

# United States Senate

WASHINGTON, DC 20510

December 18, 2025

The Honorable Gene Dodaro  
Comptroller General of the United States  
U.S. Government Accountability Office  
441 G. St, NW  
Washington, DC 20548

Dear Mr. Dodaro:

The 2025 budget reconciliation bill, Public Law 119-21, or the “One Big Beautiful Bill Act” (BBB), will reduce access to essential health care and supportive services for millions of Americans, including veterans and their families. Compounded with expiring enhanced premium tax credits for Affordable Care Act (ACA) health plans established by the American Rescue Plan Act of 2021 and extended by the Inflation Reduction Act of 2022, veterans are facing a life-threatening reduction in access to health care and other essential benefits. These reductions in access to private health insurance, Medicaid, and funding for community health services will result in more veterans relying more heavily on their Department of Veterans Affairs (VA) health care and benefits. Because of the recent catastrophic, unnecessary cuts to VA’s workforce and resources since January 20, 2025, we are deeply concerned about the Department’s capability to support this potential spike in utilization. We write to request you review how these widespread cuts to health care access for all Americans will also impact veterans, and their families and to what extent VA will be able to support an influx of veterans relying on the Department for health care more than ever before.

Up to 5.6 million veterans and their family members rely on Medicaid or the Children’s Health Insurance Program (CHIP) and are at risk of losing coverage as a result of funding cuts and further restrictions on eligibility enacted in the BBB. Nearly one in ten veterans under 65 rely on Medicaid, with forty percent of those veterans relying on Medicaid as their sole coverage – often due to ineligibility for Medicare or VA health care. Medicaid helps ensure regular access to care for veterans and their families, especially those who have diverse health care needs or require care with high out-of-pocket costs, both of which can pose a barrier to care. Regardless of VA’s capacity to absorb these veterans that may now need to rely on the Department for more of their care, many of them are ineligible or were using Medicaid as a supplement *because* the Department couldn’t provide access to the care they required.

The 140,000 women veterans currently utilizing Medicaid will be particularly impacted by the cuts to this program. This includes nearly one in nine women veterans nationwide and more than one in five women veterans with disabilities, nearly one in seven rural women veterans, and 12.4 percent (54,000) of women veterans who are mothers. Nearly four in ten women veterans rely solely on Medicaid for their health care coverage. For those who are ineligible for Medicare or VA health care, the cuts made in the BBB will likely leave them uninsured resulting in high vulnerability to medical debt or being barred from accessing care altogether.

The Supplemental Nutrition Assistance Program (SNAP) was also severely harmed by the BBB. Currently, 1.2 million veteran households rely on SNAP benefits. The sixty-three percent of veterans on SNAP who are under 65 will be newly subject to so-called work requirements to maintain access to SNAP. Exemptions from these punishing requirements for disabling conditions are not clearly defined in the BBB, leaving uncertainty regarding whether veterans with disabilities limiting their ability to sustain regular employment will have the requirement waived. For example, a veteran with a traumatic brain injury or severe post-traumatic stress disorder – both conditions more common in veterans than non-veterans and which often require more complex accommodations – may not be exempt despite being unable to maintain the focus or manage the stressors required by many employers. Because of these changes, many veteran households will experience reduced access to SNAP and, therefore, because there is no equivalent alternative service available through VA or any other federal program, their main source of food.

Like the harmful and ineffectual work reporting requirements added to SNAP, the BBB also added these so-called work requirements for certain adults, including veterans, to access Medicaid. The BBB mandates Medicaid enrollees aged 19-64 who are covered through the ACA's Medicaid expansion must engage in employment, education, a work program, or community service to maintain their Medicaid eligibility. This requirement cannot be waived. Though there are exemptions allowed for certain individuals, including disabled veterans – defined as veterans with a disability rated as total under section 1155 of Title 38, United States Code – and caregivers of children thirteen years of age and under or disabled individuals, the gray areas of life and disabilities often do not align with these black and white requirements. Applying for or updating veteran disability ratings or caregiver status is already a significant challenge and can take years to establish, which, under these new bureaucratic requirements, could leave veterans or their loved ones without health care.

Even veterans who will not lose their coverage due to these Medicaid cuts may no longer be able to access health care because of their reliance on ACA premium tax credits. Since the ACA coverage provisions took effect, the number of uninsured, non-elderly veterans has decreased by more than one-third, from 9.6 percent to 5.9 percent. As Congress expanded the premium tax credits starting in 2021, the ACA marketplace enrollment more than doubled by 2025. However, these enhanced premium tax credits are set to expire at the end of this year, and without them many veterans will be forced to withdraw from their health care coverage because they can no longer afford it. This may increase their reliance on VA for their care if they're eligible, but many veterans who are ineligible for VA care and benefits will lose access to health care entirely. Furthermore, VA's actuarial firm has indicated that for every one percent of increased reliance on the Department for care, VA can expect its costs to increase by \$2.6 billion – a cost unaccounted for in the BBB or VA's budget request for fiscal year 2026, when these changes will start to take effect.

It is critical for Congress, VA, and, most importantly, veteran households to understand how these recent changes will impact their access to essential health care and nutrition services. With a better understanding of these impacts, Congress and the veteran community can better advocate for swift and effective changes to mitigate the truly catastrophic future created by the BBB. To that end, we request you conduct a review of the potential and actual impacts of this bill and the expiration of the enhanced ACA tax credits on veterans and their families.

To expedite access to this data and improve Congress' ability to act proactively, we request an initial review and estimation of potential harmful impacts based on current utilization, followed by a subsequent review of the actual impacts to veterans as they unfold from 2026-2028. To the extent practicable, please disaggregate your findings by age, gender, household size, employment status, average income, and any other categories you deem appropriate. In particular, we request you address the following questions as they pertain to veterans and their families, to the extent data are available:

1. How many utilize SNAP or Medicaid and are impacted by the BBB?
2. How many will lose access to affordable health care or health care altogether due to expiration of ACA enhanced premium tax credits?
3. How many are subject to work reporting requirements set for Medicaid? How many are eligible for exceptions to those requirements?
4. How many are subject to work reporting requirements set for SNAP? How many are eligible for exceptions to those requirements?
5. How many veterans impacted by changes to SNAP, Medicaid, and ACA enhanced premium tax credits are currently, have recently, or are at risk of experiencing homelessness?

We look forward to working with you to conduct oversight on this important issue. If you have any questions about this request, please have your staff contact the office of the Senate Committee on Veterans' Affairs, Minority Staff.

Sincerely,



Richard Blumenthal  
United States Senator



Charles E. Schumer  
United States Senator



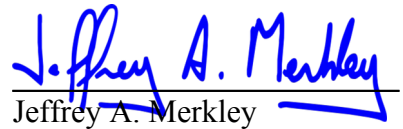
Amy Klobuchar  
United States Senator



Adam B. Schiff  
United States Senator



Angus S. King, Jr.  
United States Senator



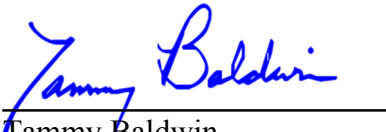
Jeffrey A. Merkley  
United States Senator



Jack Reed  
United States Senator



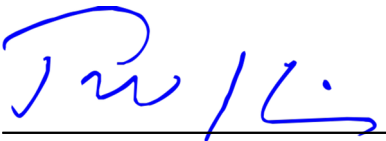
Kirsten Gillibrand  
United States Senator



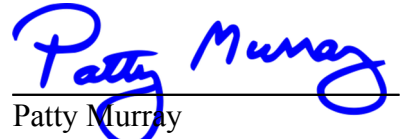
Tammy Baldwin  
United States Senator



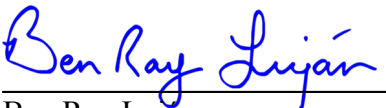
Cory A. Booker  
United States Senator



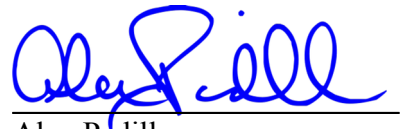
Tim Kaine  
United States Senator



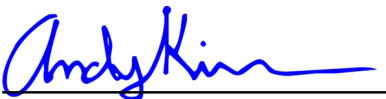
Patty Murray  
United States Senator



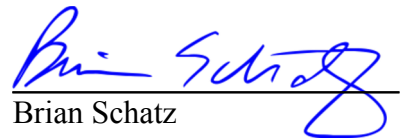
Ben Ray Lujan  
United States Senator



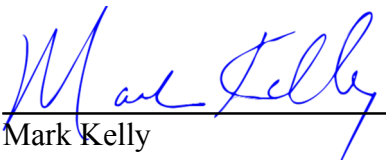
Alex Padilla  
United States Senator



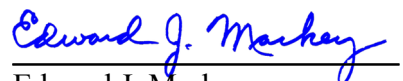
Andy Kim  
United States Senator



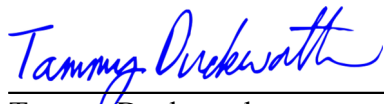
Brian Schatz  
United States Senator



Mark Kelly  
United States Senator



Edward J. Markey  
United States Senator



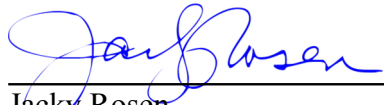
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Tammy Duckworth  
United States Senator



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Angela D. Alsobrooks  
United States Senator



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Jacky Rosen  
United States Senator



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Lisa Blunt Rochester  
United States Senator



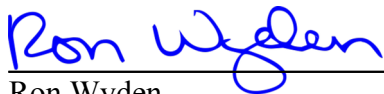
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Mazie K. Hirono  
United States Senator



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Catherine Cortez Masto  
United States Senator



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Ron Wyden  
United States Senator



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Elizabeth Warren  
United States Senator



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Christopher A. Coons  
United States Senator



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Bernard Sanders  
United States Senator