

Health Care–Related Staff Picks for the Second Trump Administration

As the second Trump Administration gets to work, the individuals tasked with leading various departments will be crucial to driving the President's policy agenda. This memo provides an overview of the potential priorities and backgrounds of the personnel picked to lead the operating divisions within the Centers for Medicare and Medicaid Services (CMS) under nominee <u>Dr. Mehmet Oz</u>. We also include individuals tapped to lead health care work at the White House Domestic Policy Council and the Office of Management and Budget (OMB).

The individuals described in this memo and their anticipated positions include:

- Stephanie Carlton CMS Chief of Staff
- John Brooks CMS Chief Operating Officer
- Drew Snyder Director of the Center for Medicaid and CHIP Services
- Chris Klomp Director of the Center for Medicare
- Alec Aramanda Deputy Director of the Center for Medicare
- Abe Sutton Director of the Center for Medicare and Medicaid Innovation (CMMI)
- Heather Flick HHS Chief of Staff
- Don Dempsey OMB Program Associate Director for Health Care Programs
- Theo Merkel Special Assistant to the President for Domestic Policy

Next Steps. CMS is currently being overseen by President Trump's transition team, led by John Brooks. The Senate Finance Committee will hold a confirmation hearing for the nominee to lead the Department of Health and Human Services (HHS), <u>Robert F. Kennedy Jr.</u>, on January 29, 2025. Following Kennedy's hearing, the committee will hold a confirmation hearing for Dr. Oz. It is possible that the heads of operating divisions will not be officially put into position until Kennedy and Dr. Oz are confirmed for CMS and <u>Russell</u> <u>Vought</u> is confirmed for OMB, but the timing is not yet clear. None of the individuals included in this memo will require a Senate confirmation hearing.



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Stephanie Carlton, CMS Chief of Staff

Policy Positions and Priorities

- Medicaid:
 - As a prior Senate Finance Committee staffer overseeing the Medicaid program, Carlton helped shape the Republican position on Medicaid for a decade. She is <u>quoted</u> in a University of Texas Business School publication as saying "I get to shape and then negotiate public laws affecting these programs. In many ways, this is my dream job. I'm passionate about reforming our unsustainable entitlement program spending, which is the biggest driver of our \$14 trillion national debt and current \$1.6 trillion budget deficit."
 - In her bio she also states that while on the Senate Finance Committee she helped the Republicans craft a major Medicaid policy reform along with 32 governors.
- Medicare/Medicare Advantage:
 - During the Affordable Care Act debate, Carlton advised Senator John Cornyn (R-TX) and then later worked to implement the policy as Republican Committee staff. While on the Senate Finance Committee, Carlton also oversaw the Medicare Advantage program.
- Health Systems:
 - Carlton is most recently a partner at McKinsey Consulting where she worked with a range of health systems on strategic growth and performance, including academic health systems, rural health systems, integrated delivery networks, and children's hospitals across the United States.
- Marketplace:
 - Carlton also served as the leader of McKinsey's Center for US Health System Reform and a leader in the Medicare Domain. In this capacity, she co-wrote a 2022 <u>analysis</u> indicating millions of ACA enrollees benefit from subsidies expanded under the Biden administration, which are set to expire at the end of 2025.
- Innovation:
 - Carlton was a leader in McKinsey's Provider Performance Improvement and Operations Practices, focusing on tech-enablement of workforce excellence, innovation, talent retention/recruitment, and care delivery. She also founded a place-based transformation with 20 community leaders to improve holistic health outcomes.
 - Carlton co-wrote a <u>report</u> for McKinsey assessing the Center for Medicare and Medicaid Innovation (CMMI)'s ten year strategy released in October 2021. The report does not make recommendations but highlights opportunities to adapt models to meet signals from the federal government and patient populations.

She is assisting Dr. Oz with his anticipated Senate confirmation.

Background and Career

- Professional Experience:
 - Registered Nurse, Labor and Delivery, Georgetown University, Washington, DC.
 - Policy Advisor, Senator Tom Coburn (R-OK) from 2006 to 2009.
 - Policy Advisor, Senator John Cornyn (R-TX) from 2009 to 2011.



- Carlton was the top Republican advisor for Medicare Advantage and Medicaid on the US Senate Finance Committee from 2011 to 2013.
- Carlton has been at McKinsey and Company as a Partner and Expert since 2013.
- Carlton is a Harvard Institute of Politics Resident Fellow.

• Boards and Political Campaigns

- Carlton served on the Boards of the Health Care Cost Institute, Ignite Health, and the University of Texas McCombs Alumni Advisory Board.
- Carlton was principal health advisor to former Florida Governor Jeb Bush's 2016 Presidential campaign, releasing reform proposals the Wall Street Journal described as "by far the most thoughtful policy proposals with the best chance of being implemented."
- Carlton was also an advisor on the official Romney Readiness Project of 2012.

• Education and Training

- Received a Bachelor of Science and Bachelor of Nursing from Cedarville University, Cedarville, Ohio
- Attended a Perinatal Nursing Fellowship at Georgetown University Hospital
- Received an MBA from the University of Texas at Austin.

- Published Work
 - "<u>The end of the COVID-19 public health emergency: What's next?</u>," McKinsey & Company, May 2023
 - "Looking ahead to the next decade of accountability for care delivery," McKinsey & Company, November 2022
 - "Insights into the 2022 individual health insurance market," McKinsey & Company, August 2022
 - "<u>New Stars ratings for Medicare Advantage prioritize customer experiences</u>," McKinsey & Company, October 2020
 - "Supplemental benefit changes in Medicare Advantage increase options for those with chronic conditions," McKinsey & Company, August 2020
 - "<u>The exciting news in Medicare is happening at the kitchen table—not on the debate</u> <u>stage</u>," McKinsey & Company, December 2019
 - o "<u>Assessing the Medicare Advantage Star Ratings</u>," McKinsey & Company, July 2018
 - "<u>What can states do to change key parameters of Medicaid?</u>," McKinsey & Company, April 2017
 - "<u>What can states do to change key parameters of the individual market?</u>," McKinsey & Company, April 2017



John Brooks, Chief Operating Officer

Policy Positions and Priorities

Brooks has not issued public statements to indicate his priorities for the Administration.

- Drug Pricing:
 - As the previous drug pricing czar, Brooks may lend his expertise to any drug pricing priorities under the second Trump Administration.
 - Since departing the first Administration, Brooks has <u>spoken</u> to the importance of ensuring access to biosimilars and generics to generate savings for the government, while improving patient care. He has also worked on pharmacy benefit manager (PBM) reform, which the second Trump Administration is focused on accomplishing.

Background and Career

- **Previous Trump Administration:** Brooks was a former Senior Medicare Official during the first Trump Administration, including the following positions:
 - Counselor to the Secretary of Health Policy (2017-2018);
 - Health Advisor at White House's Domestic Policy Council (2018-2019);
 - Principal Deputy Director at the Center for Medicare (2019-2020); and
 - Senior Advisor to HHS Secretary Alex Azar on drug pricing reform (2019-2020).
- **Consulting:** Since the end of the first Trump Administration, Brooks has worked as a Partner at South Capitol LLC, health policy consulting firm.
- Education:
 - Received an MBA degree in corporate finance from Virginia Tech in 2003.
 - Received a J.D. from the University of Virginia in 2009.



Drew Snyder, Director of the Center for Medicaid and CHIP Services

Policy Positions and Priorities

- Maternal Health
 - Mississippi adopted presumptive Medicaid eligibility for pregnant individuals as well as 12-month postpartum coverage during Snyder's tenure.
- Medicaid Expansion:
 - Mississippi attempted to expand Medicaid but with work requirements. The enhanced FMAP rates + additional 5% increase federal funding through the American Rescue Plan helped the state pursue the idea of expansion. Of not, both the 90% FMAP and 5% twoyear increase are being considered as potential budget cuts via Budget Reconciliation in the House.
- Fiscal Reform / Balanced Budget
 - Mississippi Medicaid had a <u>\$47 million projected shortfall</u> when Snyder was hired as Executive Director. The agency is reported to have had six consecutive balanced budgets during his tenure, including the development of a nine-figure reserve. Snyder noted that this happened despite record increased enrollment in 2023 and a 10% decrease in state funding beginning in 2017.
- Medicaid Reimbursement
 - Increased Hospital Reimbursement: Amidst concerns about the solvency of Mississippi hospitals, Snyder oversaw the governor's plan – with CMS' approval – to increase Medicaid reimbursement rates for hospitals totaling \$900 million.
 - Quality-Based Provider Reimbursement: He is credited with overseeing a shift to quality-based provider reimbursement as part of "transformational" payment reform.
- Efficiency
 - Staffing Reductions: Mississippi's Medicaid agency staffing is reported to have been reduced by more than 10% under Snyder's leadership.
 - Vendor Contracts: A stringent process for reviewing vendor contracts is reported to have been added during Snyder's term.
- Patient Access
 - Snyder is credited with overseeing policies that made it easier for members to access services.
- Digital Reforms
 - Snyder is reported to have "overhauled digital operations."
- Overall Perspective: Balancing Quality with Fiscal Responsibility
 - As reported by the <u>Magnolia Tribune</u>, "When he resigned, Snyder said the job of running Medicaid involved balancing the delivery of quality services with being accountable to the taxpayers who fund the program.

"I am in favor of limited government, but I am not anti-government. What government does it should do well. Mississippians deserve well-run public services," he said. "And running the Medicaid program the right way doesn't just benefit the Medicaid and their families or the providers receiving payments. Running the Medicaid



program the right way frees up resources for other public services that are important or maybe even increases the chances of lowering taxes.""

When he departed as Medicaid Executive Director, Snyder received broad praise for his leadership during his nearly 7-year tenure. This includes accolades from Families as <u>Allies</u> as well as from the governor. Families as Allies' Executive Director underscored that Snyder always made space to listen to families' experiences and also reached out to ensure a depth and accuracy of understanding including as it pertains to Medicaid and mental health.

Background and Career

- Mississippi Medicaid Executive Director (January 2018 October 2024)
 - Snyder served as Mississippi's Medicaid Executive Director for 7 years including overseeing the state's adoption of presumptive eligibility new coverage during pregnancy as well as 12 months postpartum Medicaid coverage. Mississippi has not expanded Medicaid and only covers 700,000 individuals (900,000 at the height of the pandemic when continuous coverage was required). Snyder is reported to have stepped in to lead the agency during a turbulent time when there was controversy related to managed care contracts being awarded to three private companies.
- Office of Governor Phil Bryant
 - Deputy Chief of Staff from July 2017 to January 2018
 - Policy Director and Counsel from January 2016 to January 2018
 - Deputy Chief Counsel from October 2014 to Jan 2016
- Assistant Secretary of State for Policy and Research
 - Before serving as Medicaid Executive Director, Synder served as an Assistant Secretary of State for Policy and Research under Mississippi's lieutenant governor, Delbert Hosemann from 2012 to 2014.
- Associate, Hollingsworth LLP from 2007 to 2012
 - Focused on complex litigation with a focus on pharmaceuticals and medical device defense, as indicated on LinkedIn.
- Education
 - Received a JD from the University of Virginia School of Law in 2007.
 - Received a BBA in Business Studies from the University of Mississippi in 2003.

- <u>Report: Former Mississippi Medicaid director to run federal program</u>, by Gwen Dilworth, Mississippi Today, January 15, 2025
- Former Mississippi Medicaid director may soon lead the federal program, by Courtney Ann Jackson, WLBT3, January 15, 2025
- Drew Snyder Departing Medicaid After Nearly 7 Years; Governor Reeves Names Cindy Bradshaw Successor, governorreeves.mc.gov, October 9, 2024
 - "Snyder spearheaded numerous reforms to enable the Division of Medicaid to better prioritize its resources and capture cost savings, and the agency still operates below its 2016 state-supported funding level. He was instrumental in the transformational



payment that generated additional revenue for the state's hospitals. Under his direction, Mississippi Medicaid moved to more quality-based provider reimbursements, implemented more rigorous oversight of vendors, adopted new policies making it easier for members to access services, and overhauled digital operations."

- <u>Mr. Snyder does to Washington?</u> Former state Medicaid chief in line to head program for <u>Trump</u>, by Russ Latino, *Magnolia Tribune*, January 14, 2025.
- <u>Families as Allies</u> (State Chapter of the National Federation of Families), Executive Director Joy Hogge, October 10, 2024





Chris Klomp, Director of the Center for Medicare

Policy Positions and Priorities

- Medicare Payment and Delivery
 - Klomp has not issued statements describing his priorities for Medicare payment policy, quality measurement, or other programs. Klomp has also not publicly taken a position on Medicare Advantage.
- Health technology
 - Much of Klomp's work experience is in digital health, including digital care and platforms for patients, providers, and plans to connect. Klomp also has experience working with technology platforms to improve patient navigation. Klomp may support public-private partnerships to use technology in new ways in the Medicare program.
 - Klomp <u>attended</u> a 2017 White House event on improving interoperability under the previous Trump Administration and <u>praised</u> the interoperability rules published by that Administration for enhancing patient access to their data.
 - Klomp's work on digital care through PointClickCare, and his board memberships indicate that he is likely to support telehealth, digital therapeutics, and other innovative technologies in the health care delivery system.
- Value-Based Care
 - Klomp has <u>advocated</u> for increased care coordination, which was a <u>central component of</u> the company Collective Medical that he helped build.
 - In 2021, Klomp authored a <u>blog</u> for PointClickCare on expanding awareness of valuebased care. Klomp cited research showing that many patients have not heard of valuebased care but would support a system where providers are paid based on quality rather than volume. Klomp proposed that technology solutions to enhance interoperability and increase data sharing will be crucial to improve patient experience and advance value-based care.
- Private Equity:
 - Klomp has not made any statements about his approach to private equity within Administration, but he has experience working for private equity and investment companies. Due to this experience, Klomp may take a more favorable stance toward private equity involvement in the health care industry than during the Biden Administration.
- Women's Health and Family Planning:
 - Klomp's father was an OBGYN. In an <u>interview</u> with the Maven Clinic, Klomp spoke about the importance of "comprehensive family planning and support." Klomp also supported access to vitro fertilization (IVF).

Background and Career

- Education
 - Graduated from Brigham Young University with a degree in economics in 2004.
 - Received an MBA from the Stanford Graduate School of Business in 2011.
- Health Technology



- Bain & Company, then Bain Capital as Associate Vice President of North American Private Equity from 2004 to 2014
- In 2014, Klomp founded <u>Collective Medical</u> with his partners. Collective Medical is a real-time care coordination network with an emphasis on high-risk safety net populations. Klomp served as the CEO and Chairman until its acquisition in 2020.
- PointClickCare <u>acquired</u> Collective Medical in December 2020 and Klomp has served as an Executive Vice President of Acute & Payer, Chief Evangelist, then Senior Advisor until January 2024. PointClickCare focuses on technology for the long-term and post-acute care market.
- Klomp has been a partner in <u>Endurance Companies</u> since 2016. Endurance Companies is a holding company led by "serial entrepreneurs." Klomp currently focuses on Flock Health (digital care for Serious Mental Illness).

• Boards (all currently active)

- Joined the board of <u>Nomi Health</u> in 2021, a direct health care company using digital care.
- Joined the board of <u>Maven Clinic</u> in 2022, focused on virtual care for women's and family health.
- Joined the board of <u>InnovaCare Health</u> in 2022, a value-based care provider focused on seniors.
- Joined the board of <u>HealthJoy</u> as a Chair in 2024, a health care navigation platform for individuals with employer-sponsored coverage to receive digital care and compare providers.

Relevant News and Media

 <u>Understanding the Power of Value-Based Care</u>, By Chris Klomp, PointClickCare Blog, September 20, 2021.



Alec Aramanda, Deputy Director of the Cener for Medicare

Policy Positions and Priorities

- Alec Aramanda has not issued any public stances or positions related to health care policy.
- As a policy advisor for the Majority House Energy & Commerce Committee, Aramanda focused on Medicare policy including drug pricing reform payments, coverage, and coding.
- Over the past few years, Aramanda has participated in presentations on topics such as the impact of the election on the <u>plasma industry</u>, <u>Medicare basics</u>, and Congressional activity on <u>telehealth policy</u>.

Background and Career

- Aramanda is a Principal for the lobbying firm William & Jensen, PLLC since 2013
- Education:
 - Received a degree in Political Science from Haverford College in 2006
- Hill and Administration Career
 - Led Medicare Policy for the Majority House Energy & Commerce Committee from 2021 to 2023
 - Served in the first Trump Administration as Director of Legislation and Stakeholder Management, Centers for Medicare and Medicaid Services from 2018 to 2021 and Deputy Assistant Secretary for Health Policy at HHS from 2017 to 2018
 - Worked as a staffer for Senators Jim DeMint (R-SC) from 2010 to 2013 and Ted Cruz (R-TX) from 2013 to 2017

- GRAIL LOBBIES UP, By Chelsea Cirruzzo and Ben Leonard, Politico, December 22, 2023
- First Look: E&C's Alec Aramanda goes to K Street, By Victoria Knight, Politico, November 2, 2023



Abe Sutton, Center for Medicare and Medicaid Innovation

Policy Positions and Priorities

- Prescription Drug Pricing Models:
 - Sutton has previously <u>expressed</u> support for the Most Favored Nation (MFN) model, which her argued balances the preservation of incentives for innovation with addressing public concerns over high drug prices. While MFN might slightly reduce innovation, Sutton believes it would create more politically sustainable revenues.
 - The Trump Administration has indicated that they will not return to MFN, but CMMI under Sutton is likely to explore alternative models at CMMI, maintaining a focus on value-based care while continuing support for initiatives such as the Cell and Gene Therapy Access Model.
- Kidney Care and ESRD (End-Stage Renal Disease):
 - As a key <u>architect</u> of the Trump administration's kidney care initiative, Sutton spearheaded reforms to promote home dialysis and kidney transplants. These efforts aimed to increase accessibility and received bipartisan support.
 - His ongoing priorities would likely include advancing integrated kidney care models and value-based care frameworks, such as those implemented in Evergreen Nephrology.
- Medicare Innovation and Reducing Bureaucracy:
 - Sutton advocates for changes to Medicare evaluation processes to reduce excessive paperwork and prevent private insurers from exploiting the system for federal reimbursements.
 - In an April 2024 Health Affairs article, Sutton proposed piloting a data-driven, inference-based approach to calculating patient risk scores for Medicare Advantage (MA) plans and value-based Accountable Care Organizations (ACOs). This method would utilize existing data science capabilities to infer diagnoses and associated risk scores for populations, reducing reliance on annual diagnosis confirmation through provider-submitted claims, which Sutton argued currently impose significant administrative burdens and contribute to inflated costs through "over-coding." By improving the accuracy, efficiency, and fairness of the Centers for Medicare and Medicaid Services Hierarchical Condition Category (CMS-HCC) Risk Adjustment Model, the proposed approach aims to lower taxpayer costs, enhance competition, and encourage broader market participation while addressing inefficiencies and inequities in the current system.
- Health Insurance Market Reforms:
 - Sutton worked on initiatives to expand competition in health insurance markets, and promote choice and affordability in individual insurance markets, and helped implement President Donald Trump's 2017 executive order on health care choice and competition.
- Support for Value-Based Care Models:



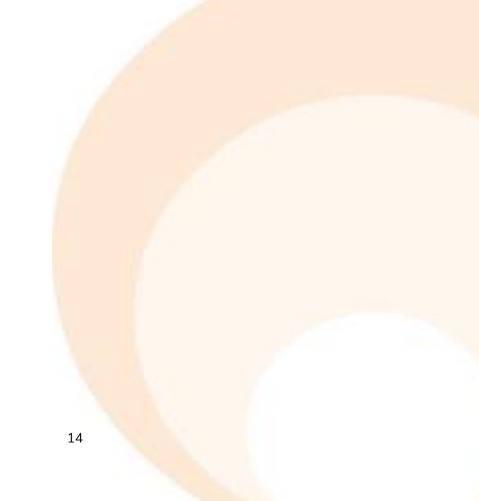
- Sutton's focus on integrated care aligns with value-based payment systems that prioritize preventive care and better outcomes. Sutton could also align with RFK to explore models on chronic illness prevention.
- Through his work at Rubicon Founders, Honest Health, and Evergreen Nephrology, Sutton is invested in launching and scaling companies that innovate within the healthcare system, particularly in integrated care solutions and chronic disease management.

Background and Career

- Education
 - Received undergraduate degrees in political science, management, and health care management and policy from the Wharton School and the College at the University of Pennsylvania.
 - Completed a J.D. degree at Harvard Law School in 2022.
- Policy Career
 - Served under the first Trump administration in the White House from 2017 to 2019 as Associate Director at the National Economic Council, Advisor to the Secretary of Health and Human Services, and Policy Advisor at the Domestic Policy Council, with a <u>focus</u> on "on the shift to paying-for-value within Medicare, increasing choice and competition in health care markets, and updating the federal government's approach to kidney care.
 - Worked as a Senior Business Analyst for the health sector at McKinsey & Company.
- Entrepreneurial Ventures
 - Co-Founder of Honest Health in 2021; physician-led organization of healthcare experts and clinicians that partners with health systems, physician organizations, and payers to navigate healthcare transformation, delivering complementary value-driven solutions to improve the care experience and to reduce costs for people with Medicare.
 - Served on the Board of Directors of Life Connection of Ohio from 2021 to 2024, a nonprofit Organ Procurement Organization dedicated to saving the lives of patients in need of organ transplants.
 - Co-Founder of Evergreen Nephrology in 2021, a home-health care service partnering with nephrologists and payors to redefine kidney care for patients with chronic and endstage kidney disease. Operating across 24 states with a network of over 900 providers, Evergreen aims to transform and expand access to value-based kidney care.
 - Served as Principal at Rubicon Founders since 2023, an entrepreneurial healthcare investment firm focused on building and growing transformational companies, with investments in primary value-based care, among others. The company was founded by Adam Boehler, who led Medicare's innovation center under Trump 1.0. The firm helped launch Evergreen Nephrology and Honest Health.



- <u>Architect of Trump's kidney policy to depart administration</u>, By Dan Diamond and Adam Cancryn, Politico. August 7, 2019.
- Former Trump White House, HHS aide Abe Sutton likely to lead Medicare, Medicaid innovation center, By Rachel Cohrs Zhang, STAT News. January 13, 2025.





Heather Flick, HHS Chief of Staff

Policy Positions and Priorities

Flick has not described her priorities for the new Administration.

Connection to Assistant Attorney General Harmeet Dhillon

- Flick is connected to Harmeet Dhillon who has been tapped for Assistant Attorney General. Flick previously worked in Dhillon's law firm.
- Hot-button issues
 - Marc Scheineson, former FDA Associate Commissioner for Legislative Affairs has cited that Flick is likely to serve as the point of contact at HHS for "hot-button issues" that are being lobbied over such as abortion pills, flavored tobacco products and laboratorydeveloped tests.

Background and Career

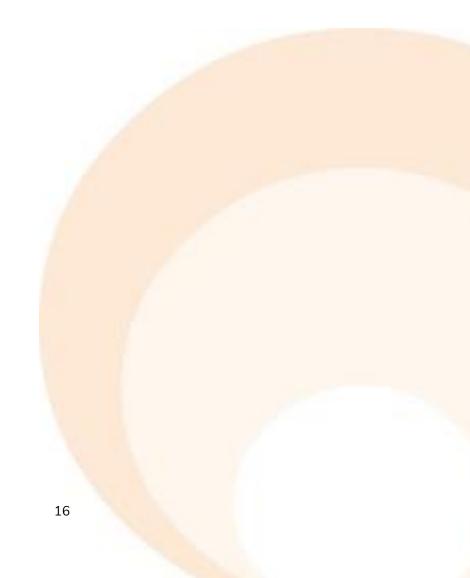
- Counsel, Binnall Law Group
 - Private law firm encompassing cases related to commercial transactions and licensing, entity formation, purchase / sale transactions, corporate governance and management, IP protection, litigation and general business advice. Flick has been there since 2021.
- Health and Human Services (HHS)
 - Flick served in multiple roles during President Trump's first Administration from 2017 to 2019. This included:
 - HHS Acting General Counsel;
 - HHS Acting Secretary for Administration; and
 - Senior Advisor to HHS Secretary Alex Azar.
- Attorney, The Flick Group
 - Flick ran her solo law practice with strategic counsel for start-ups, candidates, and committees from 2003 to 2017 and again for ten months in 2021.
- Counsel, Dhillon Law Group
 - Before joining HHS during Trump's first Administration, Flick was an attorney at Dhillon Law Group from 2015 to 2017, a firm founded by Harmeet Dhillon, a long time Trump ally who the President has selected to be Assistant Attorney General. The law firm is known for representing clients in conservative civil rights cases. It has also supported Trump during his legal challenges.
- Education
 - Received a JD from the Universit<mark>y of San Franci</mark>sco School of Law in 1996.
 - Received a BA in political science and history from The University of California Los Angeles in 1992.

Relevant News and Media

• <u>HHS Lawyer Now Agency's Acting Assistant Secretary for Administration</u>, by Kristen Rasmussen, *National Law Journal*, April 11, 2018. HHS links have been archived.



- <u>Track White House Staff, Cabinet Members and Political Appointees Across the</u> <u>Government</u>, ProPublica, last updated October 2019.
- <u>Trump health alum tapped as RFK Jr.'s chief of staff</u>, by Adam Cancryn and David Lim, *Politico*, January 1, 2025.
- <u>What Flick's hire at HHS means for the FDA</u>, by David Lim and Lauren Gardner, *Politico*, January 14, 2025.
- Former Trump Official Heather Flick Named HHS Secretary's Chief of Staff, inkl, January 15, 2025
- <u>Heather Flick | Binnall Law Group</u>, text available January 17, 2025, removed as of January 21, 2025





Don Dempsey, OMB Program Assistant Director for Health Care

Policy Positions and Priorities

Dempsey has experience at OMB from the George W. Bush Administration when he oversaw Social Security and health care programs. Dempsey has also had extensive experience in health policy consulting lobbying for hospitals and insurers. He now works in policy research.

- Medicare Advantage: Dempsey leads research on the impact of Medicare Advantage at the Better Medicare Alliance (BMA). Dempsey has only been at BMA since January 2024 and does not have any published articles, but BMA is a strong supporter of Medicare Advantage. Dempsey may be more favorable to Medicare Advantage compared to the Biden Administration, which scrutinized prior authorization, marketing practices, and Medicare spending.
- Affordable Housing: As Councilman, Dempsey <u>opposed</u> including affordable housing in the council's list of priorities, believing that the free market was already addressing housing needs, citing a decrease in housing and rental prices.

Background and Career

- Policy
 - Dempsey is the Vice President of Policy and Research at Better Medicare Alliance.
 - Worked as the Managing Director of Marwood Group from 2022 to 2024 after previously being a Senior Vice President from 2008 to 2014.
 - Served as the Vice President of Policy and Regulatory Affairs at CVS Health from 2016 to 2021
 - Dempsey was the Government Affairs Coordinator at K&L Gates LLP from 2015 to 2016
 - Worked as Vice President at Breakaway Policy Strategies from 2014 to 2015.
- OMB: Dempsey served as the Program Associate Director for Human Resources at OMB during George W. Bush's Administration from 2006 to 2008.
- **Congress**: Dempsey spent time as congressional staff for several Republic senators:
 - Legislative Director for Senator Richard Burr (R-NC) from 2005 to 2006;
 - Director of Health Policy for the Senate Budget Committee from 2004 to 2005;
 - Legislative Assistant for Senator Jon Kyl (R-AZ) from 2002 to 2004; and
 - Legislative Assistant for Senator Phil Gramm (R-TX) from 1998 to 2002.
- Education
 - Received a Master of Arts in economics from George Mason University.

Relevant News and Media

 <u>K&L Gates Boosts Public Policy Practice with Addition of Former OMB Associate Director in</u> <u>Washington, D.C., Office</u>, K&L Gates, June 10, 2015.



- Volusia County Council District 1 candidates share what they value, will fight to change, Daytona Beach News-Journal, October 10, 2022
- <u>A new majority: 5 incoming council members hold the power to change Volusia County</u>, Daytona Beach News-Journal, January 5, 2023
- <u>County wrap-up: Council split over \$39M sports complex and 'economic driver' concept</u>, Yahoo News, January 10, 2025





Theo Merkel, Special Assistance to the President for Domestic Policy at the Domestic Policy Council

Policy Positions and Priorities

Medicaid

- Merkel <u>critiques</u> the Medicaid expansion under the Affordable Care Act (ACA). Merkel argued that Medicaid expansion has not fulfilled its intended purpose and should not cost more than private insurance. He also points to the open-ended financing structure of Medicaid, which incentivizes wasteful spending at the state level, exacerbating inefficiencies.
- Merkel <u>advocates</u> for reforming Medicaid's financing structure by equalizing federal payments for all Medicaid enrollees within a state. He said that the current system disproportionately incentivizes states to overspend on Medicaid expansion populations, while underfunding the more traditional, high-needs Medicaid enrollees.

Drug Pricing

- Merkel <u>advocated</u> for targeted, market-driven solutions to insulin affordability, emphasizing the importance of protecting competition to drive innovation and reduce prices. He supports the revival of a Trump-era program that capped insulin copayments at \$35 by leveraging manufacturer discounts instead of taxpayer subsidies. He also criticized the IRA's insulin copay cap for raising premiums and federal subsidies.
- Merkel <u>advocated</u> for market-based reforms to reduce prescription drug prices for Medicare beneficiaries, particularly for high-cost drugs with limited competition, such as oncology, ophthalmology, and rheumatology treatments under Medicare Part B. He proposed empowering Medicare Advantage plans to negotiate directly with drug manufacturers, leveraging market forces to reduce prices while avoiding government-imposed price controls.
- Merkel has <u>called</u> for a comprehensive redesign of Medicare Part D to stabilize premiums and address the root causes of premium increases. He opposes temporary fixes such as the Premium Stabilization Demonstration under the IRA, advocating instead for a long-term, bipartisan approach to Medicare reform that focuses on sustainable solutions.

• Medicare for All

- Merkel has been a critic of Vice President Kamala Harris's 2019 Medicare for All proposal, estimating that it would cost a lot. He highlighted the financial and operational challenges posed by the plan, stressing that the massive tax increases and debt needed to finance it would likely worsen federal deficits. Merkel believes that the proposal is an unrealistic and deeply problematic vision that fails to account for the fiscal and administrative complexities involved.
- ACA



- Merkel <u>critiqued</u> the ACA's structure, particularly in relation to subsidies. He called for reforms to improve the value of the ACA's offerings for both enrollees and taxpayers. Specifically, Merkel opposed the extension of enhanced premium tax credits (PTCs), arguing that they artificially inflate federal spending without addressing underlying structural issues in the ACA marketplace.
- Government Spending and Program Integrity
 - Merkel <u>supports</u> stricter eligibility verification in public health programs to reduce inefficiencies and ensure that taxpayer resources are directed to those who need them most. Merkel also backs statutory budget neutrality for demonstration programs, such as those in Section 402 of the Social Security Act, to prevent misuse of funds and ensure accountability in federal health initiatives.

Background and Career

- Think Tanks
 - Merkel has been Director of the Private Health Reform Initiative and Senior Research Fellow at the Paragon Institute since 2023. Paragon was founded by Brian Blase, a health policy advisory during the first Trump Administration. Paragon supports free market policies.
 - Merkel is also a Senior Fellow at the Manhattan Institute.
- Congress
 - Merkel worked for Senator Pat Toomey (R-PA) from 2011 to 2023, working his way up to Legislative Director. Sen. Toomey served on the Senate Finance Subcommittee on Health Care while Merkel was there.
- White House
 - Merkel was a Special Assistant to the President for Economic Policy within the National Economic Council in the White House from 2019 to 2020 during the previous Trump administration.
- Education
 - Received a BA from Johns Hopkins University in 2010.

- Testimony Submitted to the Senate Finance Committee, Manhattan Institute, September 17, 2024
- Should Medicaid Expansion Cost More than Employer-Sponsored Insurance?, Manhattan Institute, September 23, 2024
- Quantifying Medicare for All, Harris-Style, Manhattan Institute, August 20, 2024
- <u>A Market-Based Solution to Rising Medicare Costs</u>, Manhattan Institute, July 24, 2024
- How to Deliver Lower Prices for Seniors A Market-Based Reform for Expensive Drugs with
 Limited Competition, Manhattan Institute, June 18, 2024



- <u>Testimony Before the U.S. Senate Budget Committee</u>, Manhattan Institute, October 18, 2023
- <u>Congress Is Confused about Insulin</u>, Manhattan Institute, May 9, 2023

