025-02793/expansion-of->

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effective dates of two Biden-era rules on telehealth to March 21, 2025. If finalized, these rules will clarify the circumstances under which authorized providers can prescribe certain controlled substances to patients, including veterans, via telehealth. Absent the extension, the rules would have become final on February 18.

## Ongoing Litigation

In addition to defending against the [100 lawsuits](#) <https://www.nytimes.com/interactive/2025/us/trump-administration-lawsuits.html> filed against its new policies, the Trump administration is choosing to defend (or not) Biden-era policies in ongoing litigation.

## Continuing To Defend

In some instances, the Trump administration is continuing to defend federal statutes and Biden-era policies. For example, in a brief filed on February 18, the acting solicitor general [continued to defend](#) [https://www.supremecourt.gov/DocketPDF/24/24-316/343079/20250218171629934\\_24-316tsUnitedStates.pdf](https://www.supremecourt.gov/DocketPDF/24/24-316/343079/20250218171629934_24-316tsUnitedStates.pdf) the constitutionality of the Affordable Care Act's preventive services coverage requirement; the Supreme Court will hear oral argument on April 21 and issue a decision this summer. The Trump administration also [continued to defend](#) [https://litigationtracker.law.georgetown.edu/wp-content/uploads/2024/10/Novartis\\_2025.02.19\\_BRIEF-FOR-APPELLEES-.pdf](https://litigationtracker.law.georgetown.edu/wp-content/uploads/2024/10/Novartis_2025.02.19_BRIEF-FOR-APPELLEES-.pdf) Medicare's ability to negotiate drug prices before the Third Circuit Court of Appeals (and has [continued](#) <https://www.cms.gov/inflation-reduction-act-and-medicare/medicare-drug-price-negotiation/2027-public-engagement-events> to encourage formal public engagement regarding the drug negotiation program).

## Asking For A Delay

In other instances, the Trump administration asked for a delay in proceedings so it has more time to consider its position. As discussed more [here](#), the Department of Justice [received](#) [https://litigationtracker.law.georgetown.edu/wp-content/uploads/2024/02/Missouri\\_2025.03.04\\_ORDER.pdf](https://litigationtracker.law.georgetown.edu/wp-content/uploads/2024/02/Missouri_2025.03.04_ORDER.pdf) a 60-day extension to file its next brief in a lawsuit over FDA's regulation of mifepristone, meaning the Trump administration's brief will be due on May 5. The Department requested and received similar delays in litigation over Biden-era rules to (1) expand health coverage access to recipients of deferred action under the Deferred Action for Childhood Arrivals; (2)



duration health insurance and fixed indemnity insurance. In making these requests, the Trump administration noted that new agency officials need more time as they are still familiarizing themselves with each lawsuit and how the President’s various executive orders might affect the rule at issue. These latter delays could be extended if the Trump administration indicates that it wants to revise the rules.

## Reversing Positions

In still other instances, the Trump administration ceased defending Biden-era policies or took a dramatically different position in court. As one example, the Trump administration [dismissed](#) a high-profile lawsuit filed by the Biden administration to ensure that women in Idaho could obtain emergency abortion care to preserve their health (although a separate temporary restraining order is currently in effect, which preserves the status quo in Idaho for now). And, in a [significant departure](#) [from the Biden administration’s position](https://www.cnn.com/2025/02/07/politics/supreme-court-lgbtq-skrmetti-switch/index.html), the Trump administration [notified](https://www.scotusblog.com/2025/02/trump-changes-governments-position-in-pending-trans-healthcare-case-at-supreme-court/) the Supreme Court of its view that Tennessee’s ban on gender-affirming care for minors does not violate the Constitution. The Trump administration did so even though change in position is unlikely to have an impact on the outcome: the case has long been fully briefed, and the Supreme Court held oral argument in December 2024.

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### Cite As

"Health Policy Under The Trump Administration: The First 50 Days", Health Affairs Forefront, March 10, 2025 .

DOI: [10.1377/forefront.20250310.638022](https://doi.org/10.1377/forefront.20250310.638022)