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July 22, 2025

TO: Supervisor Terra Lawson-Remer, Vice Chair
Supervisor Paloma Aguirre
Supervisor Joel Anderson
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FROM: Ebony N. Shelton
Chief Administrative Officer

REPORT BACK ON POTENTIAL COUNTY IMPACTS RESULTING FROM RECENT FEDERAL AND STATE BUDGET ACTIONS

On June 24, 2025 (9), the Board of Supervisors (Board) directed the Chief Administrative Officer (CAO) to conduct an analysis of the County of San Diego's (County) operational capacity needs in response to proposed federal and state changes, including those changes then under consideration in H.R. 1, more commonly known as the One Big Beautiful Bill Act (OBBBA) or the budget reconciliation package. Specifically, the Board asked the CAO to quantify additional staffing needs that would be necessary to preserve current service levels while absorbing the increased administrative burden anticipated by federal changes. The Board also directed that this analysis should be undertaken in consultation with the Medicaid Ad Hoc Subcommittee to ensure alignment with broader County efforts. In addition, the Board directed the CAO to analyze In-Home Supportive Services provider shortfalls and anticipated service delivery gaps projected to result from proposed state legislative changes including, but not limited to, caps to overtime and travel hours.

This memo provides an initial analysis of County impacts based on current information and a projection of staffing needs presented within the context of ongoing uncertainties. The impacts described below and in the attached chart may change and will need to be adjusted as new information and analyses become available.

We will begin with an overview of H.R. 1 and its anticipated effects on benefits eligibility for County residents as well as County operations and staffing, followed by next steps for the federal and state governments, remaining uncertainties regarding the implementation of H.R. 1, a discussion of proposed In-Home Supportive Services changes, and concluding with an overview of community engagement and next steps as it relates to H.R. 1's impacts.

H.R. 1

On July 4, 2025, President Trump signed H.R. 1 into law, a massive and sweeping piece of legislation that will have profound impacts on our region and on the future of social safety net programs. To fulfill President Trump's top legislative priority of extending significant tax cuts, Congressional leaders were tasked with determining which cuts to make to federal spending in order to offset the $4.2 trillion cost of these permanent tax cuts. H.R. 1 was the resulting legislation, negotiated between senior Republican leaders in the House and Senate. H.R. 1 made extensive changes to social safety net programs such as Medicaid, known as Medi-Cal in California, and the Supplemental Nutrition Assistance Program (SNAP), known as CalFresh in California. Changes to Medicaid and SNAP are anticipated to create new consumer burdens on obtaining access to social benefit programs and will create new administrative burdens on the County to operationalize. Some changes in H.R. 1 include adding work requirements to these programs, increasing the frequency of benefit eligibility screenings, reducing provider payments, and rescinding eligibility for social safety net programs for immigrants with protected status, among other provisions. It is anticipated that these provisions will have a direct impact on San Diego County, not only on County staff, budgets, and operations, but also on local residents who may lose access to public benefits as a result of H.R. 1.

This memo provides an analysis of some of the most significant anticipated impacts of H.R. 1 on the financial and operational aspects of programs administered by the County of San Diego, while also underscoring the many uncertainties that remain as to the implementation of these policy changes and the bill's eventual impact on the region as a whole. While some provisions will go into effect as soon as this fall, others have been delayed until as late as 2028, creating uncertainty as to the number of Medi-Cal and CalFresh beneficiaries who will be affected, and in turn, County operational needs to meet the requirements mandated by H.R. 1.

<u>County Impacts of H.R. 1</u>

The County oversees the administration of both Medi-Cal and CalFresh programs throughout the region. This responsibility is carried out by the County's Self-Sufficiency Services Department (SSS), which is specifically structured, staffed, and funded to manage its current caseload and workload effectively. As a result, SSS consistently delivers timely and responsive customer service to more than 1.2 million San Diegans on an ongoing basis. The projections below regarding the impacts of H.R. 1 are limited to its first year and based on current enrollment numbers. Many effects and specific impacts, including complete workload implications, are not fully known, as the changes enacted by H.R. 1 are more sweeping than any undertaking since the program's inception in 1965. Additionally, it is too early to assess the full caseload or workload impact for the County, as there are currently no federal or state policies, procedures, rules, forms, notices, or automations in place to implement H.R. 1; a clearer understanding will likely take at least 12 months to develop. Additionally, because of the staggered nature of when provisions of H.R. 1 are scheduled to take effect, County departments will continuously assess local impacts and operational needs.

CalFresh: Work Requirements and Redeterminations

Effective upon enactment, H.R. 1 expands work requirements under the CalFresh program to include individuals up to age 64 (the age range was previously those 18 to 54) and removes the work requirement exemption for individuals with children ages 14 and older, individuals experiencing homelessness, veterans, and those who are under 24 and aged out of foster care at 18. Based on current enrollment numbers in San Diego County, an estimated 96,000 individuals will be affected by these changes to Able-Bodied Adults Without Dependents (ABAWD) work requirements. The work requirements may be satisfied by working or volunteering at least 80 hours per month (about 20 hours per week) or participating in a federal, state, or local work program for at least 80 hours per month.

A portion of this population, estimated at 26,000 who meet previous ABAWD definitions, will be subject to work requirements starting February 1, 2026 based on administrative guidance from USDA that was released prior to H.R. 1. Guidance has not yet been released about the enactment date for the remaining 70,000 people now defined as ABAWD under H.R. 1.

Operationalizing the new work requirements mandated under H.R. 1 will require additional administrative functions from the County. The workload impact for the County to conduct these additional eligibility reviews, as well as the increased need to re-enroll individuals who lose their eligibility and re-apply, appeal, or contact the County for eligibility information, is substantial. The number of new full-time equivalents (FTEs) needed to support this work is contingent upon the State's pending decision of how often redeterminations should occur (monthly, quarterly, or semi-annually) and any new statewide systems put into place to help automate verification processes. The State has not yet indicated when it would release guidance on how frequently local governments should verify eligibility. The more frequent the verification requirements, the more staff that may be needed to maintain timely service delivery.

CalFresh: Immigration Eligibility
Upon enactment, H.R. 1 also makes anyone who is not a U.S. citizen, lawful permanent resident, or a specified Cuban and Haitian national ineligible to receive CalFresh benefits. Based on currently enrolled individuals in San Diego County, 13,000 individuals will lose eligibility with this change. It is important to note that any reduction in caseload from this H.R. 1 provision could be offset by affected persons attempting to re-apply, appeal, or calling or visiting one of the County's Family Resource Centers (FRC) or Live Well Centers to request eligibility information. Additionally, any requirement for the County to verify immigration status would increase staff workload.

CalFresh: Cost Sharing
Currently the federal government funds 100% of SNAP benefits. Beginning in October 2027, changes to the CalFresh Benefit Sharing Ratio will require states to share in the cost of these benefits based on their error rates. Error rates measure the accuracy of each state's eligibility and benefit determinations. While some states implement their respective SNAP programs at the state level, California administers CalFresh at the county level, leaving San Diego County subject to the statewide average despite having a relatively lower local error rate. California's payment error rate for FY 2024 was 10.98%. This could mean a 15% benefit share of costs for the State. The State has made no indication of how any cost share will be paid and whether counties will be responsible for a portion. As reference, the County administers $1 billion in CalFresh benefits annually, which would equate to a $150 million cost share at the current error rate.

Additionally, H.R. 1 initiates a change, starting in October 2026, that would reduce the federal government's share of its administrative support for operating the CalFresh program (i.e. enrollment, work verification). The State allocates State General Funds to counties to administer CalFresh. San Diego's allocation supports roughly $211 million in annual administrative costs, of which the federal government currently pays for 50% and the other 50% is split between the State (70%) and the County (30%). Under

H.R. 1, the federal government will reduce its cost-share portion to 25% and increase states' cost-share portion to 75%. With this change, an estimated $52.75 million in federal revenue will be lost that would typically support administrative costs to administer CalFresh in San Diego County. It is unclear if the State will pass on the entire increase in the non-federal share to San Diego County ($52.75 million) or if the State will maintain the current 70/30 cost-sharing split, which would result in a cost increase of approximately $15.8 million. To cover the loss of federal revenue, service reductions would need to be made elsewhere in the County or total expenditures would need to be reduced for CalFresh, which would impact overall client service delivery and the County's ability to enroll people in a timely manner.

CalFresh: Other Provisions
The SNAP-Ed Program, which is known as CalFresh Healthy Living in California, supports various nutrition and healthy-lifestyle programs throughout the county, such as community gardens and nutrition classes for families and older adults, and will be eliminated with H.R. 1 starting October 2025. This change is expected to impact tens of thousands of low-income individuals, including people who are eligible for CalFresh food benefits.

H.R. 1 also includes various provisions that will make it more difficult for individuals to be eligible for CalFresh and could also reduce recipients' monthly allotment amount. These provisions include what utility expenses are allowed in the CalFresh benefit determination and changes to the Thrifty Food Plan, which establishes the minimum and maximum benefit allotment amounts for recipients. The number of potentially impacted beneficiaries remains unknown at this time.

Medi-Cal: Work Requirements and Redeterminations
Before H.R. 1, there were no federal work requirements for Medicaid, but states could apply for a waiver to implement work requirements. Georgia is the only state with an active waiver in place which was implemented in 2023. Beginning in January 2027, under H.R. 1, new Medicaid work requirements will require adults ages 19–64 to meet one of several conditions to receive benefits, such as enrolling in school at least half-time, earning monthly income equal to 80 hours at the federal minimum wage of $7.25 (or $580 per month), or completing 80 hours per month of work, community service, or similar activities. The County projects that 327,000 current recipients could be subject to these new requirements based on current enrollment.

H.R.1 also changes income verification requirements for the Medicaid expansion population from annually to every six months. The expanded Medicaid population includes adults ages 18 to 64 with incomes up to 138% of the Federal Poverty Level ($21,597 for an individual in 2025). Individuals receiving Supplemental Security Income (SSI) are exempt from this provision. The County anticipates that 130,000 of the 526,000 annual renewals currently processed by SSS would be subject to the twice-annual redeterminations.

The County anticipates the workload impact to conduct these additional eligibility reviews, as well as the increased need to re-enroll individuals who lose their eligibility and re-apply, appeal, or contact the County for eligibility information, is substantial. It is also assumed that some portion of currently covered individuals will not be able to meet new requirements and will lose access to services. Additionally, there is concern that an increase in the percentage of individuals who are uninsured in the County will lead to an increased financial burden on hospitals, health systems, and Federal Qualified Health Centers (FQHCs).

Medi-Cal: Immigration Eligibility
Effective October 2026, Medicaid eligibility will be limited to U.S. citizens, lawful permanent residents after a 5-year waiting period, and specified Cuban and Haitian nationals. This provision is estimated to potentially impact 75,000 individuals in the County who would lose their eligibility. It is important to note that reductions in caseload from this H.R. 1 provision could be offset by affected people attempting to reapply, appeal, or calling or visiting one of the County's FRCs and Live Well Centers to request eligibility information.

An additional consideration is the impact of State budget provisions that freeze enrollment for individuals ages 19 and older with Unsatisfactory Immigration Status (UIS) effective January 2026 and require co-payments for individuals with UIS who are already enrolled prior to the freeze effective July 2027. Of the 75,000 individuals impacted by the federal changes, there are currently 58,000 individuals who meet the definition of UIS in the County and would be impacted by these state changes. Any workload reduction from not enrolling new individuals with UIS may be offset by the administrative demands of individuals cycling on and off the program due to nonpayment of premiums (within the three-month reenrollment grace period) and those who appeal a denial.

Medi-Cal: Other Provisions
Effective October 2028 under H.R. 1, states will be required to charge the Medicaid expansion population (defined as adults ages 18 to 64 with incomes up to 138% of the Federal Poverty Level) a co-pay of more than $0 but no more than $35 per service with behavioral health, prenatal, pediatric, primary, and emergency room services being exempt. This modification could result in access to care issues for individuals who are unable to pay the co-pay and could also create provider payment or reimbursement issues.

Current law also allows states to offer 90 days of retroactive Medicaid coverage for new enrollees. Beginning in 2027, H.R. 1 would reduce retroactive coverage to one month prior to application for Medicaid and the Children's Health Insurance Program (CHIP) expansion individuals and to two months for the traditional Medicaid population. If time of application for new Medi-Cal enrollees is longer than the new retroactive coverage, the County could begin to incur unfunded costs for new Medi-Cal recipients (for which we currently receive retroactive payment) barring any future policy changes. A broader concern for the entire region is that shortened retroactive Medi-Cal coverage would also reduce reimbursements for emergency departments, hospitals, FQHCs, and other safety-net providers. This has the potential to increase medical debt for individuals in San Diego who are billed for costly services received before their Medi-Cal enrollment is finalized.

Additionally, many states impose provider taxes on Medicaid health providers in order to finance the state's portion of its non-federal cost share for Medicaid services. In California, this is referred to as a Managed Care Organization (MCO) tax. Beginning in October 2027, adjustments to California's MCO tax under H.R. 1 will reduce California's ability to come up with its share of costs to finance Medicaid services and will therefore shift an additional cost burden onto the State's General Fund. While the County does not receive direct provider tax funds, the anticipated reduction in State General Fund support could indirectly impact the County, including lowering reimbursement rates for Medi-Cal providers providing medical and behavioral health services.

Another projected consequence for the San Diego region is that increases in the number of uninsured individuals resulting from these provisions may lead to a rise in visits to County facilities, including Public Health Centers and the San Diego County Psychiatric Hospital, uncompensated emergency department visits and hospital admissions, increased disease rates and severity of conditions, reduced workforce participation, a potential rise in homelessness, and increased fiscal frailty and layoffs within the local healthcare system.

Recruitment, Training, and Retention
The provisions of H.R. 1 will significantly increase the County's administrative workload and operational responsibilities as we seek to provide continued access to essential services for San Diegans. County staff will need to manage a range of additional tasks, including initial eligibility determinations and ongoing redeterminations; verification of work requirements; supporting connections to work, education, and volunteer opportunities; responding to public inquiries about policy changes resulting from H.R. 1; and updating internal policies and procedures in accordance with federal and state guidance. Without substantial federal or state funding to support the automation of some or all of these tasks, all eligibility-related transactions would need to be processed manually, requiring comprehensive training for both current and newly hired staff to ensure successful implementation. As H.R. 1 requirements take effect, County staff will need to take on additional tasks associated with the need to support and coordinate with contracted partners and other County departments and programs to ensure compliance with new laws and regulations.

In order for SSS to maintain services levels and prevent delays in processing applications, that department may need to recruit, hire, and train hundreds of new staff using a phased approach that coincides with H.R. 1's various implementation dates detailed in this memo. The County would have to implement an aggressive outreach, recruitment, and hiring campaign. Over the past five years, SSS has implemented an innovative same-day hiring process. SSS already has an extensive, 12-week new employee onboarding training with an additional three months of initial post-training support with a reduced caseload for staff. It is worth noting that at this time it remains unclear how many individuals may choose not to seek services or would lose eligibility as a result of the proposed changes, which would influence the number of FTEs needed over time.

Next Steps for the State and Federal Government
While H.R. 1 has been described as a budget bill, it is not formally part of the annual budget process that Congress undertakes each year. Now that the budget reconciliation package has passed, Congress will resume its process of holding committee hearings to establish annual appropriations and must ultimately pass a budget to fund the federal government by the end of the current fiscal year on September 30, 2025. Earlier this year, the White House published its budget priorities document that proposed significant cuts to many parts of the federal government. Historically, White House budgets are indicators of a "wish list" of priority areas for the Executive Branch; however, Congress is under no obligation to implement these priorities and often ignore these proposals. If Congress is unable to pass its series of bills to fund the government by September 30, it must pass another continuing resolution (CR) to prevent a federal government shutdown. In any scenario, it is possible that Congress could enact additional cuts to federal

programs through the appropriations process, the coming fiscal year's budget, a rescissions package, or another reconciliation bill. Currently, each chamber's respective Appropriations Committees are drafting and passing what are considered the less "controversial" funding bills that do not address social safety net programs. The expectation is that Congress will not consider those bills until after Congress returns from its August recess on September 2.

While Congress crafts a federal budget that reflects its priorities, the California State Legislature must decide how to proceed with its budget in light of new federal cost-share requirements for states and less federal funding available for the social programs the state administers. The State Legislature passed its Enacted Budget for FY 2025-26 on its statutory deadline of June 30, 2025, just days before H.R. 1 was signed into law. While the Enacted Budget does not account for specific provisions contained in the reconciliation bill, the State is pursuing an interim strategy to address cuts to federal programs by allowing the Director of the State Department of Finance to reduce any item of appropriation while the Legislature considers next steps. The State Legislature may decide to convene a special session to pass additional budget-related legislation that accounts for the added duties on states as part of H.R. 1 or wait until the FY 2026-27 budget process to make changes to state appropriations. However the State proceeds, the extent to which increased state costs will fall on local governments remains highly uncertain. Additionally, how local jurisdictions are to implement or update guidelines for providing social services based on the requirements of H.R. 1 is still uncertain because it depends on state guidance that has yet to be determined.

Uncertainties Remain

While this memo outlines several projected impacts that H.R. 1 will have on the County's operations, staffing, and finances, many uncertainties remain as to the full scope of the bill's local impacts—not only for County operations, but for the ability of County residents to access medical care and food assistance. For example, estimates of the bill's impact on Medi-Cal and CalFresh eligibility are based on the current number of enrollees and not on the number that will ultimately be impacted when various provisions of the law go into effect between 2025 and 2028. Beyond the number of people who will lose eligibility for these social benefits, it is infeasible to estimate the number of people who will lose Medi-Cal or CalFresh coverage due to their inability to provide documentation that verifies their eligibility. The requirements put into place by H.R.1 represent the most significant changes to safety net programs since their inception, so determining the exact impacts is not feasible at this time.

Adding to the uncertainty, some provisions of the bill, such as requiring able-bodied SNAP beneficiaries ages 18 to 65 to work, take effect upon enactment, putting the onus on the implementing federal agency to develop guidance and determine that provision's effective date. The bill will also, for the first time in history, require states to contribute a share of funding for SNAP benefits based on the states' overall error rates (despite the fact that counties administer SNAP benefits in many states, including California). States are still awaiting specific guidance from the federal government as to how much of a cost-share they will need to contribute for SNAP, adding to the uncertainty for not only states, but local jurisdictions that rely on ever-constrained state funding. More broadly, it is unknown whether the State of California will take additional actions to backfill lost funding from previously federally funded revenue streams, or to what extent these costs will be passed on to local jurisdictions. Other potential factors, ranging from subsequent legislation to potential federal lawsuits, could further hamper or delay implementation of various individual provisions of the bill.

Additionally, it is unknown whether the sweeping tax provisions in H.R. 1 will trigger across-the-board cuts to eligible mandatory programs, a process known as sequestration. Because the reconciliation bill adds $3.3 trillion to the federal deficit, the Office of Management and Budget must initiate sequestration cuts to account for the size of the deficit increase unless Congress acts to waive these requirements. Congress has several months (until the end of the current Congressional session) to waive these requirements through legislation that will likely require bipartisan support due to the filibuster in the Senate. In the absence of Congressional action, sequestration cuts of 4% would apply to Medicare, amounting to nearly $500 million in cuts over the next decade. Additional cuts could be made to the Social Services Block Grant, the Promoting Safe and Stable Families program, and the Maternal, Infant, and Early Childhood Home Visiting program through 2034.

Proposed State Changes to IHSS
The Board also directed staff to analyze the impacts of projected In-Home Supportive Services (IHSS) shortfalls and service gaps resulting from Governor Newsom's proposal to cap overtime and travel hours for IHSS providers.

The IHSS program provides assistance and services to eligible older or disabled individuals to help them remain safely in their homes. The Governor's May Revision Budget had proposed state-level policy changes, including caps on provider hours and immigration-related eligibility restrictions. Specifically, the proposals to cap IHSS provider hours for overtime at 50 hours per week and the elimination of IHSS benefits for those with unsatisfactory immigration status currently on Medi-Cal were of most concern for the County. These proposals were removed from the State's FY 2025-26 Enacted Budget as part of a budget agreement that was signed into law on June 30, 2025. Additionally, the May Revision proposal to reinstate the asset limit for IHSS at $2,000 per individual and $3,000 for couples, which would have significantly reduced access to these services, was modified to reinstate it at the 2022 levels of $130,000 per individual and $195,000 per couple. As a result of all of these actions, the anticipated provider shortfalls and service-delivery gaps that were projected to result from proposed state legislative changes will not materialize at this time.

It is important to note that since IHSS recipients are covered by Medi-Cal, the federal changes outlined above for Medi-Cal will also impact IHSS recipients. More frequent Medi-Cal eligibility redeterminations could lead to a rise in changes to IHSS eligibility and stricter Medi-Cal eligibility criteria could consequently lead to a decline in eligible IHSS recipients.

Community Engagement
Community engagement is at the core of the County's General Management System, emphasizing the need to build trust and meaningfully provide access in the County's approach to planning and decision making. Robust community engagement will be conducted prior to reporting back to the Board in September. County departments, including SSS, are structured and staffed to provide timely, person-centered, and culturally responsive services to the public. Based on its current operating caseload, SSS alone provides ongoing customer service to more than 1.2 million County residents. The staffing needs analysis contained in this memo focuses on maintaining current timely processing performance and maximizing enrollment in benefits such as Medi-Cal and CalFresh, in addition to the need to thoroughly train current and new staff to ensure accuracy and the best possible experience for the customers we serve.

Government transparency is also a critical component of building public trust and keeping the community informed. County staff will report back to the Board on September 30, 2025, with a comprehensive strategy to address the most severe impacts of federal cuts, including options to sustain key programs as directed by the Board on June 24, providing an additional opportunity for public input. Given the speed at which new federal developments occur, County staff will also report back to the Board as new information becomes available on how cuts to federal programs and State actions will affect County operations and the residents we serve. If you have questions, please contact Director of Economic Development and Government Affairs, Matthew Parr, at (619) 372-2126.

Respectfully,

EBONY N. SHELTON
Chief Administrative Officer

Attachment A – Initial Assessment of Enterprise-Wide County Impacts of H.R. 1

cc: Caroline Smith, ACAO
Brian Albright, DCAO, Finance and General Government
Kimberly Giardina, DCAO, Health and Human Services Agency
Dahvia Lynch, DCAO, Land Use & Environment
Andrew Strong, DCAO, Public Safety Group
Susan Brazeau, Director, Department of Human Resources
Joan Bracci, Chief Financial Officer
Claudia Silva, County Counsel
Andrew Potter, Clerk of the Board of Supervisors

Initial Assessment of Enterprise-Wide County Impacts of H.R. 1

AGRICULTURE AND NUTRITION	Current law	Bill Provision	Implementation Date	Group Impacted	Operational Impacts (e.g. policy, administration)	Fiscal Impacts (e.g. staffing needs, added costs)	Other Considerations (If applicable, can include next steps)
SNAP Work Requirement	Current law requires able bodied SNAP recipients between 18 and 60 to perform work, volunteer service, or certain educational/technical development.	Requires able bodied SNAP beneficiaries between 18 and 65 to work. Provides an exception for adults of dependent children under 14 years of age, pregnant women, and others. Exempts Alaska and Hawaii.	Upon Enactment	HHSA	The workload impact for San Diego County will be conducting additional reviews of potentially 96,000 individuals per year, which is currently not required. It is anticipated that many of these individuals will lose their CalFresh eligibility, due to not meeting the work requirement, and may re-apply for the program later in the year. • Based on past experience when Able-Bodied Adults Without Dependents (ABAWD) waivers were not in place, reviews were required monthly. • If we continue to assume monthly reviews, it is estimated an additional 426 FTEs would be needed to maintain current performance metrics. If the reviews are semi-annual, this would drop the estimated FTEs needed considerably.	Additional staffing needs would be as follows: • 71 FTEs assuming semi-annual reporting; OR • 142 FTEs assuming quarterly reporting; OR • 213 FTEs assuming bi-monthly reporting; OR •426 FTEs assuming monthly reporting **$4.6M -$27.8M** • Range depends on staffing requirements as described above. • Assumes 25% federal share offset. • County share would be reduced if the State provides additional funding.	• State automation could reduce need considerably. • The first year would require reviewing all potentially impacted cases to see who was eligible for exemptions. The ongoing caseload subject to work requirements could reduce which would lower the FTE need.

SNAP State Matching Requirement	Currently, the federal government funds 100% of SNAP benefits.	Beginning in FY 2028, will impose the following state share requirements on SNAP benefits. States with SNAP error rates under 6% will pay 0%. States with error rates between 6% and 8% shall pay 5%. States with error rates between 8% and 10% will pay 10%. States with error rates over 10% will pay 15%. States error rates above 13.3% in 2025 or 2026 will get an extra year or two to implement.	October 1, 2027 (FY 2028) - states may choose their Payment Error Rate (PER) from FY 2025 or FY 2026. FY 2029 on - PER from 3 fiscal years prior will inform cost share. States with a SNAP PER above 73.3% in FY 2025 and/or FY 2026 can delay implementation of the cost-share until FY 2029 or FY 2030, respectively.	HHSA	Unknown	California's payment error rate for FY 2024 was 10.98%. In the future, that could mean a 15% benefit share of costs for the State. San Diego County administers $1B of CalFresh benefits annually which would equate to a $150M share of cost. It is not clear how the State would fund the increased share and whether any costs would be passed down to counties. • If CA's error rate improves in FY 2025 or 2026 to less than 6%, there would be no increase to the sharing ration for FY 2028 implementation.	• Currently, San Diego County's error rate is at 10%. • California's error rate in FY 2023 was 13.4% and decreased to 10.98% in FY 2024.
SNAP Administrative Cost Split	Currently the federal government and the non-federal administrators (states and/or counties) split the SNAP administrative costs pertaining to enrollment, work verification, and related functions under at a 50/50 split.	Beginning in FY 2027, USDA will alter the split so the federal share is 25% and the non-federal share is 75%.	October 1, 2026	HHSA	To the extent funding is not available to cover the loss of federal revenue, service reductions would need to be made elsewhere in the County or total expenditures would need to be reduced for CalFresh which would impact overall client service delivery and the County's ability to enroll people timely.	An estimated $52.75 million in federal revenue will be lost that would typically support administrative costs to administer CalFresh in San Diego County. It is unclear if the State will pass on the entire increase in the non-federal share to San Diego County ($52.75 million) or if the State will maintain the current 70/30 cost-sharing split, which would result in a cost increase of approximately $15.8 million.	

SNAP Prohibition on Certain Immigrants		Beginning upon enactment, no individual will be eligible for SNAP benefits who is not a United States citizen, national, permanent resident, or certain Cuban, Haitian, or Compacts of Free Association (COFA) immigrants.	Upon Enactment	HHSA	In San Diego County, based upon currently enrolled individuals, it is estimated that 13,000 persons could lose eligibility. Any reduction in caseload from this H.R. 1 provision would likely be offset by persons attempting to re-apply, appeal, calling, or visiting a Family Resource Center/Live Well Center.	N/A	
SNAP-Ed		This program has been eliminated.	October 1, 2025	HHSA	• The funding supports various CalFresh Healthy Living programs in Public Health Services (PHS) (via the CA Department of Public Health), Aging and Independence Services (AIS) and the Department of Strategy and Community Engagement (DSCE) (via the CA Department of Aging). • We anticipate potential staffing and contract impacts, which we are still working to understand and determine which aspects we may be able to mitigate.	• The initial staff estimate for the County impact is approximately $5.3M ($4.6M in PHS and $600K within AIS and DSCE).	**PHS** The CalFresh Healthy Living (CFHL) program aims to support healthy, active, and nourished lifestyles by teaching low-income Californians about good nutrition and how to stretch their food dollars, while also building partnerships in communities to make the healthy choice, the easy choice. Includes built enviroment and active transportation work, work with supporting local food production, food security and access, etc. **AIS** Project work includes nutrition classes, Tai Chi classes, and working with the nutrition class cohorts on Policy, System, and Environmental (PSE) community improvements, including many community gardens. Work is hosted at a variety of community sites including tribal, rural, and sites in urban low-income neighborhoods. Hundreds of community members are involved each year.

Thrifty Food Plan Reevaluation	The Thrifty Food Plan is the baseline that USDA Food and Nutrition Services utilizes in order to determine the dollar amount for SNAP benefit amount calculations. The Plan was updated for the first time in decades during the Biden Administration and resulted in a benefit increase for most SNAP recipients.	Requires all future updates to the Thrifty Food Plan (TFP) be cost-neutral and adjusts for inflation going forward. Bill also prevents any reevaluation of the Plan before FY 2028.	Upon Enactment	HHSA	Unknown	No additional costs beyond the cost-share, but rather this means benefit value will not keep up with inflation	H.R. 1 also includes various provisions that will make it more difficult for individuals to be eligible to SNAP that will or could also potentially reduce the monthly allotment amount. These provisions include what allowable utility expenses are allowed in the CalFresh budget, and changes to the Thrifty Food Plan which establishes the minimum and maximum benefit allotment amounts for recipients. The number of potentially impacted beneficiaries is unknown.
MEDICAID	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**

Income verification frequency	Under current law, states must review Medicaid beneficiaries' income on an annual basis to ensure eligibility.	Beginning in 2027, the bill would require income verification of Medicaid members every six months.	January 1, 2027	HHSA	It is estimated that 130,000 of the 526,000 annual renewals for cases Self Sufficiency Services (SSS) currently processes would be subject to twice-annual redeterminations. • It is estimated that 48 additional FTEs would be needed to process the additional redeterminations. • A percentage of the impacted Medi-Cal population will lose Medi-Cal eligibility due to not responding to the twice per year reporting requirement. • Many of the individuals will likely re-apply for Medi-Cal during the same year. • Potential increase in utilization of Public Health Center Services by a growing uninsured population, including those non-citizens who were previously covered under Medi-Cal.	48 FTEs **$4.2M in SSS staffing costs** Assumes no additional federal/State funding. It may be possible to pursue 50% federal funding and it is unclear as to whether the State will allocate additional State funds.	Some of the estimated impacted recipients could qualify for exemptions upon further case review. More frequent Medi-Cal eligibility redeterminations could also lead to a rise in changes to IHSS eligibility, which may result in an increase in case re-evaluations, customer inquiries, and higher volume of appeals.
FMAP Reduction for Coverage of Immigrants	The federal medical assistance percentage (FMAP) is a complex formula which determines the federal government's share of every Medicaid dollar spent by a state. The formula includes economic and healthcare factors unique to each state. Several states provide Medicaid coverage to certain immigrants, but are not reimbursed with federal dollars.	Beginning in October 2026, the bill would reduce the federal coverage for emergency services provided to nonqualified aliens in expansion states from 90% to the state's regular FMAP rate.	October 1, 2026	HHSA	Being that the County does not operate an emergency room, direct operational impacts are not anticipated.	N/A	Reduction in reimbursement for care provided will have negative financial impacts on local hospitals and will in turn negatively impact the local health care system

Retroactive Medicaid and CHIP coverage for new enrollees	Current law allows states to offer 90-days of retroactive Medicaid or Children's Health Insurance Program (CHIP) coverage for new enrollees.	Beginning in 2027, the bill would reduce the retroactivity to one month prior to new enrollee's application for Medicaid and CHIP expansion individuals, and two months for traditional Medicaid population.	January 1, 2027	HHSA	Unknown	Unknown	There could potentially be an impact to the amount of revenue earned in Behavioral Health Services (BHS). BHS is working to gather and analyze data to determine what portion of mental health and substance use treatment services are currently reimbursed outside of the new retroactivity time period. Also anticipate that shortened retroactive coverage will result in hospitals, Federally Qualified Health Centers (FQHC), and safety net providers experiencing decreased reimbursement for services provided to new Medi-Cal enrollees. (Hospitals and Emergency Departments (ED) especially, as they are a prime location where individuals enroll in Medi-Cal, and retroactive coverage reimburses the providers for care given while individual awaits Medi-Cal enrollment.) This will also lead to increased debt, as individuals may be billed for expensive ED, Hospital, and ambulance charges.

Medicaid Provider Taxes	Many states impose taxes on Medicaid health providers in order to comprise that state's portion of its non-federal share. CMS sets a 6% safe harbor guaranteeing repayment.	Upon enactment, the safe harbor for future provider taxes in expansion states and nonexpansion states is 0%. For existing provider taxes in expansion states, beginning in FY 2028 will have their provider taxes safe harbor reduced annually by 0.5% until they reach the 3.5% safe harbor rate in 2032. The reduced safe harbor will not apply to nursing facilities and other specialty care facilities.	October 1, 2027 for tax thresholds	HHSA	N/A	Secondary and tertiary effects are decreased Medi-Cal enrollment (ie, more uninsured patients) and potentially decreased Medi-Cal reimbursement rates for servcies provided by CoSD and its contractors (including Behavioral Health Services).	The State may be required to reduce MCO tax (currently >3.5%), ultimately resulting in decreased state general revenue funds to support Medi-Cal programs. This is a tool used to increase State funds to pay current Medi-Cal provider rates. If these funds decrease, then Medi-Cal rates might decrease. This could affect reimbursent for Medical, Mental Health and Substance Use Disorder (SUD) services, as well as lower the County's MAA reimbursement (MAA rates are tied to Medi-Cal rates). Although the County does not receive any direct funds from the Provider Tax pool, the State uses this tool to help offset some of their State General Fund costs for administration of Medi-Cal. If this is no longer available to them, reductions in State General Funds could be passed on to counties in other areas.

Medicaid Work Requirement	No current applicable provision of law	Beginning in 2027, the provision requires able bodied adults without dependents on Medicaid to have at least 80 hours of work (or volunteer or educational engagement) per month. Exempts those 18 or young, disabled veterans, pregnant women, caregivers, transition age foster children, and other categories of individuals. Provides $100 million to states equally, and provides $100 million to states proportionally to Medicaid population to implement this provision.	January 1, 2027 The HHS Secretary must issue guidance to states by June 7, 2026. States may request "good-faith" waivers to delay implementation through December 7, 2028.	HHSA	Assumes 327,000 individual Medi-Cal recipients could be subject to work requirements. Additional staff will be needed to maintain current timely processing performance and to maximize enrollment in Medi-Cal. Staff will also need to work on appeals, access call center phone calls, and addressing increased lobby visits. • The number of staffing needed will depend on how often the State will require verification of work requirements. H.R.1 requires twice per year but states could require more frequent verification (242 more FTEs with semi-annual reporting to • A percentage of the impacted Medi-Cal population will lose Medi-Cal eligibility due to not responding to the twice per year reporting requirement. • Many of the individuals will likely re-apply for Medi-Cal during the same year.	• 242 FTEs assuming semi-annual reporting • 484 FTEs assuming quarterly reporting • 727 FTEs assuming bi-monthly reporting **$21M -$63.2M** in SSS staffing costs • Range depends on staffing requirements as described above. • Assumes no additional federal/State funding. It may be possible to pursue 50% federal funding and it is unclear as to whether the State will allocate additional State funds.	• The State may develop automated verification processes that would reduce the FTEs required. • Some of the estimated impacted recipients could qualify for exemptions upon further case review. • Some recipients may also be subject to SNAP work requirements and one worker may be able to complete verification for both requirements at the same time depending on State's implementation. This could significantly reduce the FTE need. Stricter Medi-Cal (MC) eligibility criteria may reduce the pool of qualifying applicants for MC, which could consequently lead to a decline in eligible IHSS recipients. This may result in a reduction of IHSS applications received and/or an increase in application denial rates. Also anticipate increased % of population which is uninsured in our region will lead to increased financial burden on hospitals and health system and FQHCs.
Medicaid expansion population copays		Beginning in October 2028, state Medicaid plans must impose on Medicaid beneficiaries with incomes between 100% and 138% of the federal poverty level copays between $1 and $35 for medical services. Prenatal, pediatric, primary, behavioral health, and emergency room services are exempted.	October 1, 2028	HHSA	Minimal impact anticipated due to behavioral health exemption.	N/A	Requiring beneficiaries to pay a $35 co-pay to access services can result in access to care issues for individuals who are unable to pay the co-pay, and could also create provider payment or reimbursement issues. Behavioral health would have been biggest impact to County operations, but that category is exempted.

Medicaid Eligibility for Aliens		Beginning in October 2026, the bill would restrict Medicaid to United States citizens, permanent residents, and certain Cuban, Haitian, and COFA immigrant categories.	October 1, 2026	HHSA	Currently in San Diego County, this is estimated to potentially impact 75,000 individuals who could lose their eligibility. Reductions in caseload from this H.R. 1 provision could be offset by affected people attempting to reapply, appeal, or calling or visiting one of the County's Family Resource Centers or Live Well Centers to request eligibility information.	N/A	For this population, their coverage will be changed to restricted at the Semi-Annual report or Annual Renewal.
MEDICARE	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**
Medicare coverage of certain aliens	Medicare is currently afforded to aliens who are lawfully present in the United States, and meet the other age requirements	One year after enactment, this provision would limit Medicare benefits to US citizens, nationals, permanent residents, and certain Cuban, Haitian, and COFA immigrant categories.	January 4, 2027	HHSA	Potential increased number of uninsured adults seeking care at County facilities.	Unknown	Anticipate increased uncompensated ED visits, hospital admissions, higher rates of disease and severity of conditions, decreased ability to work, increased homelessness.
INDIVIDUAL MARKET HEALTH PLANS	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**
Affordable Care Act (ACA) Tax Credits for aliens	Individual Market premium tax credits are available to aliens who are "lawfully present" in the United States.	Beginning in 2027, this provision would limit ACA tax credits to US citizens, nationals, permanent residents, and certain Cuban, Haitian, and COFA immigrant categories.	January 1, 2027	HHSA	There may be an increased number of uninsured individuals seeking care at County facilities (Public Health Centers, San Diego County Psychiatric Hospital, etc).	Unknown	Anticipate many people in our region will become uninsured, as they will not be able to afford ACA without the benefit of the tax credits (which effectively reduces their premium cost). This will lead to higher rates of disease and severity of conditions, decreased ability to work, increased homelessness, fiscal frailty and layoffs within local healthcare systems, etc.
ACA Tax Credits for asylees	Individual Market premium tax credits are available to aliens who are "lawfully present" in the United States.	This provision prohibits ACA tax credit eligibility to aliens who have been deemed ineligible for Medicaid benefits.	January 1, 2027	HHSA	There may be an increased number of uninsured individuals seeking care at CoSD facilities (Public Health Centers, San Diego County Psychiatric Hospital, etc).	Unknown	

ENVIRONMENTAL PROTECTION AGENCY and ENERGY	Current law	Bill Provision	Implementation Date	Group Impacted	Operational Impacts (e.g. policy, administration)	Fiscal Impacts (e.g. staffing needs, added costs)	Other Considerations (If applicable, can include next steps)
Strategic Petroleum Reserve	$213,390,000 FY25 Enacted	This provision would appropriate $218 million for maintenance and $171 million for acquisition of petroleum products for storage in the SPR.	Upon Enactment	Countywide	Increases in gas production may have impacts on fuel pricing, EV adaptation, and gas vehicle usage, which would impact any department using gas-powered vehicles.	Changes in fuel and gasoline costs due to increased production could result in unknown fiscal impact, as tax revenue from gasoline helps fund County road projects.	Potential challenges with meeting CAP goal if adaptation of clean passenger and heavy duty vehicles is impacted; supply of fossil fuel may slow general decarbonization efforts
Repeal and rescission relating to clean heavy-duty vehicles	Section 132 in the Clean Air Act which allots $600,000,000 to this program to grants awards to electric car buyers as incentive to buy zero-emission vehicles. These funds are to remain available until September 20, 2031.	This provision would rescind the allotted funding for the program.	Upon Enactment	LUEG FG3	The State of CA has higher requirements for the EV conversion. There have been no changes to the requirements for State and Local Governments.	Cancels federal funding that would have potentially been available to county depts for future vehicle purchases. No immediate impacts (no depts currently receiving funding).	May impact departments' ability to continue to meeting CAP goals and Green Fleet Sustainability Commitment if less electric vehicles are available for future gas powered heavy vehicle conversions; Funds available until September 30, 2031.
Repeal and rescission relating to diesel emissions reductions	Section 60104 of the Inflation Reduction Act allots $60,000,000 to grants, rebates, and loans to identify and reduce diesel emissions from vehicles. The funds are to remain available until September 30, 2031.	This provision would rescind unobligated balances in the program.	Upon Enactment	Countywide	Potential impact is to number of vehicles that can be purchased to meet State EV conversion requirements.	Funding is in the form of rebates at the time of purchase. The impact will be lack of funding to offset higher cost of EVs.	Potential impacts to future procurements for conversion of diesel vehicles and equipment to EV; Funds available until September 30, 2031

Repeal and rescission relating to funding to address air pollution	Section 60105 of the Inflation Reduction Act which appropriates $27,000,000,000 to Multipollutant Monitoring Stations, Air Quality Sensors in Low-Income and Disadvantaged Communities, Emissions from Wood Heaters, Methane Monitoring, Clean Air Act Grants, and Greenhouse Gas and Zero-Emission Standards for Mobile Sources. The funds are to remain available until September 30, 2031.	This provision would rescind unobligated balances in the program.	Upon Enactment	LUEG	May increase obligation for the County to reduce GHG emissions under the Climate Action Plan to meet State targets	Reduced grant funding available to County departments to address air pollution and implement GHG measures.	Funds available until September 30, 2031
Repeal and rescission relating to low emissions electricity program	Section 135 of the Clean Air Act which allots $87,000,000 to the reduction of greenhouse gas emissions in relation to electricity use. The funds are to remain available until September 30, 2031.	This provision would rescind unobligated balances in the program.	Upon Enactment	LUEG	N/A	May limit opportunities to pursue supplemental funding for technical assistance through the San Diego Regional Energy Network (SDREN)	Funds available until September 30, 2031

Repeal and rescission relating to greenhouse gas air pollution plans and implementation grants.	Section 137 of the Clean Air Act establishes a slush fund for states, local governments, and Tribes to use "Climate Change Action Plans."	This provision would rescind unobligated balances in the program.	Upon Enactment	LUEG	This section funds the EPA Climate Pollution Reduction Grant Program, which is being led by SANDAG for San Diego County. OSEJ/PDS/DGS were primary contributors to this effort, which started with a regional "Priority Climate Action Plan" that identified County facility capital projects and CAP/RDF programs for future grant funding. If rescinded, funding may not be made available for the future funding phases that were anticipated. Reduces relevance of efforts over the last 2+ years and eliminates funding sources for projects & programs for the County and other jurisdictions and Tribes across the region.	Reduced grant funding available to implement GHG measures listed in the CAP (rain barrels, turf replacement). May also limit opportunities to partner on decarbonization and environmental justice efforts.	May impact Tribal efforts to develop and implement decarbonization programs or projects.
Repeal and rescission relating to Environmental Protection Agency efficient, accurate, and timely reviews	Section 60115 of the Inflation Reduction Act funds hiring and training new staff at the EPA.	This provision would rescind unobligated balances in the program.	Upon Enactment	LUEG	If EPA staffing levels were reduced, departments could anticipate a lower level of service, timeliness of response for items such as technical support for compliance with the Municipal Stormwater (MS4) Permit, as well as longer review times for future grant applications, such as Environmental and Climate Justice Community Change Grant Program or management of approved grants, such one for the Smuggler's Gulch Dredging (curently still waiting for approved grant funding). EPA is lead for 401 CWA permitting on Tribal lands and reduced staffing could delay their review of permit applications for these projects.	N/A	

Repeal and rescission relating to low-embodied carbon labeling for construction materials	Section 60116 of the Inflation Reduction Act funds a program to identify and label products with low greenhouse gas emissions.	This provision would rescind unobligated balances in the program.	Upon Enactment	LUEG	Could potentially limit the ability to prioritize or source verified low-carbon construction materials for DPW projects, potentially impacting sustainability goals and climate-conscious building practices. May also reduce informational resources and product options for departments to respond to Environmentally Preferable Procurement policy guidance	N/A	Could limit the ability to prioritize or source verified low-carbon construction materials for park projects, potentially impacting sustainability goals and climate-conscious building practices.
Repeal and rescission relating to environmental and climate justice block grants	Section 138 of the Clean Air Act designates funds to environmental justice programs.	This provision would rescind unobligated balances in the program.	Upon Enactment	LUEG	May limit the ability to support projects and partnerships that address environmental justice concerns in vulnerable communities, potentially affecting equitable park access and climate resilience initiatives.	Reduction in available grant funding could force a pivot toward agriculture or flood protection grants from US Dept of Agriculture (USDA).	
HOUSING AND URBAN DEVELOPMENT	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**
Green Housing Rescission	Section 30002 of the Inflation Reduction Act allots $1,000,000,000 to improving energy efficiency or water efficiency or climate resilience of affordable housing.	This provision would repeal Section 30002 of the Inflation Reduction Act and rescind the allotted funding for the program.	Upon Enactment	LUEG	May reduce opportunities for future green housing initiatives and increase demand on energy programs.	Unknown	Elimination of loans/grants may limit partner organizations in benchmarking and decarbonization efforts.
PUBLIC LANDS AND NATURAL RESOURCES	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**

Project sponsor opt-in fees for environmental reviews		This provision authorizes an expedited review process NEPA for the environmental review of projects. Sponsors pay 125% of the traditional costs, but receive a NEPA decision within one year.	Upon Enactment	LUEG	Could provide benefits for future projects requiring NEPA if time to prepare documents is reduced.	Would increase costs of NEPA documents. For federally funded capital projects that need NEPA (FAA/FHWA), the County would need to pay. For private developments, developers would pay.	Appears to offer NEPA streamlining with a cost. May help expedite the NEPA process if applicant is willing to pay.
TRANSPORTATION	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**
Air Traffic Control		This provision appropriates $12.5 billion for ATC personnel, infrastructure, radar, lighting, technology, and other purposes.	Upon Enactment	LUEG	Invests in upgrades to air traffic control systems at airports across the country, which could include some county-owned airports.	N/A	
Repeal Of Funding For Neighborhood Access And Equity Grant Program	Grants to help cover the cost of projects in disadvantaged or underserved communities	This provision rescinds unobligated balances for the program	Upon Enactment	LUEG	Could lessen the number of recreational programs provided in disadvantaged or underserved communities.	Does not impact any active grants received by the County, but may impact the County's eligibility for future federal grant opportunities.	
Repeal Of Funding For Low-carbon Transportation Materials Grants	Funds to reimburse or incentivize the use of low carbon emission materials.	This provision rescinds unobligated balances for the program	Upon Enactment	LUEG	N/A	May limit available funding for DPW to be reimbursed for transportation facility construction material	
Repeal Of Funding For Alternative Fuel And Low-emission Aviation Technology Program.	Funding for alternative fuel and low-emission aviation technology program	This provision rescinds unobligated balances for the program	Upon Enactment	LUEG	Could potentially slow the offerings of alternative and low-emission types of fuels at County airports	N/A	

Repeal Of Funding For Use Of Low-carbon Materials For Federal Building Assistance	Funding for the use of low-carbon materials in construction or alteration of buildings under the jurisdiction, custody, and control of the General Services Administration	This provision rescinds unobligated balances for the program	Upon Enactment	LUEG	Could potentially limit the ability to prioritize or source verified low-carbon construction materials for DPW projects, potentially impacting sustainability goals and climate-conscious building practices.	N/A	May limit innovation by manufacturers to develop low-embodied carbon products and processes. Both may limit ability for municipalities, businesses, and residents to source low-embodied carbon options and/or adopt low-carbon manufacturing practices.
LOCAL LAW ENFORCEMENT	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**
Executive Office for Immigration Review		$3.33 billion for Dept. of Justice. No more than 800 judges in the EOIR	Funding Upon Enactment, Judge limit begins November 1, 2028	PSG	Additional judges to address the backlog may result in cases being resolved more quickly. Currently cases can take 2 years or more to be resolved, with significant lag time between court appearances and other case-related actions. This meant that each ILDP attorney could handle more cases since activities were spaced out. If cases move more quickly, ILDP attorneys may need to decrease the number of cases they can carry at a time, creating a need for more ILDP attorneys.	Potential increase in program costs for the Immigrant Legal Defense Program of an unknown amount.	
Adult Alien Detention Capacity And Family Residential Centers		$45 billion for single adult alien detention capacity and family residential center capacity	Upon Enactment	PSG	The immigration detention center is at currently at maximum capacity. Program eligibility is restricted to detained immigrants facing deportation. An increase in detention capacity increases the pool of individuals eligible for services, which would increase program costs.	Potential increase in program costs for the Immigrant Legal Defense Program of an unknown amount.	

Funding Section 287(G) of the Immigration and Nationality Act		This provision appropriates $2.055 billion for Department of Homeland Security funding, including aid to state and local governments to participate in immigration enforcement.	Upon Enactment	PSG	Greater immigration enforcement coupled with increased detention capacity (cell H100 above) expands the pool of individuals eligible for services, which would increase program costs.	Potential increase in program costs for the Immigrant Legal Defense Program of an unknown amount.	
HOUSING	**Current law**	**Bill Provision**	**Implementation Date**	**Group Impacted**	**Operational Impacts (e.g. policy, administration)**	**Fiscal Impacts (e.g. staffing needs, added costs)**	**Other Considerations (If applicable, can include next steps)**
Green And Resilient Retrofit Program For Multifamily Family Housing	Section 30002(a) of the Inflation Reduction Act provided funds to improve energy efficiency or water efficiency or climate resilience of affordable housing	This provision would rescind unobligated balances for the program.	Upon Enactment	LUEG	Reduces ability to provide future assistance funding for energy efficiency programs	Unknown.	Elimination of loans/grants may limit partner organizations in benchmarking and decarbonization efforts.