CLAUDIA TENNEY
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TENNEY. HOUSE. GOV



## Congress of the United States

## House of Representatives Washington, AC 20515-3222

June 6, 2025

House Committee on Ways and Means

Subcommittee on Health

Subcommittee on Trade

House Committee on Science, Space, and Technology

Subcommittee on Energy

House Permanent Select Committee on Intelligence

Subcommittee on Defense Intelligence and Overhead Architecture

> Subcommittee on National Intelligence Enterprise

John Thune Majority Leader United States Senate Washington, DC 20515

Mike Crapo Chairman U.S. Senate Committee on Finance Washington, DC 20515

Dear Majority Leader Thune and Chairman Crapo,

Thank you for your consideration of H.R. 1, the One Big Beautiful Bill Act. We look forward to working together with the Senate to advance pro-growth, pro-family, pro-worker tax policies. As you consider H.R. 1, we ask that the Senate consider modifications to delay the implementation of Sections 112101 and 112102 of the One Big Beautiful Bill Act, which proposes to eliminate premium tax credit (PTC) eligibility for lawfully present immigrants, including those who are subject to the five-year waiting period for Medicaid. While we are supportive of the policy to prioritize federal benefits for citizens and aligning federal premium tax credit support with federal Medicaid eligibility standards, the abrupt implementation of the policy without allowing time to develop a transition plan could destabilize New York state's health insurance ecosystem.

New York is one of the few states that operate a Basic Health Program (BHP) authorized under Section 1331 of the Affordable Care Act. New York's BHP, known as the Essential Plan, currently provides federally supported health coverage for 725,000 lawfully present immigrants, including more than 500,000 lawfully present immigrants who are ineligible for Medicaid due to the federal five-year bar. However, the rapid implementation of Sections 112101, set to take effect in January 2027 and 112102, set to take effect in January of 2026, would prompt the shift of 500,000 of these individuals on to State-only Medicaid coverage given New York's constitutional requirement to provide coverage to this population under the 2001 Court of Appeals of the State of New York decision, *Aliessa v. Novello*.

This subsequent shift would likely result in our state government placing more strain on New York taxpayers and counties, which are already struggling beneath the weight of New York's massive tax burden that has grown over decades of Albany's reckless spending and mismanagement. This is evidenced by New York's position as the highest non-federal per-capita Medicaid spending (i.e. state and local contribution) at \$4,834 as of FY2023, \$827 than the next

closest state, New Mexico. While we share in our disagreement in the manner that New York State has managed our Medicaid program, we remain concerned that the rapid implementation of these policies will result in further tax hikes on New Yorkers by our state government.

We respectfully request that the Senate consider modifications to delay implementation of sections 112101 and 112102 until 2029, to allow states like New York time to make adjustments and adequately prepare for the change.

We thank you for your attention to this matter and welcome the opportunity to work together to strengthen our federal health programs and address waste, fraud, and abuse.

Sincerely,

Claudia Tenney

Member of Congress

Claudia Tennen

Nicole Malliotakis Member of Congress