## TIMELINE OF HR-1 MAJOR MEDICAID PROVISIONS



Current as of July 21, 2025

2025

Q3

July 1-Sept 30



Bars Medicaid participation by abortion providers.



## Provider tax limitations

Generally bans new provider taxes; implements phased-down cap on provider taxes in Medi-Cal expansion states. <u>CA Prop 35</u> (Managed Care Organization tax) is noncompliant with this provision.



#### Caps new SDPs at 100% of Medicare levels

Reduces hospital funding through a ~17% reduction in Medicaid payments by reducing state-directed payments (SDPs).

2026

Q4

Oct 1-Dec 31



Reduction in Federal Medical Assistance Percentage (FMAP)

States will have to pay a larger share of costs for emergency medical care provided to noncitizens (FMAP drop from 90% to 50%)



### Ends federal funding to some noncitizens

Ends the availability of federal Medicaid and CHIP funding for refugees, asylees, victims of human trafficking, and certain other noncitizens

2027

Q1

Jan 1-Mar 30



#### Start Work Requirements

Ages 19-64 must work 80 hours a month to qualify; exception for people w/disability



#### Start 6 month Medi-Cal eligibility redetermination

Review eligibility every 6 months instead of annually



## Retroactive Coverage

Shorten Medicaid retroactive coverage and provide CHIP retroactive coverage





#### Ramp-down of provider tax cap

6% tax cap reduced by 0.5% until 3.5% is hit

2028

Q1

Jan 1-Mar 30



### Gradual reduction of existing SDPs

Deadline for SDPs above Medicare rates reduce payments by 10% per year until they reach 100% of Medicare or less

Q4



# Impose copay on most services for expansion adults

Adults ages 19-64 with incomes above 100% of the federal poverty level pay copayments for most covered services

2029

Q4

Oct 1-Dec 31



## CMS prohibited from waiving federal penalties

Under HR-1, the federal definition of "improper payments" includes payments without sufficient information available to confirm eligibility for Medicaid.

#### **Effects on California**

States and federal government share Medicaid costs. If improper payments are made by CA, then federal funds may be taken away as a penalty, whether or not a corrective action plan has been generated. This increases financial risk to CA's general fund.