



**Prepared Written Testimony
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On behalf of the National Health Council's member organizations, I urge you to protect and strengthen Medicaid as a vital source of coverage for more than 80 million Americans, many of whom live with chronic conditions and disabilities. Medicaid is a lifeline to their health and their ability to participate fully in their families and communities. Any policy changes must preserve Medicaid's ability to provide affordable, high-quality, and person-centered care to Americans with chronic conditions and disabilities.

For more than 100 years, the National Health Council (NHC) has engaged diverse organizations to drive patient-centered health policies and practices that increase access to affordable, high-value, and sustainable health care for all Americans. The NHC's membership is composed of 180 national health-related organizations, the majority being the nation's leading patient organizations. Other members include health-related associations and nonprofit organizations including the provider, research, and family caregiver communities; and businesses representing biopharmaceutical, device, diagnostic, generic drug, and payer organizations.

The Essential Role of Medicaid

The NHC recognizes the critical role Medicaid plays in the lives of one in four Americans. For many of the individuals we represent, Medicaid serves as their sole source of health coverage offering access to comprehensive and affordable care that supports individuals to manage complex health needs, maintain their quality of life, and live independently in their communities.

People with disabilities enrolled in Medicaid often have complex needs, managing both functional impairments and serious health conditions such as diabetes, obesity, mental illness, and age-related diseases like Alzheimer's.

Harmful Consequences of Proposed Cuts

Many of the Medicaid cost-savings options under consideration in the budget reconciliation agreement would transfer costs to patients or to the states, directly reducing the availability of care and the number of people eligible for coverage¹.

¹ [cbo-emails-re-e&c-reconciliation-scores-may-11,-2025.pdf](#)

The magnitude of cuts could be devastating.

These cuts would create serious challenges for states seeking to maintain their current levels of coverage, as most would be unable to allocate the significant funds needed to offset the sizable federal cuts under consideration. Without additional resources, states would be forced to either remove many existing enrollees by changing eligibility rules or drastically reduce the services available to those who remain covered².

Ripple Effects on Health Systems and Services

In addition, substantial evidence indicates that cuts to Medicaid lead to increased costs for hospitals and emergency rooms, primarily due to a rise in uncompensated care. Medicaid provides 60% of all paid care for people with disabilities and is the largest funder of mental health, substance use disorder services, and long-term services and supports. Its role in long-term care is especially significant, covering \$3 of every \$4 spent on nursing facility care, compared to about 20% of hospital care and 10% of clinician services³.

Concerns with Policy Proposals

While many proposals are framed as efforts to reduce waste, fraud, and abuse, the reality is that they would result in significant loss of coverage and services for those most in need. For instance, work reporting requirements impose additional administrative burdens and have been shown to cause eligible individuals to lose coverage. Among adults under age 65 with Medicaid not receiving Supplemental Security Income (SSI) and/or Social Security Disability Insurance (SSDI), and not covered by Medicare, 92% are either working (64%), caregiving, in school, or unable to work due to illness or disability⁴. Projected savings from such policies would result from people losing access, not from increased efficiency.

Another example of problematic policy for patients is the proposal to delay implementation, administration, or enforcement of the final rule titled “Medicaid Program; Streamlining the Medicaid, Children’s Health Insurance Program, and Basic Health Program Application, Eligibility Determination, Enrollment, and Renewal Processes” until January 1, 2035, will result in increased barriers to access for people eligible for Medicaid. Approximately 60% of the uninsured population are eligible for Medicaid or subsidized plans in the Marketplace but are not enrolled in these programs⁵. The purpose of the rule is to clarify and provide support for the process of enrolling and seeking coverage that is needed by people with chronic diseases and disabilities.

² [The Potential Impacts of Cuts to Medicaid | Johns Hopkins | Bloomberg School of Public Health](#)

³ [The Potential Impacts of Cuts to Medicaid | Johns Hopkins | Bloomberg School of Public Health](#)

⁴ [Understanding the Intersection of Medicaid and Work: An Update | KFF](#)

⁵ [A Closer Look at the Remaining Uninsured Population Eligible for Medicaid and CHIP | KFF](#)

As you move forward in writing and implementing the budget reconciliation agreement, we urge you to reject cuts to Medicaid. These proposals would have long-term, harmful impacts on people with chronic diseases and disabilities.

Thank you for your attention to this critical issue. Please contact Kimberly Beer, Senior Vice President, Policy & External Affairs at kbeer@nhcouncil.org or 202-557-9146 with any questions or request for additional information.