

July 3, 2025

Contact: Survival Coalition of Wisconsin Disability Organizations, Co-Chairs

Beth Swedeen, beth.swedeen@wisconsin.gov; (608) 220-2924

Patti Becker, beckerp@clanet.org; (608) 240-8503

Jason Glozier, jglozier@wcilc.org (608) 422-0525

Survival Coalition Response to Passage of Federal Budget Bill

Today, the U.S. House approved the Senate's deeper cuts to Medicaid and SNAP by a vote of 218 to 214.

The bill rushed through the U.S. Senate without any public hearings in less than three days with parts being written and rewritten until the final hour before the floor vote. The impact of many added or changed provisions had no formal analysis before the U.S. House passed the bill less than 48 hours after receiving it from the Senate.

According to an initial estimate from the Congressional Budget Office last Saturday—which does not reflect the final language of the bill—the bill would cut Federal spending on Medicaid, Medicare, and ACA Marketplace by more than \$1.1 Trillion. More than \$1 Trillion of those cuts come from Medicaid alone. At least 11.8 M people would lose health care. These numbers will increase when more detailed analysis of the final bill is done.

The bill also cuts \$ 300 Billion in food assistance, taking away food from an estimated 5 Million people. 45% of Wisconsin SNAP participants are people with disabilities. Two-thirds of the people who use SNAP/Foodshare in Wisconsin are also Medicaid participants.

“These cuts will be detrimental to the ability of states to meet their obligations under the Olmstead Act, and will cause an increase in unnecessary and costly institutionalizations.” Says Jason Glozier.

States are unlikely to be able to pay a lot more to keep their Medicaid programs the same. States can change who can or can't get into Medicaid (and also make eligible people wait to get in), choose to pay small businesses who provide health or long term care less, or reduce their spending on optional services.

Home and Community Based Services (HCBS)--Family Care, IRIS, CLTS--are optional services states do not have to do and they represent 50% of the optional Medicaid service spending. 86% of Medicaid optional service spending is for people with disabilities and older adults. Cuts that impact optional services will impact people with disabilities.

States are unlikely to be able to pay a lot more to keep their Medicaid programs the same. States can change who can or can't get into Medicaid (and also make eligible people wait to get in), choose to pay small businesses who provide health or long term care less, or reduce their spending on optional services.

Home and Community Based Services (HCBS)--Family Care, IRIS, CLTS--are optional services states do not have to do and they represent 50% of the optional Medicaid service spending. 86% of Medicaid optional service spending is for people with disabilities and older adults. Cuts that impact optional services will impact people with disabilities.