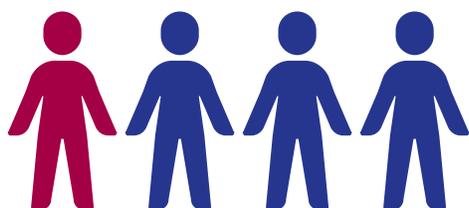


The Real Impact of Medicaid Cuts in Delaware



The Medicaid program provides essential health benefits for low-income children, families, seniors, and disabled individuals and serves as a lifeline for more than 260,000 Delawareans – nearly **1 in 4 people in the First State**.



This includes **3 in 8 children** and **3 in 5 nursing home residents**.



Cuts to Medicaid through the One Big Beautiful Bill Act (OBBBA) will have a detrimental impact on Delaware. The Kaiser Family Foundation estimates that over 10 years, OBBBA will:

- Cause **as many as 57,000 people** to lose Medicaid coverage
- Increase the number of uninsured by **about 32,000 people**
- Cut as much as **\$5 billion** in federal Medicaid funding.

DHA estimates that the Medicaid changes in OBBBA will **cut about \$200 million statewide from Delaware hospitals per year**.

Our Frontlines are Your Lifelines



Here's What's At Stake

Medicaid Cuts and Impact to Hospitals

The Medicaid work requirements and increased eligibility checks/restrictions will mean less people covered by Medicaid and with less people covered by Medicaid, more will become uninsured. Uninsured individuals are less likely to seek primary care and preventative care, decrease use of infusion and dialysis services, leading to worsening health conditions and more people coming to the emergency department for all their health conditions. This will lead to larger emergency department (ED) volumes, longer ED wait times, growth in preventable admissions, longer lengths of stay and strain on our healthcare workforce. This will also mean low to no reimbursement for hospital providers, which further strains resources.

ACA Marketplace and Uninsured

OBBBA is expected to result in **3,300 Delawareans** losing their ACA marketplace coverage and this number swells to **13,000 uninsured** if the ACA enhanced premium tax credits (subsidies) are allowed to expire at the end of the year. There will also be shorter enrollment periods and tighter eligibility restrictions per the law.

Provider Assessment Future

It is uncertain whether Delaware will be approved by CMS for its new Provider Assessment program, which would be an over \$100 million loss to the state in new funds for the Medicaid program.

Additional Concerns

We are concerned that additional challenges may be coming with potential 340B program changes and site neutral payment cuts. We should protect our healthcare access, not further undermine scarce resources.