

# Conservative policy shop Paragon Health previews post-OBBA health reform priorities

By Noah Tong – Fierce Health Care, August 7, 2025



Conservative health policy groups' attention is turning toward the next healthcare priorities President Donald Trump should target in future rulemaking and legislation. (Getty Images/Douglas Rissing)

Fresh off a legislative victory this summer, the Paragon Health Institute is flexing its health policy chops and eyeing the next areas of reform the think tank wishes to see.

During a webinar Thursday, President Brian Blase, Ph.D., was among the speakers defending President Donald Trump's bill, highlighting the importance of eliminating waste, fraud and abuse, reducing Medicaid spend and implementing work requirements. These changes

were opposed by most industry stakeholders and a cohort of advocacy groups.

“It is the most consequential healthcare legislation since the Affordable Care Act, and it’s the most conservative health policy reform in at least a generation,” he told listeners of the “one big, beautiful bill.”

Paragon is a GOP and Trump-aligned health policy organization. Newer on the scene, the group has found success informing lawmakers on the issues it sees with the healthcare system and effectuating changes in law through the recently passed budget bill.

Now that the legislation is passed, states are tasked with figuring out how to administratively enforce work requirements nationwide.

Paragon is going to help with these efforts, spearheading a state health reform initiative later this year to further adoption and reduce improper payments, said Blase.

The bill mandates the Centers for Medicare & Medicaid Services (CMS) issue an interim final rule by June 2026 to tackle work requirement implementation, explained Ryan Long, director of congressional relations and senior research fellow at Paragon. Long also served as senior policy advisor for former Speaker of the House Kevin McCarthy.

States will also receive \$200 million in grants to carry out statutory requirements, he said, adding that technological advancements should make the transition to work requirements easier than during previous administrations.

“I think CMS should provide a model to states that states can use if they want,” said Long.

Next on the agenda, and perhaps a preview of upcoming priorities from lawmakers, is site-neutral payment and cost-sharing reduction subsidy reform. These two changes would reduce premiums and “inject greater competition” into healthcare, Long said. Both items were discussed for inclusion in the summer tax bill but were ultimately dropped.

States also receive a 90% federal match rate, or FMAP, for implementing Medicaid expansion. Blase said the federal government should lower its level of funding below 90% for expansion enrollees. He also is urging lawmakers to modify the 340B program, likening it to a subsidy program lacking rationality.

Further, Trump’s bill did not address Medicare Advantage (MA), but there is growing bipartisan dissatisfaction with the program that could coalesce into real change.

A [report](#) from Paragon last year suggested Congress move to cap benchmarks in regions with lower levels of MA uptake, end quality bonus payments and change risk adjustment calculations.

There are also actions the White House could take without Congress, said Blase. They include promoting the use of short-term and association health plans as well as individual coverage health reimbursement arrangements.