

CoffeeCAHC policy round-up:

May 23, 2025

119th US Congress, 1st Session
132nd Maine Legislature, 1st Regular Session



Good afternoon, Coffee CAHC readers!

Things seem to be moving at an extremely fast clip these days! This Memorial Day weekend, we hope you take a moment to slow down and remember. In recognition, and for those who need a little inspiration this weekend, we're listening to Bill Withers, [Lean On Me](#).

Federal

US House Passes Bill Which Will Significantly Impact Health Coverage Under Medicaid and the Affordable Care Act.

Among other impacts, the [1,100 page budget reconciliation bill](#) would overhaul Medicaid and the Affordable Care Act through regulatory changes, resulting in the elimination of health coverage for millions of Americans.

The nonpartisan Congressional Budget Office's (CBO's) [preliminary estimates](#) conclude the package would reduce federal Medicaid spending by \$625 billion. A [KFF analysis](#), [State-Level Context for Federal Medicaid Cuts of \\$625 Billion and Enrollment Declines of 10.3 Million](#), shows the reduction in federal spending would primarily result from:

- 1) requiring states to implement [work requirements](#) for adults with coverage under Medicaid expansion, even though most members are already working,
- 2) increasing barriers to enrolling in and renewing [Medicaid coverage](#), and
- 3) limiting the ability of states to raise Medicaid revenues through [provider taxes](#).

If the bill becomes law, 10.3 million people would lose their Medicaid coverage. The report anticipates states will need to pay providers less, cover fewer people, offer fewer benefits, and/or raise taxes or cut other programs in order to maintain health coverage at current levels.

The American Hospital Association, in its [statement regarding the legislation](#), stated:

Our hospitals and health systems have significant concerns regarding the harmful Medicaid and Health Insurance Marketplace provisions currently included in the bill. The sheer magnitude of the level of reductions to the Medicaid program alone will impact all patients, not just Medicaid beneficiaries, in every community across the nation.

Anthony Wright, executive director of Families USA, a national, nonpartisan health care consumer advocacy organization, [shared concerns](#) about how the proposed legislation will create real harm for people and health care providers who rely on Medicaid, Medicare, and the Affordable Care Act. He states: *"This isn't a political game – this is literally life and death for low-income working families, people with disabilities, pregnant women and their babies,*

children, veterans, and people who rely on rural hospitals across the country – all of whom will pay the price of this disastrous bill for generations...”

In a separate [analysis of people enrolled in Medicaid](#) who will be impacted, KFF points out:

- Two thirds of people aged 19 through 64 with Medicaid coverage are working.
- Many work in industries that don't offer employer-sponsored coverage, such as the agriculture and service industries, fishing, or forestry occupations.
- Most of those who are not working are not able to, due to a disability or illness, attendance in school, or serving as a caregiver.

In addition, in its [deeper dive into the impacts of work requirements](#), KFF concluded *that women would be most heavily impacted by the imposition of work requirements and that many Medicaid enrollees would be at risk of losing coverage because of the administrative burden* and red tape related to reporting requirements. Further, [according to the Center for Budget and Policy Priorities](#) (CBPP), the impact on veterans could be significant. Some 1.6 million veterans are enrolled in Medicaid. Medicaid provides coverage to veterans who would otherwise be uninsured, and, in some cases, supplements other insurance. CBPP also notes that roughly 4 million family members of veterans are also enrolled in Medicaid or in the Children's Health Insurance Program.

Impacts on people enrolled in or seeking health coverage through the Affordable Care Act Marketplace are discussed in the state section.

State

Maine DHHS Responds to Proposed Federal Legislation

Maine's Department of Health and Human Services (DHHS) issued [a statement](#) prior to the US House vote. The statement outlines how the bill threatens access to health coverage in Maine by jeopardizing the state's ability to:

- Sustain critical health services for Maine people, especially in rural areas where MaineCare enrollment is highest.
- Provide critical reproductive health care to all Mainers.
- Support rural hospitals and providers that rely on Medicaid reimbursement.

DHHS notes the changes to the Affordable Care Act Marketplace coverage include:

- shortening the amount of time people can enroll in coverage from 75 to 45 days
- eliminating Special Enrollment Periods for people living close to or below the poverty level
- eliminating annual automatic renewals for coverage, potentially affecting 30,000 Mainers
- changing income verification and provisional eligibility rules in a way that will create unnecessary confusion and complexity when signing up for coverage, possibly leading to people becoming uninsured and delaying care.

The bill now moves to the Senate.

Know Someone Who Needs Health Coverage?

People can apply for MaineCare anytime at [MyMaineConnection](#).

Those who don't qualify for MaineCare may be able to get Marketplace coverage after open enrollment if they qualify for a [Special Enrollment Period](#). Losing coverage due to job loss or other life changes such as getting married or moving may allow you to enroll during a short window of time.

Need help sorting through your health coverage options? Call Maine's Consumer Assistance Program HelpLine at 1-800-965-7476.

ICYMI

An [experimental drug developed at Duke University](#) could provide pain relief as powerful as an opioid, but without the high. A [clinical trial at the University of Texas at Dallas](#) showed unprecedented rates of recovery for spinal cord injuries.

The [National Institutes of Health issued a press release](#) noting that its support for researchers at the Children's Hospital of Philadelphia and the University of Pennsylvania resulted in a customized therapy for an infant born with a rare, incurable disease using the gene-editing platform [CRISPR](#).

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