

## Impact of Federal Changes to Rutherford County

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September 25

# One Big Beautiful Bill (OP Loudes major cuts to Medicai LouSNAP

- OBBB North Carolina estimate \$32 billion for the next 10 years in Medicaid and SNAP.
- How will these cuts affect Rutherford County?



## Paral Changes to Medicaid

- Who is affected? Medicaid Expansion Beneficiaries Adults 19–64 on Medicaid → must work/train/study 80+ hrs/month.
- Who is exempt? Parents/guardians with kids ≤14; some self-report allowed.
- When does it start? Dec 31, 2026 (can delay until 2028).
- How is it checked? Proof at enrollment and every 6 months.
- Impact in NC: Up to 255,000 could lose coverage.





#### NC Medicaid Enrollment Overview

100%

23,190

| Total<br>Enrollment        | Standard Plan<br>Enrolled | BH IDD Tailored Plan I<br>Enrolled | EBCI Tribal Option Enrolled | Medicaid Direct<br>Enrolled |
|----------------------------|---------------------------|------------------------------------|-----------------------------|-----------------------------|
| 3,112,249                  | 2,263,530                 | 257,207                            | 5,683                       | 585,829                     |
|                            | Rutherford Coun           | ty Enrollment                      |                             |                             |
| Program Aid Category       |                           | Gender                             |                             |                             |
| Medicaid Expansion         | 5,256                     | Female<br>Male                     | 55.8%<br>44.2%              | 12,934<br>10,256            |
| Infants and Children       | 3,697                     | Grand Total                        | 100.%                       | 23,268                      |
| Tanf (AFDC) 20 and Under   | 3,230                     |                                    |                             | ,                           |
| Medicaid – Childrens healt |                           | Race                               |                             |                             |
| Disabled                   | 2,443                     | White/Caucasian                    | 83.2%                       | 19,287                      |
| Family Planning            | 1,602                     | Black/African Ameri                | can 13.8%                   | 3,210                       |
| Aged                       | 1,347                     | Multi Race                         | 1.8%                        | 407                         |
| Tanf (AFDC) 21 and Over    | 1,300                     | Unreported                         | 0.7%                        | 157                         |
| MQBB, MQBE, MQBQ           | 1,004                     | Asian                              | 0.3%                        | 80                          |
| Pregnant Women             | 392                       | American Indian                    | 0.2%                        | 37                          |
| Other Child (Foster Care)  | 260                       | Native Hawaiian<br>Grand Total     | 0.1%<br>100%                | 12<br>23,190                |
| Blind                      | 12                        |                                    | 10070                       | 23,130                      |
| <b>Grand Total</b>         | 23,183                    | Age Group                          |                             |                             |
|                            |                           | 0-5                                | 12.8%                       | 2,969                       |
|                            |                           | 6-18                               | 29.1%                       | 6,759                       |
|                            |                           | 19-20                              | 3.1%                        | 718                         |
|                            |                           | 21-44                              | 25.4%                       | 5,900                       |
|                            |                           | 45-64                              | 18.3%                       | 4,237                       |
|                            |                           | 65+                                | 11.2%                       | 2,607                       |

**Grand Total** 

### Potentian pact on Rutherford County Economy

- Coverage Loss: About 463 residents (~8.8% of Medicaid beneficiaries) may lose coverage
- Healthcare System: Lost Medicaid reimbursements, higher uncompensated care, financial strain on providers
- Household Impact: Increased out-of-pocket costs, medical debt, reduced local spending power
- Workforce: Health barriers to employment, reduced productivity, strain on small businesses
- Local Economy/Revenue: Less Medicaid spending reduces economic activity; potential loss of several million dollars annually



# Impact of NC Medicaid Budget Cuts on DSS (Oct 2025)

- What's Changing:
  - \$319M Medicaid shortfall → planned cuts to rates, services, and program suspensions.
- How This Impacts DSS:
  - More Client Needs & Questions Families confused by loss of services.
  - Vulnerable Populations Harder placements for children, disabled, and elderly.
  - **Provider Disruption** 3–10% provider pay cuts → fewer accepting Medicaid, esp. rural.
  - Community Frustration DSS seen as "the face" of Medicaid.
  - Increased Workload More frequent verifications (every 6 months) and added documentation.
  - More Client Contact Extra time helping clients with paperwork, proof, and exemptions.
  - Emotional Strain Delivering difficult news when coverage is lost, even for working clients.
  - Burnout Risks Higher stress and turnover if workload rises without support.
  - **Need for Training & Resources** Staff need clear guidance, tech tools, and client education.

## But Wait....Pause

- Update: Effective August 28, 2025 Cuts Currently PAUSED
  - NC lawmakers instructed NCDHHS to suspend Medicaid reimbursement and service cuts while the budget is negotiated.
    - ves DSS temporary breathing room (less diate pressure).
  - Use ainty remains cuts could return if fur isn't resolved.
  - For -we wait.....





## Federal Changes to SNAP



#### **Current Situation**

- Payment error rate = % of SNAP payments made incorrectly (over- or underpayment)
- 2024 error rates:
  - National: 10.93%
  - North Carolina: 10.21%
- Federal government currently pays 100% of SNAP benefit costs
- Overpayments are already required to be recouped and repaid

#### Federal Reconciliation Bill (Effective October 2027)

- States must pay a portion of SNAP benefit costs, based on error rates:
  - **0%** if error rate < 6%
  - **5%** if error rate = 6–8%
  - **10%** if error rate = 8–10%
  - **15%** if error rate > 10%
- Error rate based on 3 years prior
- States with error rate > 13.33%: delay in cost share for 2 years
- North Carolina cost share: ~\$420M/year at current 10.21% error rate

## NC Options to Mitigate Cuts to SNAP

North Carolina cost is \$420M/year at current 10.21% error rate

#### 1. Pay the Cost Share

- Allocate state budget to cover liability (5–15% of SNAP costs)
- Protects food benefits, avoids service disruption
- Trade-off: May require budget cuts or tax increases

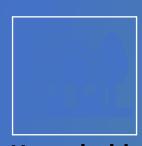
#### 2. Seek Waivers or Delays

- Use built-in **implementation delays** (esp. for high error rates)
- Request waivers/flexibility from USDA or federal agencies
- Trade-off: Relief is temporary or uncertain
- 3. Reduce or End Participation Yes, no longer offer the SNAP program
- Scale back eligibility or opt out of SNAP
- Trade-off: Severe risk to food security and local economies
- Politically and socially controversial



# Rutherford County Food & Nutrition Services (SNAP) August 2025





Households Served: 6,587



Individuals Served: 12,647



Monthly
Benefits Issued:
\$2,111,639

| Gender                 |        |        |
|------------------------|--------|--------|
| Female                 | 57.16% | 7,118  |
| Male                   | 42.84% | 5,335  |
| Grand Total            | 100.%  | 12,453 |
| Race                   |        |        |
| White/Caucasian        | 83.2%  | 9,938  |
| Black/African American | 13.8%  | 2,187  |
| Multi Race             | 1.8%   | 254    |
| Unreported             | 0.7%   | 44     |
| Asian                  | 0.3%   | 13     |
| American Indian        | 0.2%   | 15     |
| Native Hawaiian        | 0.1%   | 2      |
| Grand Total            | 100%   | 12,453 |
| Age Group              |        |        |
| 0-5                    | 12.8%  | 1,494  |
| 6-17                   | 29.1%  | 3,010  |
| 18-49                  | 3.1%   | 4,401  |
| 50-64                  | 25.4%  | 2,051  |
| 65 and above           | 18.3%  | 1,497  |
| Grand Total            | 100%   | 12,453 |
|                        |        |        |

## Rutherford County SNAP Error Rate

#### **2024 Audit Results**

- Payment Error Rate: 4.65% complimented by NCDHHS
  - 8 cases audited, \$3,202 total benefits reviewed
  - 1 incorrect case: \$149 error
  - Cause: Missing self-employment income (not reported at application, found during QC review)

#### **Current Status**

• Payment Error Rate: **0**% (no errors cited at this time)

#### Context

NC goal: <6% by 2026 (Reported by NCDHHS staff August 2025)</li>

#### **Potential County Liability**

- State Payment Error Rate 2024: 10.21%
- Rutherford County benefit issuance: \$2.1M
- Estimated county responsibility (if costs shifted): \$315,000



## **Potential Impact of SNAP Reductions**

#### **Economic Impact**

- Loss of SNAP benefits reduces local spending power
- Every \$1 SNAP = \$1.50-\$1.80 in local economic activity
- 10% reduction (\$210K/month, \$2.5M/year) → **\$3.7–\$4.5M loss** to county economy
- Lower sales for local businesses and reduced county sales tax revenue

#### **Impact on Families**

- Increased food insecurity for children, seniors, and disabled residents
- Families forced to cut housing, utilities, or healthcare to buy food
- Poorer nutrition → worse health outcomes

#### Impact on DSS

- Higher demand for other assistance programs (housing, energy, crisis support)
- Increased caseload pressure on staff
- More administrative burden from federal/state policy changes;
- Greater client frustration directed at DSS
- Workforce Stress & Morale: Role uncertainty and job security; training if reassigned to other programs

