Special Needs Alliance:

Public Policy News You Can Use

December 8, 2025

NAACP Sues South Carolina Over Denial of Disabled Voter Assistance

On December 5th, the National Association for the Advancement of Colored People (NAACP) South Carolina Conference sued South Carolina arguing restrictions on assisting voters with disabilities violate Section 208 of the Voting Rights Act (VRA). The suit challenges three provisions that the NAACP argues are preempted by the VRA:

1. The state's narrow definition of voters eligible for assistance, which excludes individuals with non-physical disabilities,
2. Limits restricting assistors to certain family members or "authorized representatives", and
3. A rule which makes it a felony for any person to assist more than five voters in requesting or returning absentee ballots, also called the "Five-Voter Limit".

The "Five-Voter Limit" significantly hinders the ability of individuals living in congregate settings, like nursing homes, to receive assistance from trusted staff members when voting. The American Civil Liberties Union (ACLU), which is representing the NAACP, stated that the restrictions "…target some of our state's most vulnerable voters and make it harder – sometimes even impossible – to cast a ballot." The ACLU filed a complaint for injunctive and declaratory relief in the United States District Court for the District of South Carolina Columbia Division. Defendants include South Carolina Attorney General Alan Wilson, State Election Commission Interim Executive Director Jenny Wooten, State Election Commission Chairman Dennis W. Shedd, and four members of the State Election Commission in their official capacities.

House Passes Bills Altering Social Security Administration

Last week, the House of Representatives unanimously passed three bills reforming the Social Security Administration (SSA). The Claiming Age Clarity Act (H.R.5284) would change the language used to refer to the ages at which workers can claim Social Security retirement

benefits. Rather than using the terms early, full/normal, and delayed retirement age, the bill requires the SSA to refer to the minimum, standard, and maximum monthly benefit ages.

The other two bills aim to improve the services for people who experienced crime related to their social security identity. The Social Security Child Protection Act (H.R.5348) would re-issue children under the age of 14 their social security card if it was stolen or damaged in the mail; whereas the Improving Social Security's Service to Victims of Identity Theft Act (H.R.5345) would create a single point of contact for any in dividual whose Social Security number has been misused. It is unclear if the Senate will act on all three bills or delay a vote until other matters such as appropriations bills and the Affordable Care Act Advanced Premium Tax Credits are addressed.

CMS Repeals Biden-era Nursing Home Minimum Staffing Rule

The Centers for Medicare and Medicaid Services (CMS) recently issued an interim final rule that repeals a Biden-era rule seeking to mandate minimum staffing requirements for nursing homes. The rule was originally finalized in spring of 2024 and was subsequently struck down by a federal judge in April of this year. Health and Human Services (HHS) Secretary Kennedy argued the rule would disproportionately burden rural and tribal communities, specifically noting that a "one-size-fits-all" approach to improving nursing home care ultimately fails the patient.

The previous staffing rule would have required long-term care facilities to maintain a registered nurse onsite 24 hours a day, seven days a week, as well as the minimum nurse staffing standards of 0.55 registered nurse (RN) hours, 2.45 nurse aide hours, and 3.48 total nursing hours per resident day. In its place, CMS is reinstating the statutory minimum requirement that facilities have an RN on duty for at least eight consecutive hours each day, seven days a week, and that each facility designates a full-time registered nurse to serve as director of nursing unless a waiver applies. Notably, CMS is issuing these changes through an interim final rule with a 60-day comment period, asserting there is good cause to bypass the standard notice-and-comment process given the specific circumstances.

CDC Vaccine Advisory Committee Narrowly Votes to End Universal Hepatitis B Birth-Dose Recommendation

In a contentious two-day meeting marked by confusion and procedural disputes, the Center for Disease Control and Prevention (CDC)'s Advisory Committee on Immunization Practices (ACIP) voted 8–3 on Friday to remove the universal recommendation that all newborns receive the hepatitis B vaccine at birth. The vote followed an unusually chaotic Thursday session in which members protested last-minute changes to the vote language, prompting a postponement.

Under the new recommendation:

- If a mother tests negative for hepatitis B, parents—guided by their clinician—may make an individualized decision on whether to administer the birth dose.
- Infants who do not receive the birth dose should begin the series no earlier than 2 months old.
- Infants born to mothers who are hepatitis B–positive or have unknown status must still receive the birth dose immediately.

ACIP also voted 6–4 (one abstention) to recommend that parents of older children consider hepatitis B antibody testing before additional vaccination, with testing expected to be covered by insurance.

The meeting reflected broader tensions over the committee's direction, with several medical organizations criticizing the process and warning that the shift could undermine longstanding efforts to eliminate hepatitis B in the U.S. HHS Deputy Secretary and CDC Acting Director Jim O'Neill is expected to approve the new policy.

MACPAC and MedPAC Release Joint Data Book on Dually Eligible Beneficiaries

The Medicare Payment Advisory Commission (MedPAC) and The Medicaid and CHIP Payment and Access Commission (MACPAC) released a data book detailing the demographics, spending, and health care usage of individuals eligible for both Medicare and Medicaid (dually eligible). Key takeaways from the data book are outlined below:

- There were a total of 13.6 million dually eligible beneficiaries in Calendar Year (CY) 2022, up from 12.4 million in 2018.
- 74 percent of duals were categorized as full-benefit in CY 2022.
- Combined Medicare and Medicaid spending on individuals who were dually eligible was $548.8 billion in CY 2022.
- Individuals who were dually eligible in CY 2022 were evenly split between those who originally qualified for Medicare benefits based on age (49 percent) and those who qualified for Medicare benefits based on disability (49 percent).
- Most individuals who were dually eligible in CY 2022 qualified for Medicaid benefits through poverty-related eligibility pathways (43 percent) or through receipt of SSI benefits (34 percent).
- In CY 2022, the majority (57 percent) of fee for service (FFS) full-benefit dually eligible beneficiaries used no Medicaid long-term services & support (LTSS), compared to 67 percent in Medicaid managed care.

- Users of Medicaid-covered institutional LTSS had the highest Medicare and Medicaid spending per user in CY 2022 ($47,682 and $66,074, respectively).
- Medicare spending per dually eligible beneficiary grew between 2018 and 2022 (22.3 percent cumulative growth and 5.2 percent average annual growth).
- Medicaid spending per dually eligible beneficiary (which includes both federal and state spending) increased at a slower rate between 2018 and 2022 (18.2 percent cumulative growth and 4.3 percent average annual growth).

House Passes Hospital-at-Home Waiver Extension; Bill Now Heads to Senate

On Monday, December 1st, the U.S. House of Representatives voted unanimously across party lines to pass a bipartisan bill extending the Acute Hospital Care at Home program, allowing patients to receive acute-level care in their homes rather than in a hospital. The bill, named the Hospital Inpatient Services Modernization Act (H.R. 4313), would extend the Acute Hospital Care at Home waiver through Sept. 30, 2030. Bill sponsor Vern Buchanan (R-FL) said in a statement that the bill, "… will ensure that hundreds of hospitals, including dozens in Florida, can keep caring for patients in their own homes. With hospitals under strain and chronic disease on the rise, today's unanimous vote to extend this proven model reflects the kind of commonsense, bipartisan action Americans deserve." The legislation now moves to the Senate, where it is expected to pass with little to no opposition. The current Hospital at Home waiver expires at the end of January 2026.

What's on Tap

As the end of the year approaches, Congress has undertaken a large slate of work. Among the legislative priorities, health care remains a dominant topic. Despite the ambitious workload, tensions between Republicans and Democrats remain high over the expiring Affordable Care Act (ACA) Advanced Premium Tax Credits (APTCs). In a last-minute attempt at compromise, House rank-and-file Republicans released a handful of bipartisan proposals; however, Republican leadership remains steadfast in their opposition to any extension. Additionally, Senate Minority Leader Chuck Schumer (D-NY) pitched a three-year extension of the ACA APTCs, which he plans to place on the floor for vote on Thursday. The plan is unlikely to succeed as Senate Republicans consider their own alternative – neither of which is expected to receive the 60 votes it would need to proceed. On top of the continued negotiations, House Minority Leader Hakeem Jeffries (D-NY-08) states that his relationship with Speaker Mike Johnson (R-LA-04) has devolved to no longer be constructive.

Last week, progress on the next package of spending bills was stalled by Senate Republican fiscal hawks who want a "clean" appropriations bill. The five spending bills currently in negotiations include:

1) Labor, Health and Human Services, and Education,

2) Defense,

3) Transportation and Housing and Urban Development,

4) Commerce, Justice, and Science, and

5) Interior and Environment.

Senate Majority Leader John Thune (R-SD-01) shared that the party is working to address members' concerns to help move the minibus forward. Meanwhile, Congress must also pass the NDAA before the end of the year, as it authorizes pay for military troops and sets military and geo-strategic policy.

Simultaneously, Department of Health and Human Services (HHS) staff have picked up work following the government shutdown. Last week, HHS unveiled a new artificial intelligence (AI) strategy. The initiative will make AI available to the federal workforce by integrating the technology in internal operations, research, and public health. Similarly, the Centers for Medicare and Medicaid Services (CMS) Innovation Center announced a new, tech-enabled model called the Advancing Chronic Care with Effective, Scalable Solutions (ACCESS) Model. Additionally, CMS repealed the Biden Administration-era Nursing Home Minimum Staffing Rule, a move that was expected by the new administration. Furthermore, the Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices (ACIP) voted to remove the recommendation that all newborns receive the hepatitis B vaccination at birth. Instead, ACIP recommends a individual-based decision-making whereby young families work with their providers to determine the necessity of a hepatitis B vaccination. President Trump's stated that ACIP's vote moves the country forward by aligning our vaccination policies with that of peer nations.

Upcoming Events

Senate

- In Session: December 8-12
- Tuesday, December 9th, 2:00pm | Senate HELP Subcommittee on Education & The American Family hearing on Building Pathways: Advancing Workforce Development in the 21st Century | 430 Dirksen Senate Office Building
- Wednesday, December 10th, 10:00am | Senate HELP Committee hearing on The Future of Retirement | 430 Dirksen Senate Office Building
- Wednesday, December 10th, 2:00pm | Senate Homeland Security & Governmental Affairs Permanent Subcommittee on Investigations hearing on Defining our Healthcare Problem, and Principles We Should Follow to Solve It | 342 Dirksen Senate Office Building

- Wednesday, December 10th, 3:30pm | Senate Special Committee on Aging hearing on Aging with Purpose: The Positive Impact of Seniors in Today's Economy | 215 Hart Senate Office Building
- Thursday, December 11th, 10:00am | Senate HELP Committee hearing on Examining the Future of the U.S. Organ Procurement and Transplantation Network | 430 Dirksen Senate Office Building

House

- In Session: December 9-12
- Wednesday, December 10th, 10:00am | House Oversight Committee hearing on Lowering the Cost of Healthcare: Technology's Role in Driving Affordability | HVC-210 U.S. Capital Visitor Center