

# Health Equity Collaborative Warns of H.R. 1's Devastating Impact on Medicaid Enrollees with Chronic Conditions

WASHINGTON, DC, UNITED STATES, August 7, 2025 /EINPresswire.com/ -- The Health Equity Collaborative (HEC), a community of national civil rights, progressive, and multicultural organizations, today released a critical issue brief highlighting the severe consequences of H.R. 1, signed into law on July 4, 2025, for Medicaid enrollees with mental health disorders, diabetes, and cardiovascular disease. The brief, supported by analysis from Magnolia Market Access, underscores how H.R.

1's work requirements, federal funding cuts, and reduced state flexibility threaten healthcare access for millions of vulnerable Americans.



**HEALTH EQUITY COLLABORATIVE**

## Key Findings from the Issue Brief

Medicaid provides essential coverage to approximately 80 million people, including 48 million children, and is a cornerstone of health equity in the United States. H.R. 1's provisions could disrupt this vital program, particularly for those with chronic conditions:

- **Work Requirements Threaten Coverage:** H.R. 1 mandates that Medicaid expansion enrollees aged 19–64 without children under 14 complete 80 hours per month of work, training, education, or community service. This could lead to 25% of employed enrollees with chronic conditions losing coverage due to administrative burdens, with non-disabled enrollees in the South and West most affected. An estimated 1.1 million unemployed enrollees with these conditions also risk losing coverage, with mental health patients in the Northeast particularly vulnerable.

- **Potential Reversal of Medicaid Expansion:** While H.R. 1 does not directly alter Medicaid expansion, reduced federal matching rates for certain populations and eliminated state funding flexibilities—projected to save \$564 billion over 10 years—may force states to scale back or end

expansion programs. This could result in over 5 million mental health patients and 4.2 million enrollees in the South with chronic conditions losing coverage.

- Federal Funding Cuts Hit Hardest: Cardiovascular patients face the greatest risk, with up to 1.6 million potentially losing coverage in a worst-case scenario (20% federal funding cut, 25% state makeup). Over 1 million mental health and diabetes patients could also lose coverage, exacerbating health disparities.

### A Threat to Health Equity

“Medicaid is a lifeline for low-income individuals and families, particularly those managing chronic conditions,” said Amy Hinojosa, Founding Member of HEC. “H.R. 1’s changes risk increasing the number of uninsured, delaying critical care, and driving up emergency room use, which will disproportionately harm underserved communities and widen health disparities.”

The brief notes that Medicaid expansion has improved health outcomes, with expansion enrollees achieving care costs comparable to other Medicaid recipients within four years. However, H.R. 1’s policies could reverse these gains, leading to worse health outcomes and potential job losses for chronically ill patients.

### Call to Action

HEC calls on policymakers, healthcare stakeholders, and advocates to:

- Protect Vulnerable Enrollees: Implement streamlined exemptions for work requirements and restore state funding flexibilities.
- Support State Solutions: Encourage job training and employment programs to help enrollees maintain coverage.
- Prioritize Health Equity: Ensure policies address the needs of diverse populations with chronic conditions.

Read the [full issue brief](#).

HEC remains committed to advocating for a healthcare system that ensures equitable access and empowers all patients.

Amy Hinojosa  
Health Equity Collaborative

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