

The Honorable John Thune
Majority Leader
United States Senate
Washington, DC 20510

The Honorable Chuck Schumer
Minority Leader
United States Senate
Washington, D.C. 20510

The Honorable Mike Crapo
Chairman
United States Senate
Washington, DC 20510

The Honorable Ron Wyden
Ranking Member
United States Senate
Washington, D.C. 20510

June 25, 2025

Dear Majority Leader Thune, Minority Leader Schumer, Chairman Crapo, and Ranking Member Wyden,

On behalf of the undersigned professional healthcare associations, nonprofit organizations, health plans, and advocates representing women and/or children, we write to express our deep concern and strong opposition to the Medicaid cuts proposed in the [Senate Finance Committee's budget reconciliation package](#).

These cuts jeopardize the health and well-being of millions of women and children, risking a reversal of decades of progress in women's care, maternal care, pediatric access, elder services, disability support, and the stability of our healthcare workforce. Medicaid is not simply a line item in the U.S. federal budget—it is a lifeline for America's mothers, wives, children, and the most vulnerable among us.

Medicaid plays an essential role in safeguarding women's and children's health.

Women account for 62 percent of adult Medicaid enrollees, and nearly one in five women of reproductive age (19–64) depend on the program for healthcare. In combination with the Children's Health Insurance Program (CHIP), Medicaid provides coverage for more than 37.3 million children. ([KFF](#), [National Partnership for Women & Families](#), [Medicaid.gov](#))

Medicaid covers more than 40 percent of all births in the U.S., including the majority of births among Black and Hispanic mothers, and provides access to essential services such as prenatal and postpartum care, contraception, breast and cervical cancer screenings, chronic disease management, and pediatric well-child visits. ([CDC](#), [Medicaid.gov](#))

The impact of the proposed Medicaid reduction would be swift and severe, and any redesign of reimbursement will likely shift costs to state budgets, forcing state legislators to make difficult decisions about which services and healthcare provider reimbursements they can maintain with diminished budgets. In turn this will very likely result in fewer available healthcare providers for women's and child healthcare, particularly specialty healthcare care providers. The ramifications of the proposed Medicaid reduction will impact patients seeking care resulting in longer wait times for care, reduced and out-of-reach vital services for millions of people, and poorer health

for these populations ([KFF – 5 Key Questions](#), [KFF Medicaid Managed Care Plans and Access to Care](#), [KFF Allocating CBO Estimates](#), [KFF How Does Cost Affect Access to care](#), [MACPAC](#)).

Additionally, Medicaid cuts could devastate rural economies by causing additional hospital closures and job losses in healthcare—which is especially relevant in maternity care deserts where there isn’t a hospital or birth center offering obstetric services. ([Center For Healthcare Quality & Payment Reform](#), [HealthDay News](#))

The Proposal Threatens Maternal and Infant Health

Maternal and infant health outcomes—already in crisis—would be further endangered if the proposed Medicaid cuts were to go into effect.

Despite being among the wealthiest countries worldwide, the U.S. maternal mortality rate remains significantly higher than other high-income countries. Black women experience a rate nearly triple that of white women. In response, 48 states and the District of Columbia have implemented or are in the process of implementing Medicaid postpartum coverage extensions to 12 months. ([CDC](#))

If these provisions are rolled back, more than 700,000 new mothers annually could lose access to essential care in the months after childbirth, increasing the risk of untreated postpartum depression, hypertension, and life-threatening complications. At the same time, cuts to prenatal care and screenings could further worsen the nation’s infant care crisis—which already leads to approximately 20,000 infant deaths each year. ([KFF](#), [CDC](#))

Cuts Would Harm Older Women & Those with Disabilities

The proposed Medicaid cuts would disproportionately harm older women and women with disabilities.

More than 60 percent of nursing home residents are women, and Medicaid finances over 60 percent of long-term services and supports, including in-home care. ([CDC](#), [KFF](#))

Additionally, more than 7 million women with disabilities—the majority of whom are under the age of 65—rely on Medicaid for daily assistance, durable medical equipment, and behavioral healthcare. The proposed shift to block grants or funding caps would force states to ration services, restrict eligibility, and leave vulnerable women without the support they need to live safely and independently. ([AARP](#), [KFF Reconciliation Bill Tracking Health Provisions](#), [KFF](#))

Medicaid Cuts Would Devastate Health Facilities that Provide Critical Services for Women and Children

Beyond individual coverage, Medicaid funding supports the very infrastructure of care for women and children. Community health centers, rural hospitals, and OB/GYN clinics rely heavily on Medicaid reimbursements to operate.

With roughly one-third of U.S. counties already classified as maternity care deserts, additional cuts would worsen geographic and economic disparities in access to healthcare. Without

sustained Medicaid investment, clinics and programs will be forced to close, reducing access to prenatal care, pediatric checkups, reproductive services, and preventive screenings. ([March of Dimes](#), [American Hospital Association](#))

Additionally, Medicaid provides more than \$7.5 billion annually to support school-based health services, funding critical personnel and care for millions of America's students. Services funded include mental and behavioral health, chronic care management, speech and physical therapy, nursing care, preventive screenings, and services and assistive technologies for students with disabilities.

Roughly half of all children with disabilities in public schools rely on Medicaid for at least a portion of services provided through their individualized education program (IEP). ([KFF](#))

Cuts Would Harm Women in the Healthcare Workforce

Women's and children's health is also tied to the strength of the healthcare workforce—of which women make up the majority. If the proposed cuts take effect, it will mean job losses, wage reductions, increased burnout, and additional barriers to care—both for those receiving and providing it. ([U.S. Bureau of Labor Statistics](#))

Nearly 80 percent of all healthcare and social assistance workers are women, including 90 percent of nurses and 87 percent of home health aides. Many of these women serve on the front lines in Medicaid-dependent settings such as long-term care facilities, schools, and community health centers. Many also rely on Medicaid themselves for health coverage. ([Center on Budget and Policy Priorities](#))

A significant loss of Medicaid funding to public schools would put the positions of school-based services personnel—such as school psychologists, nurses, speech-language pathologists, and others, the majority of which are filled by women—at risk. ([School Superintendents Association](#))

Regarding women covered by Medicaid, the majority of non-older women work outside the home. Nearly 60 percent work for pay and six percent are in school, while another 19 percent are caring for family members and nine percent are not working because of sickness or disability. The potential economic impact due to lack of workforce participation or reduced educational attainment is significant. ([KFF](#))

Medicaid Support Yields Improved Outcomes

Medicaid plays a critical role in cancer care, covering one in ten adults with a history of cancer and one in three children diagnosed with the disease. Medicaid helps provide access to various services, from preventative screening to treatment and post-treatment support, resulting in better health outcomes and improved quality of life for patients and their families. A large body of literature indicates that Medicaid access positively impacts cancer survival. Studies have found that Medicaid expansion improved overall survival from cancer for patients with stage IV breast cancer, endometrial cancers, hepatocellular carcinoma, gastric cancer, pancreatic adenocarcinoma, intrahepatic cholangiocarcinoma, among pediatric patients, and young adults with cancer. ([ACS CAN](#), [Current Oncology](#), [Journal of Clinical Oncology](#))

Beyond the data highlighting Medicaid's positive impact on maternal and child health, the past decade offers clear evidence that investing in Medicaid is not only effective—it's a fiscally responsible and strategic choice.

In states that have expanded Medicaid, medical debt dropped by 30 percent, and 20 percent fewer women skipped necessary care due to cost. Maternal and infant health outcomes improved, and racial disparities in access and quality narrowed significantly. ([National Bureau of Economic Research, Health Affairs](#))

The reconciliation proposal threatens to unravel these gains, exacerbating inequities and destabilizing families already at risk.

Your Leadership is More Important Now than Ever Before

As professional healthcare associations, nonprofit organizations and advocates committed to the health of women and children nationwide, we strongly urge you to oppose any provision in the Senate Finance Committee's budget reconciliation package that weakens Medicaid. We ask that you stand with us—and stand up for the health and well-being of your fellow Americans. Now more than ever, we must protect and strengthen this cornerstone of our healthcare system—one that safeguards dignity, ensures safety, and expands opportunity for women, children, and families across the nation.

Thank you for your continued leadership in supporting health policy that has a positive impact on the lives of America's women and children.

Sincerely,

Alliance for Women's Health and Prevention (AWHP)
American Medical Women's Association (AMWA)
HealthyWomen
The National Association of Nurse Practitioners in Women's Health (NPWH)
Society for Women's Health Research (SWHR)
Academy of Managed Care Pharmacy
AIDS Alliance for Women, Infants, Children, Youth & Families
Aimed Alliance
Alliance for Aging Research
American Academy of Nursing
American Association of Birth Centers
American Association of Colleges of Nursing
American Association of Nurse Practitioners
American Association of Psychiatric Pharmacists
American Association of University Women (AAUW)
American Association on Health and Disability
American College of Nurse-Midwives
American Foundation for Suicide Prevention
American Geriatrics Society
American Mental Health Counselors Association

American Music Therapy Association
 American Nurses Association
 American Psychological Association Services
 American Sexual Health Association
 American Speech-Language-Hearing Association
 Any Baby Can
 Association for Community Affiliated Plans
 Association of Assistive Technology Act Programs
 Association of Black Cardiologists
 Association of Maternal & Child Health Programs
 Bailey's Crossroads Health Access Partnership
 Black Women's Health Imperative
 BMMA, Inc. (Black Mamas Matter Alliance)
 Bone Health & Osteoporosis Foundation
 Brem Foundation to Defeat Breast Cancer
 California Black Health Network
 Caregiver Action Network
 Caring Across Generations
 CHC: Creating Healthier Communities
 Choose Healthy Life
 Color of Gastrointestinal Illnesses
 Common Threads
 CommunicationFIRST
 Community Catalyst
 Community Liver Alliance
 Community Servings
 Council on Black Health
 Delta Sigma Theta Sorority, Inc.
 Diabetes Leadership Council
 Diabetes Patient Advocacy Coalition
 Disability Rights Education and Defense Fund (DREDF)
 Easterseals, Inc.
 Every Mother Counts
 Florida Chapter of the American Academy of Pediatrics
 Georgia Chapter of the American Academy of Pediatrics
 Gerontological Society of America
 Global Initiative Against HPV and Cervical Cancer (GIAHC)
 GO2 for Lung Cancer
 Hand to Hold
 Harmony Wellness Center
 Haven Midwifery Collective
 Health Care Transformation Task Force
 Health E Strategies, LLC
 Healthcare Businesswomen's Association
 Healthcare Education Project
 Hemophilia Federation of America

Infusion Access Foundation
Iowa Chapter of the American Academy of Pediatrics
Justice in Aging
Kansas Breastfeeding Coalition
knownwell
KVO Hydration and Wellness
Lakeshore Foundation
LB Consulting, LLC
League of United Latin American Citizens (LULAC)
League of Women Voters of the United States
Lifelong Health for All
Lupus and Allied Diseases Association, Inc.
Lupus and Allied Diseases Association, Inc.
MANA, A National Latina Organization
March of Dimes
MaryCatherine Jones Consulting, LLC
Maternal Mental Health Leadership Alliance
McIntosh Advocacy and Consulting, LLC
Minority Health Institute, Inc.
Mississippi Chapter of the American Academy of Pediatrics
Ms.Medicine
National Action Network
National Association of Hispanic Nurses
National Association of Pediatric Nurse Practitioners
National Board for Certified Counselors
National Coalition for Cancer Survivorship
National Coalition for Infant Health
National Comprehensive Cancer Network
National Consumers League
National Council of Jewish Women
National Council of Negro Women (NCNW)
National Council on Aging
National Disability Rights Network (NDRN)
National Health Council
National Health Law Program
National Hispanic Council on Aging
National Hispanic Health Foundation
National Hispanic Medical Association (NHMA)
National Kidney Foundation
National League for Nursing
National Minority Quality Forum
National Partnership for Women & Families
National Perinatal Association
National Register of Health Service Psychologists
National Rural Health Association
Navigate Maternity

New Disabled South
New Hampshire Psychological Association
New Jersey Coalition of Treatment Providers
NICU Parent Network
Nurses Who Vaccinate
Preventive Cardiovascular Nurses Association
RetireSafe
Rochester Black Nurses Association
School-Based Health Alliance
Society for Maternal-Fetal Medicine
Society for Public Health Education
South Carolina Chapter of the American Academy of Pediatrics
The Advocacy Nurse
The American Counseling Association
The Arc of the United States
The Mended Hearts, Inc.
The National Association of Rural Health Clinics
The Obesity Society
The Society of Psychiatric-Mental Health Nurses
Tigerlily Foundation
Triage Cancer
UnidosUS
Utah Health Policy Project
Virginia Counselors Association
WomenHeart: The National Coalition for Women with Heart Disease

Cc:

U.S. Senator Angela Alsobrooks
U.S. Senator Tammy Baldwin
U.S. Senator Marsha Blackburn
U.S. Senator Lisa Blunt Rochester
U.S. Senator Katie Britt
U.S. Senator Maria Cantwell
U.S. Senator Shelley Moore Capito
U.S. Senator Susan Collins
U.S. Senator Catherine Cortez Masto
U.S. Senator Tammy Duckworth
U.S. Senator Joni Ernst
U.S. Senator Deb Fischer
U.S. Senator Kirsten E. Gillibrand
U.S. Senator Maggie Hassan
U.S. Senator Mazie Hirono
U.S. Senator Cindy Hyde-Smith
U.S. Senator Amy Klobuchar
U.S. Senator Cynthia M. Lummis
U.S. Senator Ashley Moody

U.S. Senator Lisa Murkowski
U.S. Senator Patty Murray
U.S. Senator Jacky Rosen
U.S. Senator Jeanne Shaheen
U.S. Senator Elissa Slotkin
U.S. Senator Elizabeth Warren

Senate Finance Committee:

U.S. Senator Marsha Blackburn
U.S. Senator Michael Bennet
U.S. Senator John Barrasso
U.S. Senator Richard (Bill) Cassidy
U.S. Senator Maria Cantwell
U.S. Senator Catherine Cortez Masto
U.S. Senator John Cornyn
U.S. Senator Steve Daines
U.S. Senator Chuck Grassley
U.S. Senator Maggie Hassan
U.S. Senator Ron Johnson
U.S. Senator James Lankford
U.S. Senator Ben Ray Luján
U.S. Senator Roger Marshall
U.S. Senator Bernie Sanders
U.S. Senator Tim Scott
U.S. Senator Tina Smith
U.S. Senator Thom Tillis
U.S. Senator John Thune
U.S. Senator Todd Young
U.S. Senator Peter Welch
U.S. Senator Mark Warner
U.S. Senator Elizabeth Warren
U.S. Senator Sheldon Whitehouse
U.S. Senator Raphael Warnock