

Health Research Institute *Spotlight*



November 2016

President-elect Donald Trump: Turnaround time

Like a chief executive hired to turn a failing company into a profitable one, president-elect Trump has said he will take an unflinching corporate approach to overhauling the US healthcare system. For an industry that prefers stability to surprises—and one that has worked to adapt to the Affordable Care Act—Trump’s “repeal and replace” agenda may create new uncertainty and opportunity for healthcare leaders.

President-elect Donald Trump will likely enter the White House seeking to “repeal and replace” the six-year-old Affordable Care Act (ACA). While the law has reduced the number of uninsured people and accelerated the shift to a more value-based healthcare system, it has struggled to lower costs, make care more affordable, and win over a majority of Americans.¹

Though complex, full repeal may not be a far reach for the president-elect. And even if Trump falls short of full repeal, he still may have Congressional and regulatory paths to more targeted changes. For example, Trump could push Republican senators to defund the consumer exchange subsidies in a budgetary maneuver known as reconciliation.

If successful in repealing the ACA, Trump said he would implement long-held Republican policies, plus a few new to his party’s thinking, designed to shift control of the \$3 trillion healthcare industry away from the federal government and toward private enterprises, state governments and consumers. (For a more detailed exploration of Trump’s proposals and their potential impacts on the industry, see the section on implications on pp. 6-7.)

To push through his platform, Trump will likely have to navigate mounting pressure from macroeconomic forces—including rising healthcare expenditures and challenging Medicare financial and demographic projections—that may impact how he approaches his health reform agenda. Trump will likely need to mend relationships with congressional lawmakers—including Republicans who drew fire from him on the campaign trail. Consumers’ expectations for the evolving US health system may also affect the Trump administration’s ability to negotiate with policymakers. (For more on the political environment Trump will face, see the sidebar on p. 9.)

Americans view healthcare as a top issue. While the candidates did not make healthcare a top-tier priority until the last weeks of the campaign, 76% of consumers told HRI that it is important to them.² For Trump, the challenge will likely be making healthcare more affordable for consumers while offering plenty of choices.

In interviews with PwC’s Health Research Institute (HRI), health industry experts said they viewed Trump as a corporate chief executive—an image he projected on the campaign trail. As such, the

Trump administration is more likely to rely on free market levers, such as price transparency for providers and open negotiations with pharmaceutical companies, than the traditional regulatory process. This approach could benefit consumers by giving them the tools they need to shop around for their care.

“The refreshing part of it is he is bringing in completely new people and, presumably, they will re-evaluate everything that’s been done in terms of policies and building for the future,” said Chip Kahn, president and chief executive of the Federation of American Hospitals, a Washington, DC-based association that represents for-profit health systems.

For this report, HRI interviewed healthcare advisors and association executives to gain a clearer understanding of how Trump’s presidency will likely affect the industry. HRI also surveyed American consumers about healthcare policy issues that may emerge under the new administration. HRI assessed Trump’s proposals as he presented them during campaign speeches and on his campaign website from July through November.

¹ Gallup, “More Americans Negative than Positive about ACA,” September 8, 2016, <http://www.gallup.com/poll/195383/americans-negative-positive-aca.aspx>.

² PwC Health Research Institute, “HRI Consumer Survey,” September 2016

Trump's health policy priorities: From "repeal and replace" to "the art of the deal"

During his campaign, Trump promised to immediately repeal the ACA. He also unveiled a multi-point plan to overhaul the US healthcare system, aiming to lower the cost of care through market, tax and legal reforms. His proposals include the expanded use of health savings accounts, cross-state insurance sales, increased transparency around provider prices, re-importation of medications, as well as allowing Medicare to negotiate with drug makers, giving tax credits to individuals who pay out-of-pocket for their care, and block-granting Medicaid.

HRI conducted an analysis of Trump's proposals based on industry, consumer and congressional sentiments towards the president-elect's policy goals (see figure 1).³

Repeal of the ACA would greatly impact the healthcare industry

Repealing the ACA would be a major change to the current healthcare system, which has spent much of the past six years implementing its many moving parts. The industry has learned to live with and even, in many cases, embrace the law. Industry executives have questions about the implication of Trump's policies to replace the ACA, which could increase the deficit in the long run and the number of uninsured by almost 20 million people, according to a Commonwealth Fund study.⁴ Employers, who complained about the administrative costs of implementing the ACA could find themselves spending money on changing employer policies and data systems to implement laws meant to replace the ACA, if it were repealed.

Repeal also ends popular ACA provisions, like the guaranteed issue of insurance, allowing young adults to remain on their parents' health plans until the age of 26, and filling in the Medicare Part D donut hole. It is unclear from his proposals

Figure 1: Trump's healthcare proposals: Likelihood and impact

	Likelihood of gaining traction	Impact on the federal budget	Health sectors affected		
			Payers	Providers	Pharmaceutical/ life sciences
Stand-alone proposals or potential replacement options under repeal	Repeal and replace the Affordable Care Act	Moderate	-	-	+
	Require transparency of provider service prices	High	+	+	-
	Expand use of health savings accounts	High	-	+	-
	Allow sale of insurance plans across state lines	Moderate	/	/	/
	Re-importation of prescription drugs	Moderate	/	/	/
	Allow Medicare to negotiate drug prices	Moderate	/	/	/
	Convert federal Medicaid funding to block grants	Moderate	+	/	-
	Allow all individuals to deduct health insurance premiums	Low	-	+	+

- Negative / Neutral + Positive

Source: PwC Health Research Institute analysis of PwC HRI Consumer Survey, September 2016, Donald Trump campaign website (www.donaldjtrump.com), Congressional Budget Office

whether Trump would try to keep any of these ACA provisions intact.

The industry has other concerns about repeal, which would mean an end to revenue and tax provisions, including tax credits to offset premium costs. Medicaid expansion also would presumably be reversed, as would care delivery reforms that accelerated the move away from traditional fee-for-service payments to ones focused on quality and outcomes.⁵

"'Repeal and replace' could be very tough on hospitals that worked in the last process in 2009 and 2010 to accept tremendous Medicare and Medicaid reductions to help health reform happen," said Kahn of the Federation of American Hospitals. "It would be important for us to see if those two things go together. If you want to repeal,

fine, but you have to repeal the whole thing. And that's going to be hard."

If attempts to fully repeal the ACA fall short, however, Trump and Republicans in Congress have other tools they can use to dismantle the law, including the use of reconciliation and the appropriations process, where Congress may be able cut spending to ACA programs. Some of those taxes have proven unpopular with health industry leaders. Under Trump, ACA foes in Congress now have an ally who is likely to push to remove those provisions.

Beyond repeal, Trump embraces a free-market approach to healthcare

Free-market principles: The businessperson's approach

Trump views healthcare as an industry that should look and feel like other

³ Donald J. Trump campaign website, "Healthcare reform to make America great again," accessed by PwC's Health Research Institute between July and November <https://www.donaldjtrump.com/positions/healthcare-reform>

⁴ E. Saltzman and C. Eibner, "Donald Trump's Health Care Reform Proposals: Anticipated Effects on Insurance Coverage, Out-of-Pocket Costs, and the Federal Deficit," The Commonwealth Fund, September 2016.

⁵ Ibid.

industries, complete with market competition and consumer choice. From that perspective, Trump likely will first use traditional open-market levers to affect prices, a move that may be well received by the public. According to the HRI survey, 62% of consumers said lowering the cost of health services should be a priority for the new president.

Trump likely will look to build on the momentum toward more transparent pricing in healthcare.⁶ Some of it is rooted in the ACA, which requires hospitals to make public their lists of charges for medical procedures. Some states, such as Ohio and Florida, already have passed price transparency laws that take the ACA's provisions steps further.

The push for more transparent pricing is reflected by a growing number of consumers across the US who are beginning to shop around for medical services. In 2015, 30% of consumers said they had contacted providers about prices, according to a survey conducted by HRI.⁷ In turn, some hospitals and health systems have started offering more retail-like experiences around pricing, with at least one system offering to refund a portion of costs if patients are unhappy with their care.⁸

Trump also said he aims to expand consumer use of tax-advantaged health savings accounts, or HSAs. HSAs would be allowed to be handed down from family member to family member. Sixty-two percent of employers already offer HSAs, while 21% are considering offering them to their employees.⁹

Despite the wide availability of HSA plans, US consumers have been slow to adopt these tax-advantaged accounts. That may

be changing. According to a 2015 report by America's Health Insurance Plans (AHIP), HSA plans participating in an AHIP survey experienced a 22% increase in enrollment between 2014 and 2015.¹⁰

The art of the deal: What works in business may be challenged by Congress

On the campaign trail, Trump mentioned his skills as a business negotiator as crucial to how he would push through his policy agenda once elected.

Trump may need to fine-tune his pitch to Congress if he wants to push through major parts of his health reform agenda, including giving Medicare the power to negotiate directly with drug makers and allowing the re-importation of prescription drugs. Both proposals have been stalled in the past. Determining Medicare's power to negotiate with drug makers has been difficult to define since Medicare deals only with private insurers, which design and sell Medicare Part D plans and already negotiate with manufacturers. And, drug safety is a looming concern with re-importation.¹¹

Even allowing insurers to sell coverage across state lines could face obstacles. Trump has positioned the idea as a way to lessen regulatory hurdles, lowering the cost of coverage for consumers and decreasing administrative burdens for insurers. But under a repeal scenario, there could be wide variations in how much insurers could charge enrollees and differences in benefits and premiums from plan to plan. Cross-state insurance sales may better meet the needs of younger and healthier individuals and lower standard benefit requirements, but it could also leave some consumers susceptible to higher out-of-pocket costs or lack of coverage for serious conditions.

Trump also has proposed giving consumers tax credits to defray the costs of their coverage. However, the costly proposal, estimated at \$41 billion, would likely require spending offsets.¹² Under repeal, providing tax credits in the individual market could undermine employer-provided health insurance and increase the number of uninsured.

Trump's plans for Medicaid include turning it into a block grants program. A 2015 block grant proposal by House Budget Committee Chairman Tom Price found that it would reduce federal funding by \$913 billion over 10 years.¹³ But the result could mean the loss of coverage for some people, a reduction in Medicaid benefit coverage, or both.¹⁴ A major change in Medicaid, especially one that is intended to reduce federal spending, is likely to be opposed by the states that expect the largest losses from the proposed block grant program.

Trump also has said he may favor expanding Medicaid. This expansion likely would mirror the efforts by Vice President-elect Mike Pence to expand the program in Indiana through a waiver that reflected more GOP-leaning principles.¹⁵ The Healthy Indiana Plan requires individuals to pay into a "personal wellness and responsibility account", which is used to cover a \$2,500 deductible. The state pays a majority share, but individuals also are on the hook for some amount. If an individual's healthcare expenses are less than \$2,500 in a year, the balance rolls over to the next year. Enrollees also can take additional reductions if they complete wellness programs and use preventative services.¹⁶

6 Donald J. Trump campaign website, "Healthcare reform to make America great again," accessed by PwC's Health Research Institute in November <https://www.donaldjtrump.com/positions/healthcare-reform>

7 PwC's Health Research Institute, HRI Consumer Insights Survey, 2016.

8 PwC's Health Research Institute, "Price check in the MRI aisle: Hospitals adopt a retail approach to win customers," October 2016, <http://pwchealth.com/cgi-local/hregister.cgi/reg/pwc-hri-price-transparency-spotlight.pdf>.

9 PwC, 2016 Health and Well-being Touchstone Survey, 2016.

10 America's Health Insurance Plans. Center for Policy and Research, 2015 Census of Health Savings Account - High Deductible Health Plan, November 2015, https://www.ahip.org/wp-content/uploads/2015/11/HSA_Report.pdf.

11 Congress passed a re-importation legislation in 2004 (PL 108-173). That measure allowed importation from Canada — but only if the secretary of Health and Human Services (HHS) said the practice was safe and would save consumers money. HHS Secretary Tommy G. Thompson said he could not guarantee the safety of imported drugs.

12 S. R. Collins, "The Health Care Reform Proposals of Hillary Clinton and Donald Trump," To the Point, The Commonwealth Fund, Sept. 23, 2016. <http://www.commonwealthfund.org/publications/blog/2016/trump-clinton-presidential-health-care-proposals>

13 House Budget Committee, FY2016 Budget Resolution, A Balanced Budget for a Stronger America, March 2015, <http://budget.house.gov/uploadedfiles/fy16budget.pdf>.

14 E. Park, "Proposed Block Grant Would Add Millions to Uninsured and Underinsured," blog, Center on Budget and Policy Priorities, March 2015, <http://www.cbpp.org/blog/proposed-medicaid-block-grant-would-add-millions-to-uninsured-and-underinsured>.

15 The Commonwealth Fund, September 2016, op cit.

16 State of Indiana, The Indiana Family and Social Services Administration, Healthy Indiana Plan: Frequently Asked Questions, <http://www.in.gov/fssa/hip/2452.htm>.

This model, with its personal responsibility flavor and focus on HSAs, might be popular with state Republicans. But not all waiver programs succeed. The Department of Human and Health Services (HHS) has denied some states' Medicaid waivers. The federal government turned back Ohio's Medicaid proposal because it required increased cost-sharing for beneficiaries, and would have led to dropped coverage for those who could not pay.¹⁷ Yet these types of denials could change under a Trump presidency.

Macroeconomic healthcare trends will challenge the new president

Complicating Trump's efforts are broader macroeconomic healthcare trends. Discussion of these forces was virtually non-existent on the campaign trail. But

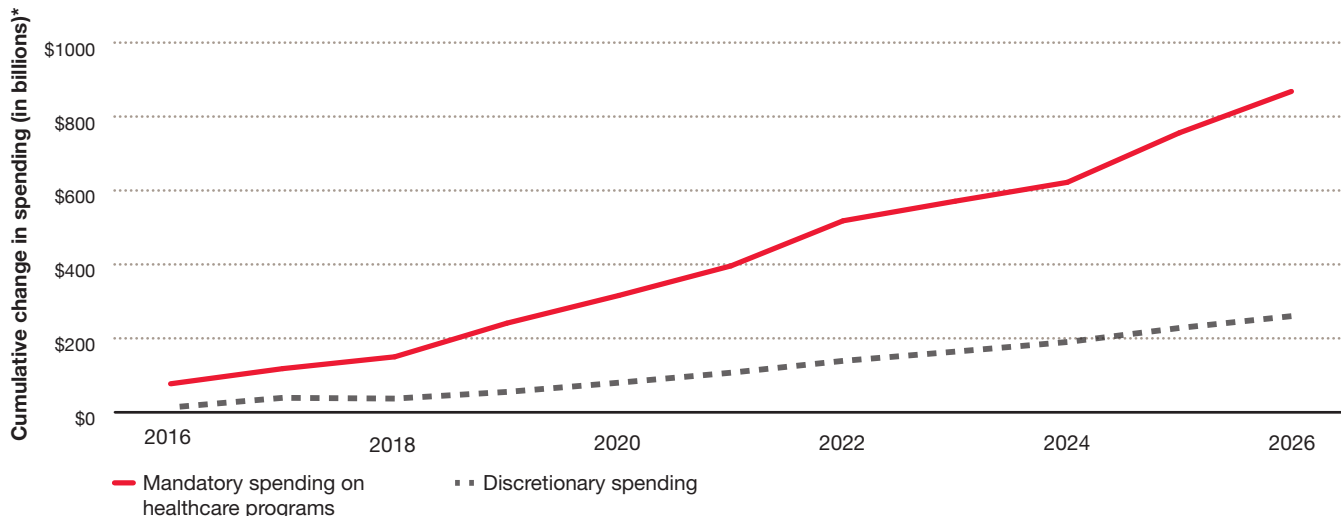
if Trump does not take steps to tackle these economic issues, he may have a hard time advancing his healthcare platform without reductions in mandatory spending on major health entitlements (see figure 2).

Mandatory spending on major health programs, such as Medicare and Medicaid, coupled with Social Security, are expected to account for 88% of the growth in federal spending over the next decade. The remaining 12%, the discretionary federal budget, which pays for such programs as defense, education and transportation, will likely be crowded out by healthcare spending. Unless Trump is willing to accept large increases in the federal deficit, he will likely be forced to look for ways to significantly reduce healthcare spending to make room for other domestic priorities.

“‘Repeal and replace’ could be very tough on hospitals that worked in the last process in 2009 and 2010 to accept tremendous Medicare and Medicaid reductions to help health reform happen. It would be important for us to see if those two things go together. If you want to repeal, fine, but you have to repeal the whole thing. And that’s going to be hard.”

—Chip Kahn, Federation of American Hospitals

Figure 2: Healthcare is crowding out discretionary spending



*excludes interest payments

Sources: US Congress, Congressional Budget Office, “The 2016 Long-Term Budget Outlook,” July 2016; PwC Health Research Institute Analysis

17 V. Dickson, “CMS Rejects Ohio’s Cost-Sharing Medicaid Waiver Request,” Modern Healthcare, Sept. 9, 2016, <http://www.modernhealthcare.com/article/20160909/NEWS/160909882>

In addition, the Medicare Hospital Insurance Trust Fund, or the Part A trust fund, will be depleted by 2028, according to actuaries at the Centers for Medicare and Medicaid Services (CMS).¹⁸ The Medicare program is very popular with Americans. More than 70% of consumer survey respondents told HRI that it is an important policy issue.¹⁹

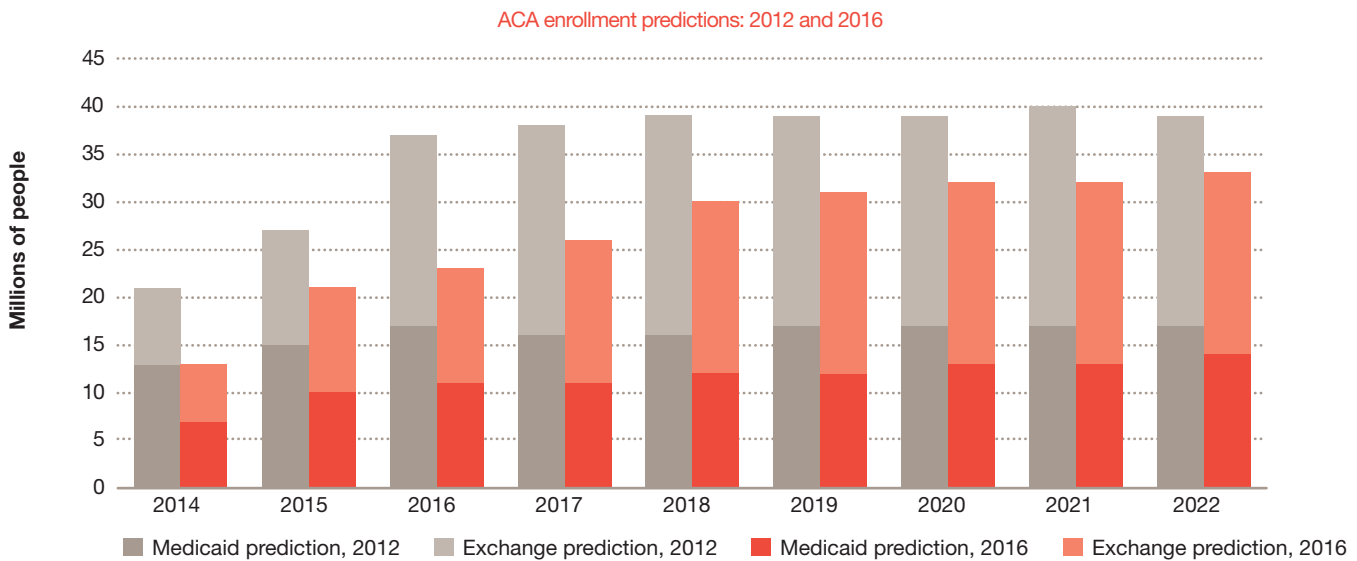
The federal government won't let either program become insolvent. Medicare is the nation's largest payer of healthcare services. It sets policies that are replicated throughout the industry. But the new administration will likely face significant pressure to tamp down healthcare spending. From an industry perspective, providers and other parts of

the healthcare sector may have to defend against proposals to slow Medicare growth by cutting their reimbursements.

The persistence of uninsured individuals is another unresolved issue for Trump. Although the number of uninsured Americans is at a historic low, 8.9%, roughly 28.4 million people still lack coverage.²⁰ The ACA exchanges have fallen short of earlier projections for enrollment (see Figure 3).²¹ Moreover, 19 states have yet to expand Medicaid to the levels set out in the ACA.²² The number of uninsured is expected to grow to about 50 million people with "repeal and replace".²³ Trump's challenge will be to lower that number through his replacement proposals.

Medicare reform also looms large on Trump's agenda. The new administration will be in charge during the first year of MACRA, the Obama administration's overhaul of physician Medicare reimbursement. With MACRA, Medicare will double-down on the shift from volume-based payments to value-based care. Trump likely will support the continued move to value-based care, which, in part, pushes hospitals, health systems and other parts of the industry to operate more like retailers. But the savings results from value-based reforms have been mixed, which means hospitals, physicians and health systems can expect more tinkering in their reimbursement programs.

Figure 3: Growth in insurance coverage in the exchanges and Medicaid has fallen short of earlier projections



Source: US Congress. Congressional Budget Office *Federal Subsidies for Health Insurance Coverage for People Under Age 65: 2016 to 2026*. March 2016.

18 The Centers for Medicare and Medicaid Services, Annual Report of the Boards of Trustees of the Federal Hospital Insurance and Federal Supplementary Medical Insurance Trust Funds, June 2016, <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/ReportsTrustFunds/downloads/tr2016.pdf>.
 19 PwC's Health Research Institute, "HRI Consumer Survey," September 2016.
 20 E. Zammiti, R. Cohen and M. Martinez, "Health Insurance Coverage: Early Release of Estimates from the National Health Interview Survey, January-June 2016," Centers for Disease Control and Prevention, November 2016 <https://www.cdc.gov/nchs/data/whis/earlyrelease/insur201611.pdf>.
 21 US Congress. Congressional Budget Office. "Federal Subsidies for Health Insurance Coverage for People under Age 65: 2016 to 2026" March 2016.
 22 The Henry J. Kaiser Family Foundation, "Current Status of State Medicaid Decisions," October 14, 2016, <http://kff.org/health-reform/slide/current-status-of-the-medicaid-expansion-decision/>, accessed November 1, 2016.
 23 E. Saltzman and C. Eibner, "Donald Trump's Health Care Reform Proposals: Anticipated Effects on Insurance Coverage, Out-of-Pocket Costs, and the Federal Deficit," The Commonwealth Fund, September 2016.

Implications for the health sectors

Trump's health proposals would touch nearly every corner of the US healthcare system. In keeping with his background, his approach likely will be more business-oriented. This could mean allowing the health sectors to operate with a freer hand and without overly burdensome regulations, or it could take the form of Trump delegating much of the health policy work to his administration.

HRI analyzed the impact of Trump's proposals on the US health sectors based on interviews with internal firm experts and external policy influencers. Proposals were taken from Trump's campaign website, which HRI accessed multiple times between July and November.

Pharmaceutical/life sciences

What they're facing under Trump's healthcare proposals	Positive implications for sector	Negative implications for sector
"Repeal and replace" of ACA, including rebates and taxes that reduce revenues; potential to lose millions of customers	All of the taxes inherent in the ACA, such as the one levied on device makers, pharmaceutical companies and others could be repealed Requirements around Medicaid drug rebates could also be repealed, as could the provision that requires drug makers to offer discounts when seniors reach the coverage gap	Number of insured people could decrease, which would reduce spending on pharmaceuticals
Renegotiation of trade deals with other countries	May provide a boost for US pharmaceutical companies, especially if new deals include longer patent exclusivity rights Trump's proposal may create a stronger market to sell pharmaceuticals overseas	Rather than renegotiate, foreign countries might pull out of trade agreements altogether, making trade more difficult and expensive for companies
Drug re-importation legislation allowing consumers access to imported, safe and dependable drugs from overseas	Likely negligible impact, especially if re-importation is limited to Canada	Possible drug safety issues related to counterfeit drugs
Medicare could gain the power to negotiate on prices with drug makers	May have a negligible effect, since Part D plans already negotiate with drug makers for discounts	Risk that "negotiation" could lead to price controls

Insurers

What they're facing under Trump's healthcare proposals	Positive implications for sector	Negative implications for sector
"Repeal and replace" of the ACA	All of the taxes and fees inherent in the ACA, such as the one levied on insurers, would go away	Loss of the enrollees in health insurance exchanges and in enrollees in Medicaid managed plans under Medicaid expansion
The sale of health insurance plans across state lines, as long as the plans comply with state laws	Less regulatory pressure on insurers, which allows for insurers to see lower priced plans	Health plans may find it difficult to establish provider networks from state to state Competition could increase and drive down margins as out-of-state insurers now compete for in-state enrollees
Required transparency of provider service prices	Consumers gain awareness around costs and become savvier shoppers, ultimately lowering the costs for covered services	Could backfire on the insurance industry if pressure for increased transparency is extended to payers

Providers

What they're facing under Trump's healthcare proposals	Positive implications for sector	Negative implications for sector
“Repeal and replace” will end both the expansions in coverage and at the same eliminate many of the reductions in reimbursement, which were enacted to pay for the coverage expansion	Industry taxes and lower payment rates would be repealed	Loss of coverage for 20 million people would reduce revenues and increase uncompensated care Skinnier health insurance plans would reduce demand for services and increase bad debt
Required price transparency from all healthcare providers, especially doctors and healthcare organizations like clinics and hospitals	Providers that have made investments in transparent pricing will have an advantage in attracting consumers that are shopping on price, quality Federal requirements may replace piecemeal transparency approaches at the state level	Disruption in current pricing policies could cause a loss in revenues for many providers

Employers

What they're facing under Trump's healthcare proposals	Positive implications for sector	Negative implications for sector
“Repeal and replace” of the ACA	Negligible except for employers with low wage employees that were mandated to provide coverage under the ACA	Businesses that dropped coverage under the ACA will be under pressure to cover more employees Large one-time administrative costs of whole new system

New entrants and innovators

What they're facing under Trump's healthcare proposals	Positive implications for sector	Negative implications for sector
Healthcare that more closely mimics traditional retail experiences	Trump's focus on retail-oriented healthcare could provide a natural bridge for companies that are developing consumer-friendly applications If Trump delivers on his pledge to reduce federal regulations, new entrants may find easier paths to break into the highly regulated areas, especially around medical devices and new therapeutics	Fewer regulations may adversely impact entrenched, larger companies, since many regulations tend to add barriers, this will tend to lower the barrier to entry and increase industry competition

Conclusion

Trump's candidacy raised more questions about his healthcare proposals than it provided answers. This uncertainty—if not addressed early in his tenure—could frustrate industry players, new and established. They will likely be looking for clear direction on how they should proceed. This uncertainty could stall efforts to shift to value-based payment models.

Trump's corporate business tools will likely be challenged as he attempts to reshape the US health industry, which does not operate like a typical business

sector. “Repeal and replace” of the ACA may be difficult. Experts estimate that it could substantially increase the number of uninsured, reduce revenues to the healthcare sector and potentially drive up the federal deficit.

These economic uncertainties place significant cost pressures on industry stakeholders. The replacement proposals outlined address a patchwork of issues, but not the loss of coverage that would result from a repeal of the law. Overall, Trump's proposals present a new set of challenges and opportunities for an industry that already faces uncertainties over a burgeoning New Health Economy.

Trump is a star in a larger constellation which can impact his agenda

The White House is just one part of a much larger machine. To really put his stamp on health policy, Trump must work with a patchwork of federal lawmakers, regulatory agencies, trade and advocacy groups, and the Supreme Court. These institutions will either accelerate or decelerate Trump's agenda. And consumers—seeking lower healthcare costs—increasingly will also have a voice. Their healthcare priorities will influence policy decisions under the president-elect.

■ Agenda decelerator
 ■ Agenda accelerator or decelerator
 ■ Agenda accelerator

Supreme Court



The Supreme Court has had significant impacts on the Affordable Care Act. In 2012 and again in 2015, the Court played a surprising role in upholding the ACA as law of the land. Challenges to the law's mandates, Medicaid expansion and more have taken their toll on the law, but the foundation of it remains intact.

As president, Trump has the opportunity to name at least one justice to the Court—and likely more. The new administration could use the ACA as a litmus test as they choose justices who may serve on the court.

Trump's nominees will likely change the makeup of the court and accelerate his agenda

Agenda accelerator

Congress



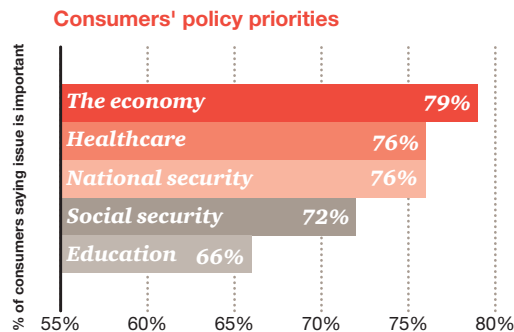
Trump's strategy for dealing with Congress could lay the groundwork for the balance of his presidency. His relationship even with members of his own party in Congress was strained during the campaign.

With slimmer margins between Democrats and Republicans in the House and Senate, the difference between passing or abandoning legislation is thin. Trump will need to work closely with lawmakers if his healthcare platform stands a chance of surviving.

Congress will either... accelerate or decelerate Trump's agenda depending on the issue

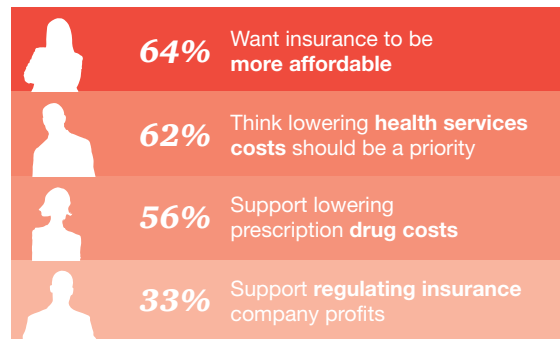
Agenda decelerator

76% of consumers surveyed by HRI believe the president should make healthcare a policy priority. Specifically, they noted the importance of lowering healthcare costs.



Source: PwC Health Research Institute Consumer Survey, September 2016

Consumers' healthcare priorities



Agencies



In his political appointments, Trump will take a business approach to regulation, preferring individuals with more of a corporate background versus those that have come up through government or think tanks. But many federal civil servants may not favor Trump's agenda, which could complicate his ability to fully use regulatory power.

However it may take years to replace thousands of existing employees across the agencies, and many federal employees will generally not favor Trump's agenda.

Trump will appoint people who will accelerate his agenda, but may not be able to fully use regulatory power without supportive agencies

Agenda decelerator

Associations/Advocacy



Trump and his administration will feel pressure from scores of interest groups pushing narrow but important issues.

During the campaign, Trump staffers met with several of the large healthcare associations to better define the contours of their health policy agenda. But it's difficult to say if that process helped to assuage fears that Trump may implement policies that adversely impact their members.

Unfamiliar with Trump, associations will either accelerate or decelerate his policies depending on the issue

Agenda accelerator or decelerator

About this research

This report examines President-elect Donald Trump's proposed healthcare agenda. PwC's Health Research Institute (HRI) examined the political and economic areas that may impact his proposals, including expanding the provisions in the Affordable Care Act (ACA) as well as broader healthcare proposals. HRI interviewed industry and association leaders from the provider, insurance and pharmaceutical/life sciences sectors, as well as policy experts. HRI analyzed budgetary data and campaign proposals to identify key business considerations for the next four years.

About the PwC Health Research Institute

PwC's Health Research Institute (HRI) provides new intelligence, perspectives and analysis on trends affecting all health related industries. HRI helps executive decision makers navigate change through primary research and collaborative exchange. Our views are shaped by a network of professionals with executive and day-to-day experience in the health industry. HRI research is independent and not sponsored by businesses, government or other institutions.

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