# 2025 Reconciliation Bill: Changes to Healthcare

Congress recently proposed a bill that includes several changes to Medicaid and Affordable Care Act Marketplace health insurance plans, which many people in the CF community rely on for coverage.

The Congressional Budget Office, a nonpartisan agency, has calculated that 10.9 million people may become uninsured over the next 10 years due to these changes.

Some experts say that eligible people will lose coverage because of incorrect or missing paperwork. This bill has not yet been made into law and still needs to be passed by the Senate and signed by the President. Many of the proposed changes in the bill would start as soon as January 2026.

# **Changes to Medicaid**

36% of people living with CF and 52% of children younger than 10 living with CF are enrolled in Medicaid.

### More Paperwork and Administrative Burden

The proposed bill requires some, but not all, adults to meet work requirements to receive Medicaid coverage. This requirement is for adults (ages 18-64) who do not have a disability and who do not have children younger than 14 years old. These adults must show proof that they worked, volunteered, or attended school for 80 hours in a month. States must verify this proof at least twice a year. This can be a barrier to care for people living with CF whose working hours are unstable due to their health. Exemptions for people living with CF may also require complex paperwork.

The work requirement also applies to both adults with and without children who are enrolled under an expanded Medicaid plan, which 40 states and Washington DC have adopted for people whose incomes are 100-138% of the federal poverty level. For parents of children with CF who may need to take time off work to care for their child, this may also interfere with their access to care.

One of the changes proposed to Medicaid increases eligibility checks for people enrolled in Medicaid, including requiring that proof of citizenship must be present to receive Medicaid coverage. This provision may disrupt infants' access to a timely CF diagnosis due to delays in receiving Social Security documents or birth certificates, which may take several weeks to arrive.

#### **Higher Copays for Medicaid Expansion Recipients**

For those who are enrolled in a Medicaid expansion plan in one of the 40 states that expanded Medicaid, the bill would require states to enforce copays for some, but not all, services. Primary care, mental health, and substance use disorder treatment would not be subject to copays. These copays are capped at \$35. These changes would begin on October 1, 2028.

The bill reduces the amount of federal funds for Medicaid expansion, which could stop new Medicaid expansion or cause states to end their expansion programs. Some states have "trigger laws" that require states to end Medicaid expansion programs if this match rate is reduced, which could lead to a loss of coverage for people living with CF.

#### **Uncertainty for Optional Medicaid Waiver Programs**

States that have optional waiver programs may be affected by these changes. This is not in the reconciliation bill, but may be a downstream effect. The reconciliation bill limits the amount of provider taxes, a large source of funding for state Medicaid programs, that states can use to fund Medicaid, which may lead to cuts to state programs. If federal funding for Medicaid decreases and states cannot make up the difference with their own funds, these optional waiver programs may be cut.

## **Decreased Funding for Hospitals**

Decreases to Medicaid funding may impact hospitals, as about 20% of all spending on hospital care was covered by Medicaid. For hospitals that serve large amounts of Medicaid recipients, decreases in Medicaid reimbursement can create financial strain. Hospitals may respond to this strain by decreasing services or, in extreme cases, closing entirely. This may impact access to CF care centers that rely on Medicaid funding, specifically in rural areas.