

March 2026

Children's Coverage Loss in the Wake of H.R.1

The Impact of H.R.1 and other legislation from the 119th United States Congress on Children's Health Coverage in New York



**Citizens' Committee
for Children** *of* NEW YORK

Acknowledgements

CCC gratefully acknowledges the New York Health Foundation for its support of this research on the impacts of H.R.1 on children's health coverage.



For 80 years, Citizens' Committee for Children of New York (CCC) has been an independent voice for children advancing child and family well-being through research, advocacy, and civic engagement. With deep expertise in data, policy and child-serving systems, CCC champions proven solutions and mobilizes allies to secure reforms that improve child outcomes and promote equity. CCC drives systemic change to ensure every child is healthy, housed, educated, and safe.

Table of Contents

Executive Summary	1
<hr/>	
H.R.1's Impact on Children, Families, and Communities	3
<hr/>	
Determining the Health Coverage Impact of H.R.1 on New York's Children	5
<hr/>	
Findings: H.R.1 will Result in Substantial Coverage Loss for New York's Children	6
<hr/>	
Policy Recommendations	7
<hr/>	
Appendix: Impact of Individual Sections of H.R.1 on Children's Coverage	9
<hr/>	
References	11

Executive Summary

For decades, New York has been a national leader in reducing uninsured rates, particularly for children. Between 2008 and 2024, New York's child uninsured rate fell from 6.2% (284,400) to 2.5% (102,800).¹ This significant decline in the number of uninsured children can be attributed to years of state and national level advocacy aimed at expanding coverage options for children and families.

On July 4, 2025, Congress passed H.R.1 (also known as the One Big Beautiful Bill Act, or OBBBA) despite strong opposition from advocates across the country who protested against the devastating impacts the bill would have on marginalized populations. This legislation of the 119th Congress includes sweeping changes to healthcare, nutrition programs, tax policy, and immigration policy. Undoubtedly, the harms of this legislation will be widespread and long-lasting, undermining healthcare access and anti-hunger services for millions across the country.

In New York, one of the many harms of this act and related legislation will be the rollback of much of the state's progress in reducing the number of uninsured children. A new analysis commissioned by Citizens' Committee for Children of New York (CCC) underscores the detrimental impact the Act will have on children's healthcare coverage:

- **H.R. 1 and other legislation from the 119th Congress will increase the number of uninsured children in New York by approximately 24%.**
- **Coverage losses will peak in 2031, when more than 25,500 children are estimated to lose coverage.**

As one of the largest groups of enrollees in Medicaid, children are at significant risk from funding cuts to Medicaid. In 2023, Medicaid and CHIP covered 44% of New York's children, including 44% of children with special healthcare needs.²

The benefits of healthcare coverage for children are difficult to overstate. Children with health coverage are more likely to access preventive well-child

visits, hearing, vision, and dental screenings, and on-time diagnosis and treatment.³ Inadequate health coverage results in higher rates of school absenteeism and dropout rates, as well as heightened risks of mental illness and poor health in adulthood.⁴ Moreover, a healthy start to life depends on health coverage early on to ensure appropriate prenatal care that can reduce risks of infant mortality and preterm birth.⁵ Uninsured families also face greater risks of economic insecurity due to medical debt and financial hardship that can destabilize families and compromise child safety.⁶

The harms of child coverage loss that will result from H.R.1 are compounded by many other harms of the legislation, including draconian cuts to the Supplemental Nutrition Assistance Program (SNAP) and a dramatically expanded immigration detention and enforcement system. In the midst of this devastation, the bill provides more than \$1 trillion in tax breaks over the next decade for the wealthiest 1% of taxpayers.⁷

In the face of these cuts and to protect child and family well-being, New York State must take the following actions:

- 1. Provide state-funded health coverage options for New Yorkers losing care as a result of H.R.1.**
- 2. Create a state-funded premium assistance program that enables lawfully present immigrants losing eligibility for federal premium tax credits to purchase a marketplace plan.**
- 3. Extend coverage for Medicaid-eligible New Yorkers who lose coverage as a result of new work requirements and administrative barriers.**
- 4. Invest in community-based consumer assistance and streamline administrative processes to reduce coverage disruption due to new work reporting requirements, six-month recertifications, and other burdensome federal requirements.**
- 5. Enable New York State's continuous eligibility period for children in Medicaid and Child Health Plus to remain in effect until the end of the waiver period on March 31, 2027.**
- 6. Create a state-funded food benefit program for income eligible New Yorkers currently excluded from SNAP based on immigration status.**

H.R.1's Impact on Children, Families, and Communities

Overview

The summary below offers a high-level overview of some of the most harmful expected impacts of H.R.1 in New York and across the country. While many of the cuts are targeted at adult populations, the harms to children and families will be severe and long-lasting. The loss of healthcare coverage and SNAP will result in more children and families experiencing hunger, poor healthcare, and financial instability. Moreover, the widespread and targeted attacks on immigrants – both by denying benefits and through increasingly violent immigration enforcement – are devastating families and deepening intergenerational trauma. Collectively, these cuts decimate critical federal funding states rely on to serve several populations, including children. As a result, states like New York will feel pressure to cut or scale back essential services to balance budgets.

Importantly, the full impacts of this legislation will be phased in over several years. Some changes – such as the elimination of Essential Plan and Affordable Care Act (ACA) Marketplace coverage for Deferred Action for Childhood Arrivals (DACA) recipients – took effect August 2025. Others – such as the introduction of onerous new work requirements – will not go into effect until January 2027.⁸

Healthcare Impacts

Nationally, H.R.1 cuts \$1.1 trillion from Medicaid and the Affordable Care Act (ACA) marketplaces.⁹ Congressional Budget Office estimates indicate that H.R.1 is on track to strip 11.8 million individuals of their health insurance nationally through a number of pathways: direct cuts to Medicaid, the end of premium tax credits for ACA marketplace coverage, and the introduction of onerous administrative requirements to prove employment, among other policy changes.¹⁰

In May of 2025, Governor Hochul's office estimated that H.R.1 would result in \$13.5 billion in annual healthcare losses for the state and cause nearly 1.5 million New Yorkers to become uninsured, largely as a result of newly established eligibility exclusions.¹¹ Additional coverage losses are expected as individuals struggle to comply with more complicated work requirements, or lose access to subsidies that made healthcare coverage affordable.

Many of those most affected in New York are enrolled in the state's Essential Plan, a program established through the Affordable Care Act that provides coverage for roughly 1.7 million New Yorkers with incomes less than 250% of the federal poverty level.

Federal policy changes under H.R.1 would eliminate about \$7.5 billion in federal funding supporting the program.¹²

In an effort to protect coverage for those currently covered under the Essential Plan, New York State has proposed reverting to an earlier version of the Essential Plan (known as the Basic Health Program). In March 2026, the federal Centers on Medicare and Medicaid Services (CMS) provided preliminary approval of this plan. The transition back to the BHP will allow the state to use funding reserves accumulated through the Essential Plan to continue coverage for 1.3 million New Yorkers, including lawfully present immigrants with incomes below 200% FPL and citizens above the Medicaid eligibility limit. However, approximately 450,000 New Yorkers with incomes between 200% and 250% FPL would no longer be eligible for coverage.¹³ In addition, 6,000 low-income individuals with DACA and PRUCOL status would be ineligible for the BHP. Another 30,000 New Yorkers with incomes between 200-400% FPL will lose access to federal premium tax credits in January 2026 as a result of H.R.1.¹⁴

Hunger Impacts

The Supplemental Nutrition Assistance Program (SNAP) is the nation's largest anti-hunger program supporting families, with nearly two-thirds of SNAP benefits going to families with children.¹⁵ H.R. 1 makes significant changes to SNAP, resulting in an estimated \$187 billion cut in federal funding through 2034, affecting 16 million children, 8 million seniors, and 4 million non-elderly adults with disabilities.¹⁶ Stricter work requirements will create additional administrative barriers for

eligible SNAP recipients, resulting in approximately 300,000 households losing some or all of their SNAP benefits. The state estimates a monthly average loss of \$220 per household.¹⁷

Due to new exclusions targeting lawfully present immigrants, approximately 41,000 New Yorkers will lose eligibility for SNAP benefits. Moreover, New York State's administrative costs will increase by approximately \$36 million per year, and counties will pay an estimated \$168 million more annually as a result of cost shifts to states.¹⁸

Attacks on Immigrant Families

H.R.1's draconian cuts disproportionately target immigrants, stripping federal eligibility for Medicaid, the Children's Health Insurance Program (CHIP), Medicare, SNAP, and subsidized ACA marketplace plans from lawfully present immigrants, including refugees, those granted asylum or humanitarian protections, and certain victims of sex trafficking and domestic violence, among others. The bill also eliminates eligibility for the Child Tax Credit for any child without a parent with a Social Security Number on their tax return, impacting approximately 2.6 million children nationally. Additionally, H.R.1 makes it more challenging to achieve Legal Permanent Resident (LPR) status, further limiting access to crucial anti-hunger and healthcare programs.¹⁹ Amid numerous punitive policy changes, the bill includes \$170 billion for immigration detention and border enforcement. These funds are already being used to detain immigrants in inhumane conditions, separate families, and deport people away from their homes, communities, and families.²⁰

Determining the Health Coverage Impact of H.R.1 on New York's Children

While several reports estimate the health coverage losses that will result from H.R.1 - including to New Yorkers - this is the first to estimate the specific impact on children's health coverage in New York.

To determine the impact of H.R.1 on New York's children, Citizens' Committee for Children commissioned Health Management Associates (HMA) to conduct an analysis of the legislation, applying estimates from the Congressional Budget Office to New York-specific data on children's enrollment in Medicaid and CHIP. The analysis also reflects the State's proposed return to the Basic Health Program.

The analysis further considers the impact of two changes that were contemporaneous with H.R. 1 policy discussions but not part of the legislation: the expiration of the enhanced premium tax credit (expired on in December 2025) and the implementation of the Marketplace "Integrity and Affordability Rule" (finalized in July 2025). The expiration of enhanced premium tax credits will result in widespread coverage losses as New Yorkers face dramatic and unsustainable increases in healthcare premium costs. The Marketplace "Integrity and Affordability Rule" includes several provisions that will limit healthcare coverage, including shortening the open enrollment period, strengthening income verification processes, modifying eligibility redetermination procedures, and removing DACA recipients from the definition of "lawfully present" for Marketplace and Basic Health Programs coverage, among others.

In addition to estimating the direct impact of H.R.1 and related policies, it is critical to examine the indirect impacts of the legislation on children's coverage. There is a long and established body of evidence demonstrating the relationship between parent and caregiver health coverage and children's coverage. When parents and caregivers gain health coverage, so do their children.²¹ Conversely, when parents lose health coverage, there is a greater likelihood that children will lose coverage too, even when they remain eligible. This was recently demonstrated during the "Medicaid unwinding" period in 2023, when Congress ended continuous coverage enrollment. As parents lost coverage either due to ineligibility or for procedural reasons, more than 5.5 million children lost Medicaid coverage nationally, many of whom were still eligible for services.²²

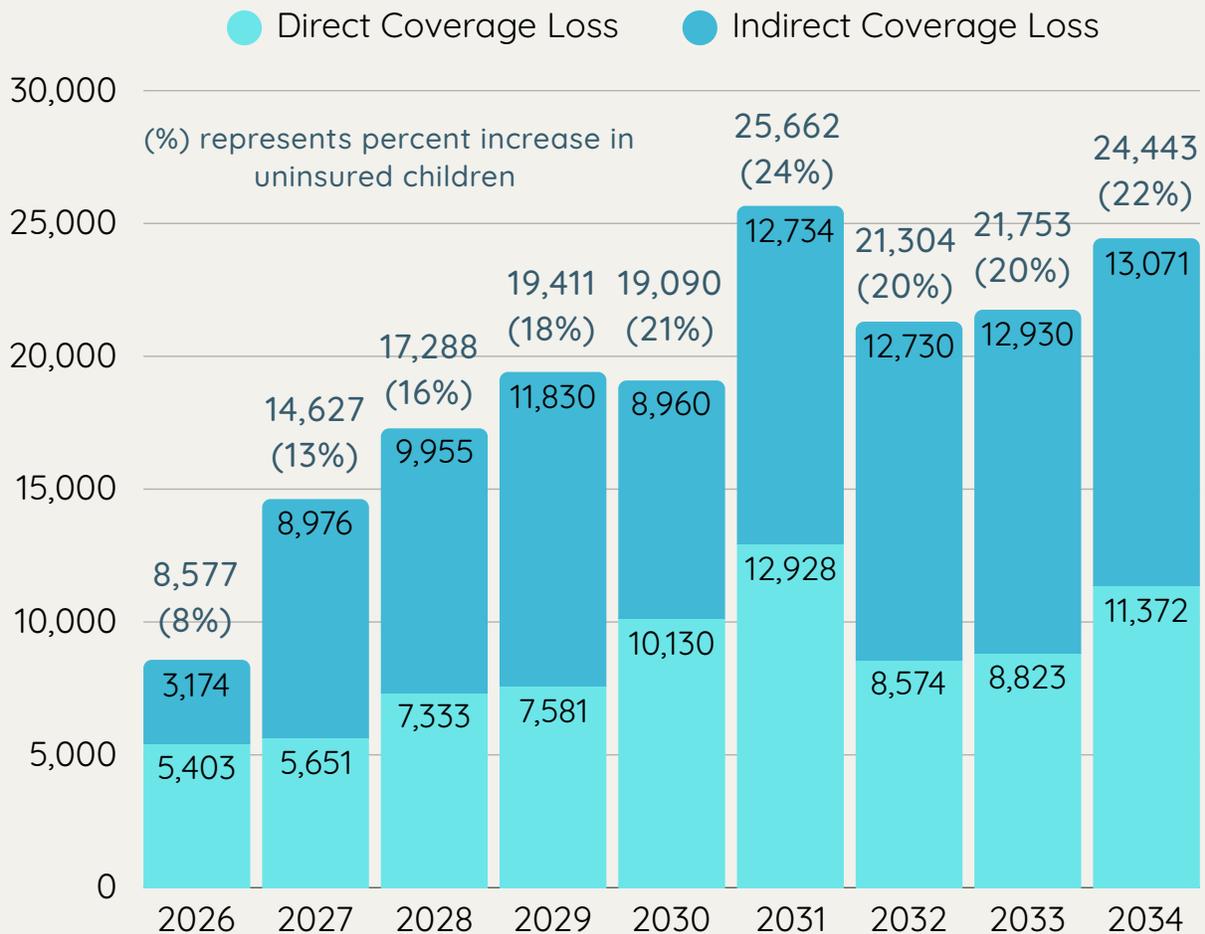
A particularly relevant Oregon study found that the rate of uninsured children was 44% higher in low-income households where one parent lost Medicaid coverage compared to households without any loss of coverage.²³ This analysis uses the findings of the Oregon study to determine the indirect coverage loss for children in households likely to be impacted by parental coverage loss resulting from H.R.1 and related policies.

Findings: H.R.1 will Result in Substantial Coverage Loss for New York's Children

Using the methodology outlined above, we calculated annual estimates of children's coverage loss between 2026 and 2034 and found the following:

- H.R.1 and other legislation from the 119th Congress will increase the number of uninsured children in New York by approximately 24%.
- The greatest impact is anticipated to occur in 2031, when 25,662 more children will lose coverage than would have without the passage of H.R.1.

New York Children Losing Coverage as a Result of H.R.1



*Includes impact of the expiration of the enhanced premium tax credit and the implementation of the Marketplace "Integrity and Affordability Rule".

Policy Recommendations

- 1. Provide state-funded health coverage options for New Yorkers losing care as a result of H.R.1.** New York must take bold, proactive action to maintain Essential Plan coverage for 444,000 New Yorkers between 200-250% of the federal poverty level who will lose coverage when the State transitions to the Basic Health Program (BHP) in July 2026. New York must also create a state-funded health insurance program for the 6,000 legal immigrants who will be ineligible for the BHP. This population is comprised of Deferred Action for Childhood Arrivals (DACA) and immigrants with PRUCOL status with incomes between 138-200% FPL. New York must commit to creating state-funded programs for these populations, enabling them to maintain the coverage they received under the Essential Plan.ⁱ
- 2. Create a state-funded premium assistance program that enables lawfully present immigrants losing eligibility for federal premium tax credits to purchase a marketplace plan.** As a result of H.R.1, Community Service Society estimates approximately 30,000 lawfully present immigrants between 200 and 400% FPL will lose eligibility for financial assistance to purchase coverage on a Qualified Health Plan. New York State could support this populations by subsidizing the purchase of marketplace plans through a state-funded premium assistance program.ⁱ
- 3. Extend coverage for Medicaid-eligible New Yorkers who lose coverage as a result of new work requirements and administrative barriers.** According to the Fiscal Policy Institute, approximately 800,000 New Yorkers are at risk of losing health coverage as a result of new work requirements, re-certifications, and other administrative barriers introduced by H.R.1.²⁴ The majority of these individuals are likely to meet work requirements or qualify for exemptions, but will lose coverage as a result of red tape, documentation challenges, and confusion over new requirements. New York can help reduce coverage loss for New Yorkers and their families by using state funds to temporarily extend coverage by six months after coverage loss, thereby giving individuals more time to re-establish federal eligibility.ⁱⁱ
- 4. Invest in community-based consumer assistance and streamline administrative processes to reduce coverage disruption due to new work reporting requirements, six-month recertifications, and other burdensome federal requirements.** State programs like Community Health Advocates (CHA) and the Navigator program are essential for helping individuals navigating new challenges accessing and maintaining health coverage.

i. Community Service Society's March 2026 report entitled "Mitigating the Impact of HR 1 on New York's Health Insurance Landscape: Four Policy Proposals to Preserve Coverage" provides multiple, detailed proposals and cost estimates for creating state-funded bridge programs to mitigate coverage losses resulting from H.R.1, as well as recommendations for subsidizing marketplace plans for New Yorkers losing financial assistance.

<https://www.cssny.org/publications/entry/mitigating-the-impact-of-hr1-on-new-yorks-health-insurance-landscape>

ii. Additional details on coverage options for this population are available in the Fiscal Policy Institute report "A Plan to Maintain Insurance Coverage After OBBBA." <https://fiscalspolicy.org/wp-content/uploads/2026/01/Keeping-People-Covered-Post-OBBBA.pdf>

5. **Allow New York State’s continuous eligibility period for children in Medicaid and Child Health Plus to remain in effect until the end of the waiver period on March 31, 2027.** In July of 2025, federal Centers for Medicare and Medicaid Services (CMS) disallowed states from providing continuous, multi-year eligibility coverage for children in Medicaid and CHIP. This will force New York State to reverse landmark progress from 2025 when the State began providing continuous eligibility coverage for children age birth to six in Medicaid. However, New York’s Medicaid waiver approval for this expansion does not expire until March 31, 2027, and Governor Hochuls’ Executive Budget would end the expansion on July 1, 2026. New York should maintain continuous coverage for as long as allowable while planning for a smooth transition away from continuous eligibility.

6. **Create a state-funded food benefit program for income-eligible New Yorkers currently excluded from SNAP based on immigration status.** Though not directly related to public health coverage options, the loss of SNAP coverage for New Yorkers will have clear and long-term repercussions to the health of children, youth, and families. New York must maintain state-funded SNAP benefits for the 41,000 lawfully present immigrants who are no longer eligible for SNAP due to immigration status exclusions under H.R.1.

Appendix: Impact of Individual Sections of H.R.1 on Children's Coverage

Changes in children's coverage fluctuate year to year as distinct components of H.R.1 go into effect over the course of a decade. Additional fluctuations in coverage changes occur due to factors such as the churning of individuals disenrolling and enrolling in health coverage and anticipated state responses as new aspects of the Act are rolled out. Coverage losses projected in any given year reflect are not additive - they are relative to the baseline if H.R.1 had not passed.

As part of this analysis, we organized the pathways through which H.R.1 and related policies reduce coverage across four categories:

- Federal investment reductions (Inv)
- Financial changes that increase premium costs (Fin)
- Administrative changes to eligibility requirements (Admin)
- Changes related to citizenship (Citizen)

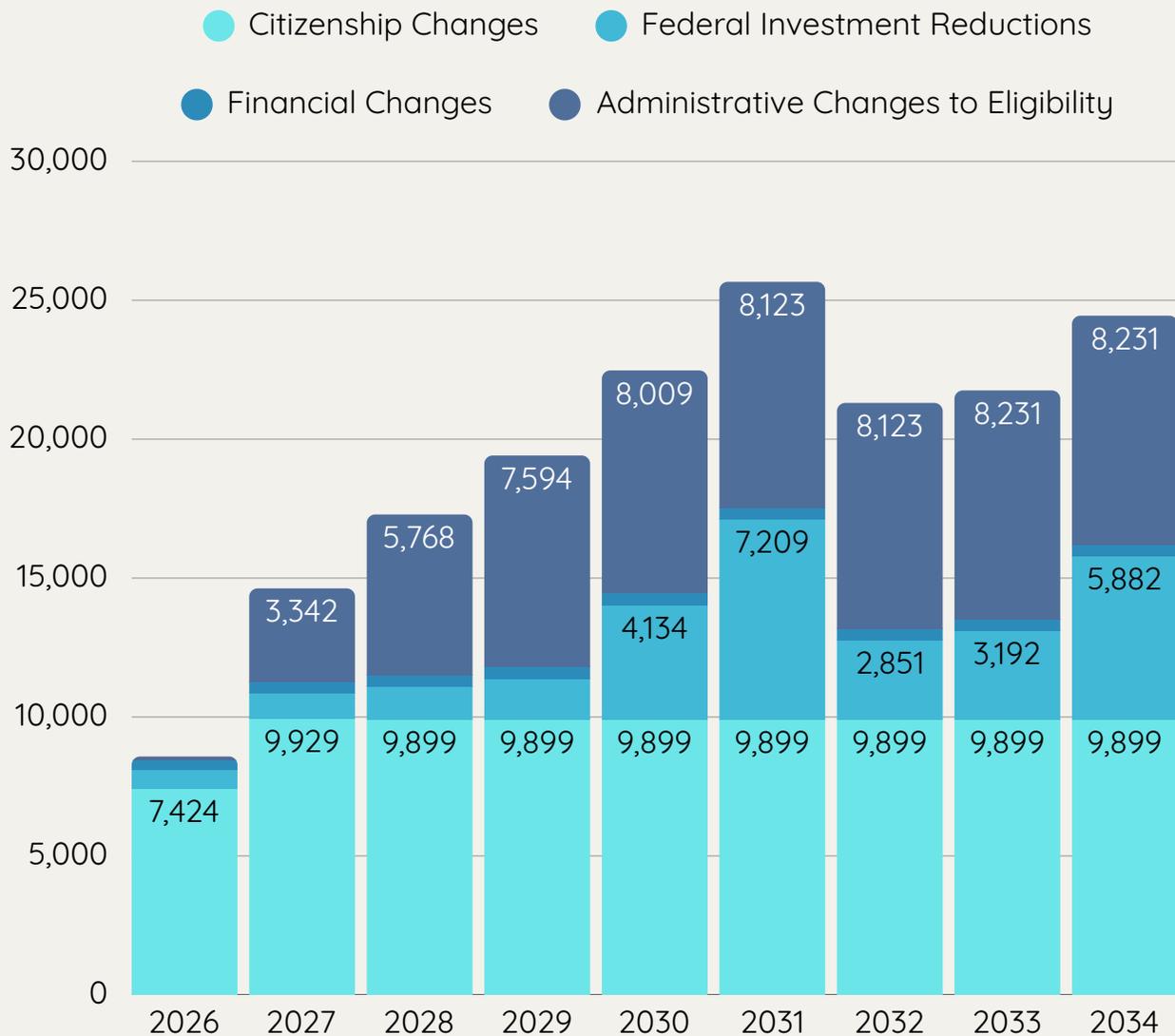
Sections of H.R.1 Impacting Coverage for Children

Federal investment reductions (Inv)	Administrative changes (Admin) to eligibility requirements	Changes related to citizenship (Citizen)
§71106: Erroneous payment reduction	§71101: Eligibility redetermination	§71109: Alien Medicaid eligibility
§71115: Provider tax changes	§71112: Modify retroactive eligibility	§71301: Remove APTC from certain immigrants
	§71119: Community engagement	§71302: Remove APTC for lawfully present >100% FPL
	§71303: Eligibility verification	§71302: NY's Essential Plan changes (post-passage)
Financial changes that increase premium costs (Fin)	§71304: End APTC for special enrollment periods	
§71305: Remove limit on recapture of APTC	Marketplace rule**	
Expiration of enhanced APTC **	§71305: CBO interaction adjustment (deduplication)	

**Federal policy change not included in H.R. 1

Appendix: Impact of Individual Sections of H.R.1 on Children's Coverage

New York Children Losing Coverage as a Result of H.R.1 by Source of Coverage Loss



*Includes impact of the expiration of the enhanced premium tax credit and the implementation of the Marketplace "Integrity and Affordability Rule"

References

1. KFF. Health Insurance Coverage of Children 0-18. <https://www.kff.org/state-health-policy-data/state-indicator/children-018/?dataView=0¤tTimeframe=15&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
 2. United Hospital Fund. “Medicaid Part 3: Children.” 2023. https://media.uhfnyc.org/filer_public/d7/ba/d7ba8459-1d8b-444f-a286-a33f9e8ef377/medicaid_part_3_children_web.pdf
 3. Kaiser Family Foundation. “Medicaid and Children’s Health: 5 Issues to Watch Amid Recent Federal Changes.” 2024. <https://www.kff.org/medicaid/medicaid-and-childrens-health-5-issues-to-watch-amid-recent-federal-changes/>; United Hospital Fund. (2023). Medicaid Matters for Children’s Health. https://media.uhfnyc.org/filer_public/d7/ba/d7ba8459-1d8b-444f-a286-a33f9e8ef377/medicaid_part_3_children_web.pdf
 4. Learning Policy Institute. “Medicaid Is More Than Health Insurance: It’s a Lifeline for Public Schools.” 2024. <https://learningpolicyinstitute.org/blog/medicaid-more-health-insurance-its-lifeline-public-schools>; New York State Office of Mental Health. (2024). Children and Youth Behavioral Health Services Dashboard. <https://omh.ny.gov/omhweb/tableau/children.html>
 5. Kaiser Family Foundation. “5 Key Facts About Medicaid and Pregnancy.” 2024. <https://www.kff.org/medicaid/5-key-facts-about-medicaid-and-pregnancy/>
 6. Jennifer Tolbert, Clea Bell, Sammy Cervantes, Rakesh Singh. “The Uninsured Population and Health Coverage.” KFF. October 8, 2025. <https://www.kff.org/uninsured/health-policy-101-the-uninsured-population-and-health-coverage/?entry=table-of-contents-introduction>
 7. Micha Johnson and Andrea Ducas. 1 Trillion in Medicaid Cuts, \$1 Trillion in Tax Giveaways for the Richest 1 Percent: The One Big Beautiful Bill’s Budget Math. 2025. Center for American Progress. <https://www.americanprogress.org/article/1-trillion-in-medicaid-cuts-1-trillion-in-tax-giveaways-for-the-richest-1-percent-the-one-big-beautiful-bills-budget-math/>.
 8. Manatt Health. “Budget Reconciliation Implementation Roadmap.” July 24, 2025. <https://shvs.org/resource/budget-reconciliation-implementation-roadmap/>.
 9. Center on Budget and Policy Priorities. “By the Numbers: Harmful Republican Megabill Will Take Health Coverage Away From Millions of People and Raise Families’ Costs.” August 2025. <https://www.cbpp.org/research/health/by-the-numbers-harmful-republican-megabill-will-take-health-coverage-away-from>.
 10. Congressional Budget Office. “Cost Estimate for H.R. 1.” 2025. <https://www.cbo.gov/publication/61570>
-

References

11. New York State Office of the Governor. "Governor Hochul Updates New Yorkers on the Impact of House Republican Budget Bill to New York State's Health Care Economy." May 2025. <https://www.governor.ny.gov/news/governor-hochul-updates-new-yorkers-impact-house-republican-budget-bill-new-york-states-health>
12. New York State Department of Health. "Following Devastating Federal Funding Cuts, New York State Takes New Action to Preserve Health Care for As Many New Yorkers As Possible." September 10, 2025. https://www.health.ny.gov/press/releases/2025/2025-09-10_federal_funding_cuts.htm
13. New York State of Health. "Press Release Following Federal Funding Cuts." 2025. <https://info.nystateofhealth.ny.gov/news/press-release-following-devastating-federal-funding-cuts-new-york-state-takes-new-action>
14. Elisabeth Benjamin and Mia Wagner. "Mitigating the Impact of HR 1 on New York's Health Insurance Landscape: Four Policy Proposals to Preserve Coverage." February 2026.
15. Center on Budget and Policy Priorities. "Policy Basics: The Supplemental Nutrition Assistance Program (SNAP)". November 25, 2024. <https://www.cbpp.org/research/food-assistance/the-supplemental-nutrition-assistance-program-snap#:~:text=Data%20from%20the%20U.S.%20Department,a%20non%2DLatinx%20Asian%20person.>
16. Center on Budget and Policy Priorities. "By the Numbers: Harmful Republican Megabill Takes Food Assistance Away From Millions of People." August 14, 2025. <https://www.cbpp.org/research/food-assistance/by-the-numbers-harmful-republican-megabill-takes-food-assistance-away-from>
17. New York State Governor's Office. "Governor Hochul Convenes Cabinet Meeting on Devastating Impacts of Republicans' 'Big Ugly Bill' on New York State." July 17, 2025. <https://www.governor.ny.gov/news/governor-hochul-convenes-cabinet-meeting-devastating-impacts-republicans-big-ugly-bill-new>
18. New York State Governor's Office. "Governor Hochul Convenes Cabinet Meeting on Devastating Impacts of Republicans' 'Big Ugly Bill' on New York State." July 17, 2025. <https://www.governor.ny.gov/news/governor-hochul-convenes-cabinet-meeting-devastating-impacts-republicans-big-ugly-bill-new>
19. National Immigration Law Center. "The Anti-Immigrant Policies in Trump's Final "Big Beautiful Bill," Explained." August 2025. <https://www.nilc.org/resources/the-anti-immigrant-policies-in-trumps-final-big-beautiful-bill-explained/>

References

20. League of United Latin American Citizens. Impact of H.R. 1 on Immigrants and Children of Immigrants Who Are U.S. Citizens. 2025. https://lulac.org/impact_of_hr_1_one_big_beautiful_bill_act_on_immigrants_and_children_of_immigrants_who_are_us_citizens/ Asian American Federation. H.R. 1 Information Sheet. 2025. <https://www.aafederation.org/wp-content/uploads/2025/08/Asian-American-Federation-H.R.-1-Info-Sheet.pdf>
21. Georgetown University Center for Children and Families. Medicaid Expansion and Child Coverage. 2024 <https://ccf.georgetown.edu/wp-content/uploads/2024/11/Medicaid-expansion-v2-2.pdf>; Hudson, Julie L., and Asako S. Moriya. "Medicaid Expansion for Adults Had Measurable 'Welcome Mat' Effects on Their Children." *Health Affairs*. 2017. <https://pubmed.ncbi.nlm.nih.gov/28874493/>; Leighton Ku. "Collateral Damage: Children Can Lose Coverage When Their Parents Lose Health Insurance." Center on Budget and Policy Priorities. September 2007. <https://www.cbpp.org/research/collateral-damage-children-can-lose-coverage-when-their-parents-lose-health-insurance>
22. Georgetown University Center for Children and Families. Unwinding the Public Health Emergency. 2024. <https://ccf.georgetown.edu/subtopic/unwinding-phe/>
23. DeVoe JE, Krois L, Edlund T, Smith J, Carlson NE. "Uninsurance among children whose parents are losing Medicaid coverage: Results from a statewide survey of Oregon families." *Health Serv Research*. 2008 Feb;43(1 Pt 2):401-18. doi: 10.1111/j.1475-6773.2007.00764.x. PMID: 18199193; PMCID: PMC2323132.;
24. Michael Kunnican. Fiscal Policy Institute. "A Plan to Maintain Insurance Coverage After OBBBA." February 2026. <https://fiscalpolicy.org/wp-content/uploads/2026/02/2026.02.05-A-Plan-to-Keep-People-Covered.pdf>