Special Needs Alliance:

Public Policy News You Can Use

February 3, 2026

Forbes Spotlights Ticket to Work Program for SSDI Beneficiaries

Yesterday, Forbes published an article on the Ticket to Work Program, noting that the program allows individuals to return to work while temporarily protecting their Social Security Disability Insurance (SSDI) and health care coverage benefits. In the article, Diane Winiarski noted that the voluntary program is highly individualized to promote choice, flexibility, and support. Winiarski highlights the mays meaningful work promotes mental and physical health and encourages SSDI beneficiaries to work through the Ticket to Work Program.

Healthsperien Publishes Summary on January MedPAC Meeting

Healthsperien released a summary highlighting key discussions and takeaways from MedPAC's January meeting. Healthsperien covered the following sessions:

- Assessing payment adequacy and updating payments: Physician and other health professional services
- Assessing payment adequacy and updating payments: Hospital inpatient and outpatient services
- Assessing payment adequacy and updating payments: Skilled nursing facility services; home health agency services; inpatient rehabilitation facility services; outpatient dialysis services; and hospice services
- Medicare Part D: Status report
- The Medicare Advantage program: Status report
- Mandated report: Dual-eligible special-needs plans

The full report can be found here.

Tech Companies Pledge to Help with Medicaid Community Engagement Requirements

On Thursday January 29th, the Centers for Medicare and Medicaid Services (CMS) announced that 10 Medicaid technology companies voluntarily pledged more than $600 million in free and discounted technology to help states implement Medicaid community engagement requirements that were introduced under the One Big Beautiful Bill Act (OBBBA). The commitments intend to support state readiness, reduce administrative burden, generate savings, and improve the beneficiary experience while modernizing Medicaid eligibility and enrollment systems. The new vendor commitments are expected to help states stretch federal implementation funding and accelerate system upgrades. Working with the General Services Administration (GSA), CMS also stated that they are simplifying access to the GSA Schedule for qualified vendors, helping states more rapidly and transparently procure needed technology solutions. CMS encouraged states to evaluate all available solutions as they plan for implementation. States must implement community engagement requirements by January 1, 2027, with an interim final rule due from CMS this June.

HHS Issues Bulletin on How Pharmaceutical Manufacturers Can Offer Lower-Cost Prescription Drugs

The Department of Health and Human Services (HHS) released a new bulletin clarifying how pharmaceutical companies can offer prescription drugs directly to patients, including Medicare and Medicaid beneficiaries, for a lower cost. Issued by the HHS Office of Inspector General (OIG), the bulletin explains that manufacturers may sell drugs directly to patients who choose to pay cash if the arrangement does not bill federal health care programs, is not used to market other federally reimbursable products, and is not tied to future purchases or referrals. The bulletin aims to expand access to affordable medications while protecting patients and federal programs from fraud and abuse. HHS emphasized that the bulletin does not change the anti-kickback statute itself and does not address financial relationships involving providers, pharmacies, or pharmacy benefit managers. In addition, HHS OIG issued a request for information seeking public input on the potential creation of a formal regulatory safe harbor for direct-to-consumer drug sales. The announcement closely aligns with the Trump administration's broader efforts to lower drug prices, increase transparency, and promote TrumpRx. HHS Secretary Robert F. Kennedy, Jr., noted "Americans pay too much for prescription drugs because middlemen profit from a system patients can't see."

HELP Committee Chair Cassidy Launches Task Force to Eliminate Fraud in Federal Spending

Last week, Senate Health, Education, Labor and Pensions (HELP) Committee Republicans, led by Chairman Bill Cassidy (R-LA), launched a new task force targeting federal funding fraud, waste, and abuse, arguing that misuse of taxpayer dollars is harming families and undermining trust in government programs. The effort follows GOP concerns over alleged large-scale fraud and abuse tied to Minnesota's childcare funding and is framed as part of a broader push to increase oversight of federal health, education, and labor spending. Lawmakers emphasized that fraud diverts resources away from intended beneficiaries, including patients, students, workers, and retirees. The task force will operate through the HELP subcommittees using a new public reporting portal to gather tips on suspected fraud under the direction of designated Republican co-chairs.

What's on Tap

On Friday, the Senate passed a bipartisan funding agreement ahead of the January 30th deadline. The Senate appropriations package provides full fiscal year (FY) 2026 appropriations for the Financial Services and General Government and the Departments of Defense; Labor, Health and Human Services, & Education; Transportation & Housing and Urban Development; and State & National Security. After partisan negotiations, the Department of Homeland Security (DHS) appropriations bill was funded through mid-February. After a 71-29 vote in the Senate and the initiation of a partial government shutdown, the House must address the Senate-negotiated package.

The Labor, Health and Human Services (HHS), and Education (LHHS) appropriations bill (bill summary, bill report) includes several key health policy provisions including a two-year Medicare telehealth flexibility extenders, pharmacy benefit manager (PBM) reforms, and National Institutes of Health (NIH) funding increases. The provisions reflect the continued bicameral bipartisan momentum around health care access, affordability, and research. DHS remains the sole unresolved funding component and has become a proxy for broader disputes over immigration enforcement policy, especially Immigration and Customs Enforcement (ICE).

The House returned to the Capital on Monday, two days after the funding deadline, and are now tasked with addressing the Senate-passed deal. The House Rules Committee is scheduled to meet this afternoon to consider the legislation, but the path forward remains uncertain. While the five of the appropriations bills passed the House last month with broad bipartisan support, resistance has intensified with the complication of a two-week DHS funding stopgap. Conservative members continue to oppose separating DHS from the broader package or are pressing to attach unrelated measures, while progressive Democrats have raised concerns about continuing DHS and U.S. Immigration and Customs Enforcement (ICE) funding at current levels. Speaker Mike Johnson has expressed confidence that the House can clear the package quickly, potentially limiting the practical effects of the partial shutdown. However, leadership may need to rely on procedural maneuvering or cross-party support to overcome internal opposition which will complicate vote-counting in a narrowly divided chamber.

Even if the House acts promptly, the short-term DHS extension sets up another high-stakes deadline in mid-February. The two-week stopgap is intended to force negotiations on oversight of ICE. With limited time and growing intraparty tensions on both sides, DHS appropriations negotiations are expected to remain volatile, prolonging political uncertainty even as most federal agencies secure longer-term funding.

Upcoming Events

Senate

- In Session: February 2nd – 6th

House

- In Session: February 2nd – 5th
- Tuesday, February 3, 10:00 am | Senate Health, Education, Labor, and Pensions Meeting hearing on Modernizing the National Institutes of Health: Faster Discoveries, More Cures | 430 Dirksen Senate Office Building