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Harmful Republican Megabill Takes Away Health Coverage, Food Assistance, Tax Credits From Millions of Immigrants and Their Families

The harmful Republican megabill[1] imposes massive cuts in food assistance, health coverage, and other supports for people with low incomes[2] and singles out immigrants with *lawful* status and their families for particularly harsh restrictions on assistance. These measures partially pay for the bill's trillions of dollars in tax cuts heavily weighted to the wealthy,[3] as well as its more than $170 billion in additional funding for immigration detention and border enforcement,[4] bolstering a large detention and removal apparatus that is separating families[5] and violating the legal and constitutional rights of many immigrants[6] and others[7] who get swept up by the deportation dragnet.

The Trump Administration and congressional Republicans have used increasingly bombastic language[8] to falsely claim that the anti-immigrant benefits-related cuts are aimed at people without a documented immigration status. The reality is that U.S. federal laws have long barred people without documentation, as well as many with lawful immigration statuses, from accessing these benefits,[9] even though they support these programs by paying federal taxes[10] and work in difficult and important jobs, like home health aides, construction workers, farm workers, and child care workers. And many are business owners who fuel our economy in important ways.[11]

The megabill further narrows eligibility, taking away food assistance and health coverage from even more people with lawful statuses and creating a new, far narrower group who will remain eligible for food assistance through SNAP and health coverage through Medicare, the Affordable Care Act's (ACA) subsidized marketplace plans, Medicaid, and the Children's Health Insurance Program (CHIP). This new narrow group includes only:

- Citizens and nationals of the United States;
- Lawful permanent residents (LPRs, also known as green card holders);
- Cuban-Haitian entrants, who meet specific criteria as defined in the Refugee Education Assistance Act of 1980;[12] and

- People from the Federated States of Micronesia, Republic of the Marshall Islands, or Republic of Palau who live and work in the United States under Compacts of Free Association (COFA), often referred to as COFA migrants.

This leaves out most categories of lawful immigration statuses, such as people granted humanitarian protections, including refugees, people granted asylum, and certain victims of domestic violence or labor or sex trafficking, among others living lawfully in the U.S. Limiting eligibility in this way reflects a stark departure from our country's long-standing, bipartisan commitment to people fleeing violence and persecution. (For a timeline of when these anti-immigrant megabill provisions go into effect, see Table 2 at the end of this paper.)

Alongside these changes, the Trump Administration is making the process to obtain LPR status, one of the few statuses eligible for federal food assistance and health coverage programs post-megabill, increasingly challenging for those limited groups that have such a pathway, including refugees and those granted asylum. Not only did the megabill significantly increase the fees for many immigration applications, including certain applications to adjust to LPR status, but U.S. Citizenship and Immigration Services (USCIS) is also heightening its scrutiny of immigrants who apply for benefits, including assessing applicants for vaguely defined "anti-American" activity.[13] This is on top of existing barriers for many seeking to adjust to LPR status, as well as more recent actions pausing all pending asylum adjudications, requiring officers to re-review all approved immigration petitions and applications for people from certain so-called "high risk" countries, and placing a hold on pending immigration benefit requests for people from those countries.[14] As a result, many people who have historically had clear pathways to obtaining LPR status may now find multiple barriers, as the Administration continues to block lawful immigration through a variety of actions.

> Together, all of these changes will leave people more hungry, less healthy, less able to buy food for their children (who are often U.S. citizens), and less able to contribute to their communities.

Other recent administrative actions aimed at creating fear, confusion, and red tape are likely to discourage people who remain eligible and need assistance from accessing benefits or otherwise obstruct their ability to do so. Agencies have shared personal data collected on benefit applications and tax forms with the Department of Homeland Security for immigration enforcement purposes;[15] engaged in efforts to restrict access to vital services that, for decades, both Republican and Democratic administrations have interpreted as open to eligible members of the public regardless of immigration status;[16] and taken action to re-verify eligibility based on citizenship and immigration status for benefits like Medicaid.[17] Further exacerbating the chill causing people to forgo benefits, the Administration has issued a proposed rule that would rescind the current regulations governing whether someone is likely to become a "public charge" — an effort to maximize immigration officers' discretion to deny applications to adjust to LPR status if they believe an applicant could become dependent on the government for subsistence.[18] Many people who remain eligible, like people with LPR status, should not face a public

charge determination. But the fear sown by the proposed rule will create a chilling effect for families that include immigrants, something that was well documented when the first Trump Administration tried to radically change the public charge criteria.

Together, all of these changes will leave people more hungry, less healthy, less able to buy food for their children (who are often U.S. citizens), and less able to contribute to their communities.

Republican Megabill Targets People Granted Humanitarian Protections

In 1996, Congress enacted a set of restrictive policies that took away food assistance and health coverage from many people lawfully living in the U.S. Among those whose eligibility the legislation protected, however, were people whose immigration status was granted out of humanitarian concern for their (and their families') well-being and safety.

This group includes refugees, who are fleeing persecution and have been vetted and adjudicated as needing protection before they come to this country. It also includes people who have been granted asylum after proving, while in the U.S., that they would face persecution in their home country. And it includes people who have been granted humanitarian parole (such as Afghans who assisted the U.S. during wartime and would be harmed if they remained in Afghanistan), certain victims of sex or labor trafficking, who help law enforcement bring the perpetrators to justice, and certain victims of domestic violence.

The harmful Republican megabill pointedly reverses our nation's commitment to people who have received humanitarian protection[a] — many of whom have no resources — and denies them the often temporary help they need to get established in the U.S. and provide for their families.

[a] Margot Dankner, "Turning Away From National Commitment, House Bill Takes Away Food Assistance and Health Coverage From People Granted Humanitarian Protections," CBPP, June 6, 2025, https://www.cbpp.org/blog/turning-away-from-national-commitment-house-bill-takes-away-food-assistance-and-health.

Takes Away Health Coverage

The harmful Republican megabill takes away health coverage that millions of immigrants who are living and working lawfully in the U.S. now receive through various sources, including Medicaid, CHIP, the ACA marketplaces, and Medicare.

Medicaid and CHIP

The megabill will result in approximately 100,000 people, including children, becoming uninsured in 2034 due to the elimination of federal Medicaid and CHIP funding for coverage provided to anyone who does not fall into the narrow megabill group, as estimated by the Congressional Budget Office (CBO).[19] Without federal funding, many states will be compelled to end Medicaid and CHIP coverage for people outside of this narrow group when this provision of the megabill goes into effect on October 1, 2026.

People who are undocumented have not been eligible for Medicaid coverage for most of the program's history (and have never been eligible for CHIP, which was enacted in 1997). In addition, for almost 30 years, Medicaid and CHIP have also barred many people with lawful immigration statuses from accessing coverage. A 1996 law created the "qualified" immigrant standard to be used in determining eligibility for these programs. The "qualified" immigrant standard includes a subset of immigration statuses and excludes many people with lawful immigration statuses. Moreover, many people with "qualified" immigration status are only eligible after they have had that status for five years.

The megabill is more draconian than the already restrictive 1996 law, in that it limits federal Medicaid and CHIP funding provided to states to an even narrower group of people. While it does not change who is a "qualified" immigrant under the 1996 law, by ending federal funding for coverage for many who were previously eligible, the megabill leaves states with the difficult decision of retaining coverage with state-only funding or ending coverage for most categories of "qualified" immigrants, including many granted humanitarian protections.[20]

States can continue to provide coverage to those newly ineligible for federal funding and doing so is important for the well-being of refugees and others who need health care. Each state will have to determine whether it will maintain coverage, or not, for groups no longer eligible for federally funded coverage and then identify whether they must take steps to change their laws, regulations, or administrative processes to modify immigration-related eligibility to match their policy decisions. If states choose to end or modify coverage, they will also have to change their application and related systems and processes.

The megabill did not end the state optional programs that allow states to use less restrictive immigration-related eligibility standards to provide Medicaid and/or CHIP coverage for certain children and pregnant adults. States can provide Medicaid and CHIP to children and pregnant adults using the more inclusive "lawfully residing" immigration standard that was established by the Children's Health Insurance Program Reauthorization Act of 2009.[21] Through CHIP, states can also provide prenatal care regardless of immigration status through the "from conception to end of pregnancy" (FCEP) option, established in 2002.[22] However, the approximately 100,000 people estimated to become uninsured will be more likely to delay seeking care and may increase use of emergency room services, experience poorer health outcomes, and be more likely to incur medical debt.[23] These are all reasons that states should retain coverage for those no longer eligible for federally funded coverage, especially because the number of such individuals in any particular state is modest.

Additionally, the megabill significantly reduces the federal matching rate for Medicaid payment of emergency services for people who would be eligible for Medicaid but for their immigration status in states that have adopted the Affordable Care Act's Medicaid expansion. Under long-standing (and still existing) law, if a person receives emergency medical care for life-threatening conditions and meets all Medicaid eligibility requirements (i.e., income, state residency, etc.) except for immigration status, the health providers can get reimbursed by Medicaid. For example, this reimbursement could be for emergency care provided to someone with LPR status who is ineligible for Medicaid because they've had

that status for fewer than five years and are, therefore, ineligible for regular Medicaid coverage. Emergency Medicaid can also be used to pay hospitals when they provide lifesaving medical care to people without a documented immigration status.

Prior to the megabill, when the federal government reimburses states for this limited emergency care, the state reimbursement rate is linked to the matching rate for the category of Medicaid coverage a person would have qualified for if not for their immigration status (i.e., the amount states get from the federal government for providing health services to U.S. citizens). This means when a person would have qualified for coverage under the Medicaid expansion but for their immigration status, the federal government would reimburse the state for 90 percent of the cost of the emergency services provided to that individual (just as these states get for citizens who are eligible for Medicaid through the expansion). The megabill lowers the reimbursement to states for emergency Medicaid services provided to people who would have been eligible under the Medicaid expansion but for their immigration status to the non-expansion federal matching rate (which ranges from 50 to 76.9 percent) instead of the enhanced rate (90 percent) that applies to the Medicaid expansion group, starting on October 1, 2026.

Thus, Medicaid expansion states will be left with higher costs for providing emergency medical services to some adults who do not meet the immigration-related requirements for Medicaid, a group that will grow if states do not opt to provide state-funded coverage to people losing federally funded Medicaid and CHIP coverage due to the megabill's immigration-related federal funding restrictions.

ACA Marketplaces

Approximately 900,000 people will become uninsured by 2034 due to the megabill taking away ACA premium tax credits from many people with lawfully present immigration statuses, including children, according to the CBO.[24] Under current law, people must have a lawfully present immigration status to purchase insurance in the ACA marketplaces and to obtain premium tax credits that help people afford to pay for these plans.[25] The megabill does not change the immigration-related requirement for enrollment in the ACA marketplaces, but it radically restricts which categories of immigrants can get premium tax credits to only the narrow megabill group, starting January 1, 2027. These new restrictions take away this assistance from numerous groups of immigrants who are all living lawfully in the U.S., including people granted asylum; refugees; children who have applied for or received Special Immigrant Juvenile status due to abuse, abandonment, or neglect by one or both parents; temporary protected status (TPS) holders; those granted humanitarian parole (based on a determination that their urgent humanitarian needs cannot be met in their home countries); and certain victims of domestic violence, labor or sex trafficking, and other serious crimes, among others.

The megabill also takes away premium tax credits that help low-income people who are lawfully present but ineligible for Medicaid due to their immigration status buy marketplace coverage. The ACA included a provision that allows people in these groups to qualify for premium tax credits and cost-sharing reductions even if their incomes are below the poverty level (or about $16,000 for an individual); the

megabill ends this eligibility starting January 1, 2026. Approximately 300,000 more people will become uninsured in 2034 as a result of this provision, according to the CBO.[26]

Medicare

Approximately 100,000 people living lawfully in the U.S. will become uninsured by 2034 due to the megabill's new immigration-related eligibility restrictions for in Medicare, based on CBO estimates.[27] Medicare is an earned benefit, meaning that only people who themselves (or whose spouses) have worked in the U.S. for at least 40 quarters — ten years — qualify. Under prior law, people with lawfully present immigration statuses who meet this work history test as well as other program requirements were eligible for Medicare. The new law restricts Medicare to only the narrow megabill group (if they meet all other program requirements). This provision went into effect for new enrollments immediately upon enactment, with an 18-month window (until January 4, 2027) to terminate benefits for impacted individuals who were already enrolled. Groups that will no longer be eligible include refugees; those granted asylum; and certain victims of domestic violence, labor or sex trafficking, and other serious crimes; people with TPS; and other people living lawfully in the U.S. This takes away coverage from people who have paid Medicare taxes for decades.

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Takes Away Food Assistance

The megabill takes away food assistance under the Supplemental Nutrition Assistance Program (SNAP) from most categories of immigrants with "qualified" immigration statuses, including refugees, people approved for asylum, certain immigrants who are victims of domestic violence, and certain victims of labor or sex trafficking, similar to the changes to federally funded Medicaid discussed above. The megabill didn't specify the date this exclusion would take effect, but the U.S. Department of Agriculture (USDA) issued implementation guidance to states on October 31, 2025, indicating that the policy was effective July 4 and states must apply it to new applicants no later than November 1, the day after the guidance was issued. For current recipients, the new guidance applies when they recertify their eligibility, which typically happens every 6 or 12 months.[28] Despite this, some states had already begun terminating benefits for current participants mid-certification period.[29]

People without a documented immigration status are not eligible for SNAP. And many people with lawful immigration statuses are already barred from SNAP due to the 1996 law that created severe immigration-related restrictions for federal means-tested programs. Under that law, only people with "qualified" immigration statuses are eligible for SNAP, many of whom are subject to a five-year waiting period before they can receive benefits, very similar to the restrictions discussed above in Medicaid. The megabill goes much further, leaving only the narrow megabill group eligible for SNAP. All other "qualified" immigrants are now losing eligibility for SNAP.

In 2023, according to program data, 434,000 refugees, people granted asylum, and individuals granted withholding of removal[30] — people who fled their homes seeking safety from persecution and violence and have been heavily vetted by the U.S. government to be granted this humanitarian relief — received SNAP. Roughly 105,000 of these individuals were children and 58,000 were older adults (60 or older) or adults (18-59) who had a disability.[31] (See Table 1.)

Additionally, we estimate that more than 209,000 other eligible immigrants who were not LPRs — the majority of whom will no longer be eligible for SNAP — participated in the program in 2023.[32] Of these other eligible immigrants, 64,000 were children and 44,000 were adults 60 or older or who had a disability. (See Table 1.) These other immigrants include certain victims of domestic violence (as well as their children and parents) and certain victims of labor or sex trafficking.

In addition to the direct harm to immigrants who are losing SNAP eligibility, this provision also impacts U.S. citizen children who live with them. While these U.S. citizen children generally remain eligible for SNAP, excluding their immigrant household members means the family will receive a dramatically reduced benefit level that will not allow them to afford the groceries they need. In total, we estimate that in fiscal year 2023, about 98,000 U.S. citizen children lived in SNAP households with immigrants, most of whom are no longer eligible for SNAP. (See Table 1.)

TABLE 1

SNAP Eligibility Restrictions for Immigrants Lawfully in the U.S. Would Take Food Away From Children, Seniors, and People With Disabilities

Fiscal year 2023 participation	All SNAP participants in this category	Children	Adults who are elderly or disabled	U.S. citizen children in household
SNAP participants admitted as refugees, granted asylum, or granted withholding of removal	434,000	105,000	58,000	36,000
SNAP participants with other eligible immigration statuses, excluding lawful permanent residents*	209,000	64,000	44,000	62,000
Total	643,000	169,000	101,000	98,000

*Cuban-Haitian entrants, who remain eligible for SNAP under the final version of the harmful Republican megabill, are included in this data.

Note: Figures are rounded to the nearest 1,000 and may not sum to totals due to rounding. "Elderly" refers to adults aged 60 and older.

Source: CBPP analysis of SNAP quality control data for fiscal year 2023

The provision of the megabill restricting immigrant SNAP eligibility will result in 90,000 people losing SNAP eligibility during an average month between 2026 and 2034, according to CBO estimates.[33] We estimate that more than 20,000 of these will be children. While CBO does not explain their methodology

in detail, it's likely that their estimates show that fewer people will be harmed compared to the 2023 administrative data for a variety of reasons. CBO may have assumed fewer people will be granted humanitarian-related immigration statuses due to the Administration's policies. They may have also assumed that people who already have humanitarian immigration statuses with a pathway to lawful permanent residency, such as refugees and those granted asylum, would complete the process to adjust their status to become LPRs (and therefore will be included in the new narrow megabill group). If CBO made this assumption, they may not have factored in various potential barriers to adjustment including increased application costs, potential for longer waiting times, new policies that heighten scrutiny of these applications, and the growing fear among immigrants to interact with the government.

As in Medicaid, states should consider providing state-funded food assistance to those made ineligible by the megabill.

Takes Away the Child Tax Credit

The megabill terminates Child Tax Credit eligibility for children who do not have at least one parent with a Social Security number (SSN) beginning this tax year (2025). One estimate projects that roughly 2.7 million children may fall within this category.[34]

A 2017 tax law had already taken away the Child Tax Credit from up to 1 million children because they do not have an SSN. [35] Now the megabill goes even further in harming children by requiring that at least one parent must also have an SSN. Taking the credit away from these children means that they will lose out on a credit that helps support their healthy development. Many studies of tax credits similar to the Child Tax Credit for families with children find evidence these credits improve health and educational outcomes during childhood and increase educational attainment, employment, and earnings in young adulthood.[36] Most of the children losing the credit are U.S. citizens.

While the children losing the Child Tax Credit will be eligible for the non-refundable $500 Credit for Other Dependents, this credit is much smaller than the Child Tax Credit, and families with low incomes who do not have federal income tax liability don't receive any of its benefit.

The megabill also includes a number of other anti-immigrant tax provisions. It imposes a 1 percent tax on some forms of remittances sent abroad by immigrants; it requires an SSN to claim certain new tax incentives in the bill, such as the "no tax on tips"; and it denies two tax credits for higher education – the American Opportunity Tax Credit and the Lifelong Learning Credit – to people without an SSN. These unprecedented restrictions on tax code benefits based solely on a person's immigration status create a higher effective tax rate for people who are following the law and filing their taxes using an Individual Taxpayer Identification Number (ITIN).

TABLE 2

Timeline of Anti-Immigrant Megabill Provisions Related to Health Coverage, Food Assistance, and Tax Credits

	Provision	Effective date
2025	**Child Tax Credit is taken away from children who do not have at least one parent with an SSN.** Section 70104	**Applies to taxable years beginning Jan. 1, 2025**
	Medicare is taken away from people in almost all lawful immigration status categories; eligibility is restricted to the narrow megabill group.* Section 71201 *Note: Benefits for impacted individuals already enrolled will be terminated as of 18 months after date of enactment (Jan 4, 2027).*	**Eligibility changes effective upon enactment (July 4, 2025)**
	SNAP is taken away from people in all qualified immigration status categories outside of the narrow megabill group. Section 10108 *Note: Eligibility changes will go into effect for current enrollees at the time of recertification.*	**Nov. 1, 2025****
2026	**Affordable Care Act premium tax credit eligibility is taken away from low-income people with lawfully present immigration statuses (people with incomes below the poverty level).** Section 71302	**Applies to taxable years beginning Jan. 1, 2026**
	States lose federal funding for Medicaid and CHIP coverage for people in all qualified immigration status categories outside of the narrow megabill group. Section 71109	**Oct. 1, 2026**
	Federal matching rate is significantly reduced for Medicaid for payment of emergency services provided to adults ineligible for the Medicaid expansion due to their immigration status. Section 71110	**Oct. 1, 2026**
2027	**Affordable Care Act premium tax credit eligibility is taken away from people in almost all lawfully present immigration statuses outside of the narrow megabill group.** Section 71301	**Applies to taxable years beginning Jan. 1, 2027**

* The narrow megabill group only includes:
  - Citizens of the United States;
  - Lawful permanent residents (LPRs, also known as green card holders);
  - Cuban-Haitian entrants, who meet specific criteria as defined in the Refugee Education Assistance Act of 1980; and
  - People from the Federated States of Micronesia, Republic of the Marshall Islands, or Republic of Palau who live and work in the United States under Compacts of Free Association (COFA), often referred to as COFA migrants.

** Per implementation guidance. See Food and Nutrition Service, U.S. Department of Agriculture, "Supplemental Nutrition Assistance Program (SNAP) Implementation of the One Big Beautiful Bill Act of 2025 – Alien SNAP Eligibility," October 31, 2025, https://fns-prod.azureedge.us/sites/default/files/resource-files/OBBB-Implementation-Memo-Alien-SNAP-Eligibility-Oct31.pdf.

[1] The bill, inaptly named the "One Big Beautiful Bill Act," was signed into law on July 4, 2025.

[2] CBPP, "By the Numbers: Republican Reconciliation Law Takes Health Coverage Away From Millions of People and Raises Families' Health Care Costs," updated July 25, 2025, https://www.cbpp.org/research/health/by-the-numbers-republican-reconciliation-law-will-take-health-coverage-away-from; CBPP, "By the Numbers: Harmful Republican Megabill Takes Food Assistance Away From Millions of People," July 30, 2025, https://www.cbpp.org/research/food-assistance/by-the-numbers-harmful-republican-megabill-takes-food-assistance-away-from.

[3] Sharon Parrott, "Republican Bill Will Raise Costs, Poverty, and Hunger, Take Health Coverage Away From Millions," CBPP, July 3, 2025, https://www.cbpp.org/press/statements/republican-bill-will-raise-costs-poverty-and-hunger-take-health-coverage-away-from; CBPP, "By the Numbers: Harmful Republican Megabill Favors the Wealthy and Leaves Millions of Working Families Behind," August 1, 2025, https://www.cbpp.org/research/federal-tax/by-the-numbers-harmful-republican-megabill-favors-the-wealthy-and-leaves.

[4] American Immigration Council, "What's in the Big Beautiful Bill? Immigration and Border Security Unpacked," July 14, 2025, https://www.americanimmigrationcouncil.org/fact-sheet/big-beautiful-bill-immigration-border-security/.

[5] Diana Fishbein, "ICE's family separations are forcing children to parent themselves," The Hill, August 8, 2025, https://thehill.com/opinion/immigration/5441487-ice-raids-trauma-children/.

[6] Kyle Cheney and Myah Ward, "Trump's new detention policy targets millions of immigrants. Judges keep saying it's illegal," Politico, September 20, 2025, https://www.politico.com/news/2025/09/20/ice-detention-immigration-policy-00573850.

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[8] House Committee on Energy and Commerce, "Chairmen Guthrie, Smith, and Arrington Issue Joint Statement on CBO Confirmation of Democrat-led Cover-up of Widespread Fraud and Abuse in Federal Health Programs," September 2, 2025, https://energycommerce.house.gov/posts/chairmen-guthrie-smith-and-arrington-issue-joint-statement-on-cbo-confirmation-of-democrat-led-cover-up-of-widespread-fraud-and-abuse-in-federal-health-programs.

[9] Abigail Kolker, "Unauthorized Immigrants' Eligibility for Federal and State Benefits: Overview and Resources," Congressional Research Service, November 29, 2022, https://www.congress.gov/crs-product/R47318.

[10] Tax Policy Center, Urban Institute & Brookings Institution, "Fiscal Facts: Yes, Undocumented Immigrants Pay Taxes- and Receive Few Tax Benefits," December 17, 2024, https://taxpolicycenter.org/fiscal-facts/yes-undocumented-immigrants-pay-taxes-and-receive-few-tax-benefits.

[11] Economic Policy Institute, "Immigrants Are a Vital Part of America's Future," Immigration Research Initiative, October 3, 2024, https://immresearch.org/publications/states/.

[12] Section 501(e) of the Refugee Education Assistance Act of 1980, P.L. 96–422.

[13] USCIS, "USCIS to Consider Anti-Americanism in Immigrant Benefit Requests," August 19, 2025, https://www.uscis.gov/newsroom/news-releases/uscis-to-consider-anti-americanism-in-immigrant-benefit-requests; USCIS, "USCIS Continues to Put the Safety of Americans First by Reestablishing Screening and Vetting Standards," August 1, 2025, https://www.uscis.gov/newsroom/news-releases/uscis-continues-to-put-the-safety-of-americans-first-by-reestablishing-screening-and-vetting; USCIS, "USCIS to Enforce Consequences for Aliens

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[16] Margot Dankner, "Trump Administration Seeks to Take Away Head Start, Medical Care, and Other Vital Services From Lawfully Present Immigrants," CBPP, July 16, 2025, https://www.cbpp.org/research/federal-budget/executive-action-watch?item=30181.

[17] Shelby Gonzales, "States Face More Red Tape Due to CMS' Latest Effort to Take Away Health Coverage," CBPP, August 19, 2025, https://www.cbpp.org/research/federal-budget/executive-action-watch?item=30255.

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[20] States could opt for a different level or scope of coverage if they are using state-only dollars and not be bound by all the federal requirements that come in exchange for accepting federal funding for medical assistance. For more information on innovative approaches states have taken to provide affordable coverage, see Claire Heyison and Shelby Gonzales, "States Are Providing Affordable Coverage to People Barred from Certain Health Programs Due to Immigration Status," CBPP, February 1, 2024, https://www.cbpp.org/research/immigration/states-are-providing-affordable-health-coverage-to-people-barred-from-certain.

[21] The Legal Immigrant Children's Health Improvement Act (ICHIA), incorporated into section 214 of the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA), created a state option to provide Medicaid and CHIP coverage to children and pregnant people who are "lawfully residing," meaning that they are "lawfully present" in the U.S. and meet certain Medicaid state residency rules. More information can be found at "'Lawfully Residing' Children and Pregnant Women Eligible for Medicaid and CHIP," National Immigration Law Center, Oct. 1, 2021, https://www.nilc.org/resources/lawfully-residing-medicaid-chip/.

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[23] Allie Gardner, "Medicaid Cuts Would Reduce Access to Health Care for Entire Communities," CBPP, May 6, 2025, https://www.cbpp.org/blog/medicaid-cuts-would-reduce-access-to-health-care-for-entire-communities.

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[27] *Ibid.*

[28] Food and Nutrition Service, U.S. Department of Agriculture, "Supplemental Nutrition Assistance Program (SNAP) Implementation of the One Big Beautiful Bill Act of 2025 – Alien SNAP Eligibility," October 31, 2025, https://fns-prod.azureedge.us/sites/default/files/resource-files/OBBB-Implementation-Memo-Alien-SNAP-Eligibility-Oct31.pdf.

[29] For example, Ohio began identifying and terminating SNAP benefits for all individuals made newly ineligible based on their immigration status before November 1, 2025. See "Food Assistance Change Transmittal No. 106: Changes due to the One Big Beautiful Bill Act of 2025," Ohio Department of Job & Family Services, October 9, 2025, https://dam.assets.ohio.gov/image/upload/jfs.ohio.gov/EBS/Programs%20Rules%20and%20Resources/Food%20Assistance/Food%20Assistance%20Change%20Letters/2025/FACT_106_-_Changes_due_to_the_One_Big_Beautiful_Bill_Act_of_2025.pdf.

[30] The Food and Nutrition Service of the U.S. Department of Agriculture uses the term "stay of deportation" in its "Characteristics of Supplemental Nutrition Assistance Program Households: Fiscal Year 2023" report to refer to individuals granted withholding of removal, a form of relief for individuals ineligible for asylum, but who have demonstrated that they cannot be returned to their home countries due to the high likelihood that they would face persecution. For the purposes of this paper, we will use the term "withholding of removal" in lieu of "stay of deportation."

[31] Food and Nutrition Service, U.S. Department of Agriculture, "Characteristics of Supplemental Nutrition Assistance Households, FY 2023," Table A-23, April 2025, https://fns-prod.azureedge.us/sites/default/files/resource-files/snap-FY23-Characteristics-Report.pdf. The number of children, elderly and disabled adults, and the share of states' SNAP caseload is based on CBPP analysis of 2023 SNAP quality control public use data.

[32] CBPP analysis of SNAP quality control data for fiscal year 2023.

[33] CBO, "Estimated Effects of Public Law 119-21 on Participation and Benefits Under the Supplemental Nutrition Assistance Program," August 11, 2025 (as updated August 13, 2025), https://www.cbo.gov/system/files/2025-08/61367-SNAP.pdf. CBO does not explain their methodology in detail, but their estimates are likely lower than the 2023 actual data because they believe that many refugees will convert to LPR status, fewer new refugees and asylees will be admitted, and a significant number of people will qualify for exemptions as Cuban-Haitian entrants.

[34] This figure overstates the number of children affected by not accounting for families' income but understates the number of children affected by counting only U.S. citizen children. (Children who are lawfully present and have an SSN but who do not have at least one parent with an SSN will also lose eligibility.) Julia Gelatt, November 14, 2025, https://www.linkedin.com/posts/julia-gelatt-86105953_millions-of-us-kids-live-in-mixed-status-activity-7394407282366681090-bHou.

[35] Marco Guzman, "Inclusive Child Tax Credit Reform Would Restore Benefit to 1 Million Young 'Dreamers,'" Institute on Taxation and Economic Policy, April 27, 2021, https://itep.org/inclusive-child-tax-credit-reform-would-restore-benefit-to-1-million-young-dreamers/.

[36] Katherine Michelmore, "Tax Credit and Childhood Outcomes: Lessons from the U.S., U.K., and Canada," NBER, May 2025, https://www.nber.org/papers/w33822.