

HR 1 Medicaid Implementation Timeline

2025

July 4

- Medicaid payments are prohibited to Planned Parenthood

December 31

- Guidance on eligibility determinations must be out
- Deadline for approval or denial of state applications for rural health fund (dates that applications are due from states not yet specified)

2026

July 4

- Prohibition on payments to Planned Parenthood expires

October 1

- End coverage for refugees and other legal immigrants that are not legal permanent residents
- Provider tax freeze begins (in effect, rates are held at what they were on May 1, 2025)

2027

January 1

- Work requirement begins (with state option to delay as far as January 1, 2029)
- Every six-month eligibility redeterminations begin for Expansion enrollees
- Retroactive coverage limitations begin
- States must begin to check Death Master File for deceased enrollees
- States must regularly obtain addresses from enrollees as part of preventing duplicate enrollment
- 1115 waiver budget neutrality requirements begin
- Managed care entities must begin to submit enrollee addresses to the state

October 1

- Provider tax threshold is reduced to 5.5% (FY28)

2028

January 1

- Limitation on home equity takes effect
- States must begin to check the Death Master File for deceased providers
- Phase down begins for grandfathered state-directed payments

July 1

- Option to use expanded 1915(c) waivers begins

October 1

- Cost sharing requirements for expansion enrollees begin
- Provider tax threshold reduced to 5% (FY29)

2029

October 1

- States must begin to submit enrollee information to HHS each month to check for duplicate enrollment
- Begin potential restriction of federal financial participation based on payment errors
- Provider tax threshold reduced to 4.5% (FY30)

2030

October 1

- Provider tax threshold reduced to 4% (FY31)

2031

October 1

- Provider tax threshold reduced to 3.5% (FY32)

2034

October 1

- Moratorium ends on rules regarding eligibility & enrollment and nursing home staffing rule.