

Today we will talk about:

- State Assembly ends its session. Which bills can still pass, which died, and what is left for the state Senate to decide?
- Will Joint Finance end the DVR wait lists?
- Will the Governor choose a deal that to reduce revenue in a special session this spring?
- Congress has two pieces of voting legislation, an ongoing partial government shutdown, and listens to the State of the Union speech
- Policy changes the administration is making: HHS DOGE releases Medicaid spending data to the public, think tank report alleges HCBS and ABA therapy is “rife” with fraud, CMS cites fraud and withholds Medicaid money from Minnesota, rules weaken ACA plans, Dept. of Ed sheds two more responsibilities, and federal agencies change what data they share/collect
- Continued coverage of impacts of HR 1. Medicaid cuts being proposed in Missouri, Idaho, Colorado, Maryland, Washington State, States’ approach to fraud/mistakes may target the wrong people

Weekly Update

Feb 27th, 2026

Federal Funding Fallout 2026

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2/26/2026

Around Wisconsin

We have a
lot to say.

Assembly Session Ends: What's next?

Last Friday the state Assembly ended its legislative session.

The Assembly made decisions on several issues important to people with disabilities, including FoodShare, legislation that would let hospitals pick decision makers, and special education.

The State Senate must now decide whether (or not) to pass bills that have already been passed by the Assembly.

Bills that did not pass the full Assembly will not become law this session.

The Senate will meet at least once in March.

It says it wants to end March 17th or 18th.

FoodShare funding attached to bill that makes changes to what people on FoodShare can buy

The Assembly amended [AB 180](#) to include most of the funding and positions DHS needs to meet new federal requirements that were included in HR 1.

AB 180 also tells DHS they must ask the federal U.S. Dept. of Agriculture for permission (a waiver) so that people who use FoodShare could not use FoodShare to buy candy or soft drinks. Some other states already have waivers that restrict what people can buy with SNAP.

The policy in AB 180 that limits what people can buy with FoodShare sets up different standards for what people can choose to eat based on how they can pay for food items.

It can be hard for people to know what they can and cannot buy and systems must be built to help retailers know what products are ok or restricted for customers who use FoodShare to pay.

However, the FoodShare funding included in the bill is needed now to make sure the state can avoid mistakes that could mean much higher costs and so FoodShare dollars can continue to support people who need help to buy food and the businesses that sell people food.

The state Senate would need to pass AB 180 so FoodShare can get the money it needs.

Action steps you can take:

5

1

Contact your State Assembly Representative and thank them for supporting more funding for FoodShare.

2

Contact your State Senator and ask them whether they support additional funding for Foodshare, and whether they support AB 180.

Assembly passes bill that lets hospitals pick decision makers

AB 598 passed the State Assembly after being amended four times, including two sub-amendments that were introduced the same day the bill was scheduled for a vote.

The four amendments do not address the core issues that patient advocates feel put patients at risk of exploitation and abuse or resolve any of the practical issues that the bill creates.

The sub-amendments that were made to the bill raise additional questions.

Patient advocates do not believe this legislation will resolve the issue it seeks to address.

The bill still must pass the State Senate. If the Senate does not act, the bill cannot become law.

Concerns about bill that lets hospitals pick decision makers

Wisconsin has deliberately designed its statutes and regulations to safeguard the rights of individuals; this bill bypasses those protections.

The Patient's Representative gets broad authority over the person and their money, where they live, and their medical care, without court oversight.

The Patient Representative's authority continues indefinitely.

The bill does not say the patient has to be re-evaluated to see if they can make their own medical decisions.

It is unclear how the financial powers granted to the Patient Representative interact when there are other people with the same decision making authority or are equal owners of money/assets.

Courts do not have adequate oversight authority to prevent or respond to abuse, and cannot remove Patient Representatives.

If a Patient Representative no longer wants the role or becomes unable to do it (becomes incapacitated, dies, etc.) the bill does not say what happens.

While the bill expires in three years, there not enough data being collected to evaluate the impact of the law on patients and families.

AB 598 is broader, and grants much more expansive powers than any other state's Next of Kin laws.

Action steps you can take:

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1

Contact your State Senator and tell them your concerns about this bill.

Special education funding bills die with end of Assembly session

The state Assembly did not act on SB 852 and AB 859 which would have provided sum sufficient funding to reach the special education reimbursement levels set in the current state budget—42% for 2025-26 and 45% for 2026-27.

The amount that state legislators set aside in the 2025-2027 state budget to pay schools was not enough to cover actual costs,

That means schools are getting \$140 M less than expected this year for special education.

Now that the Assembly session has ended these bills cannot become law.

Action steps you can take:

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1

Contact your State Assembly Representative and tell them why students with disabilities benefit from special education and why schools need certainty to make sure they have the funding to meet all students need.

Status of other disability related bills



The Assembly **passed** AB 253 which would let people in **MAPP** inherit money without losing eligibility for MAPP. **If the Senate does not act, the bill cannot become law.**



The Assembly **did not act** on SB 795, passed by the Senate, which would have let caregivers list up to three people who rely on them for care as part of their driver's license record in case of emergency. **This bill cannot become law now.**

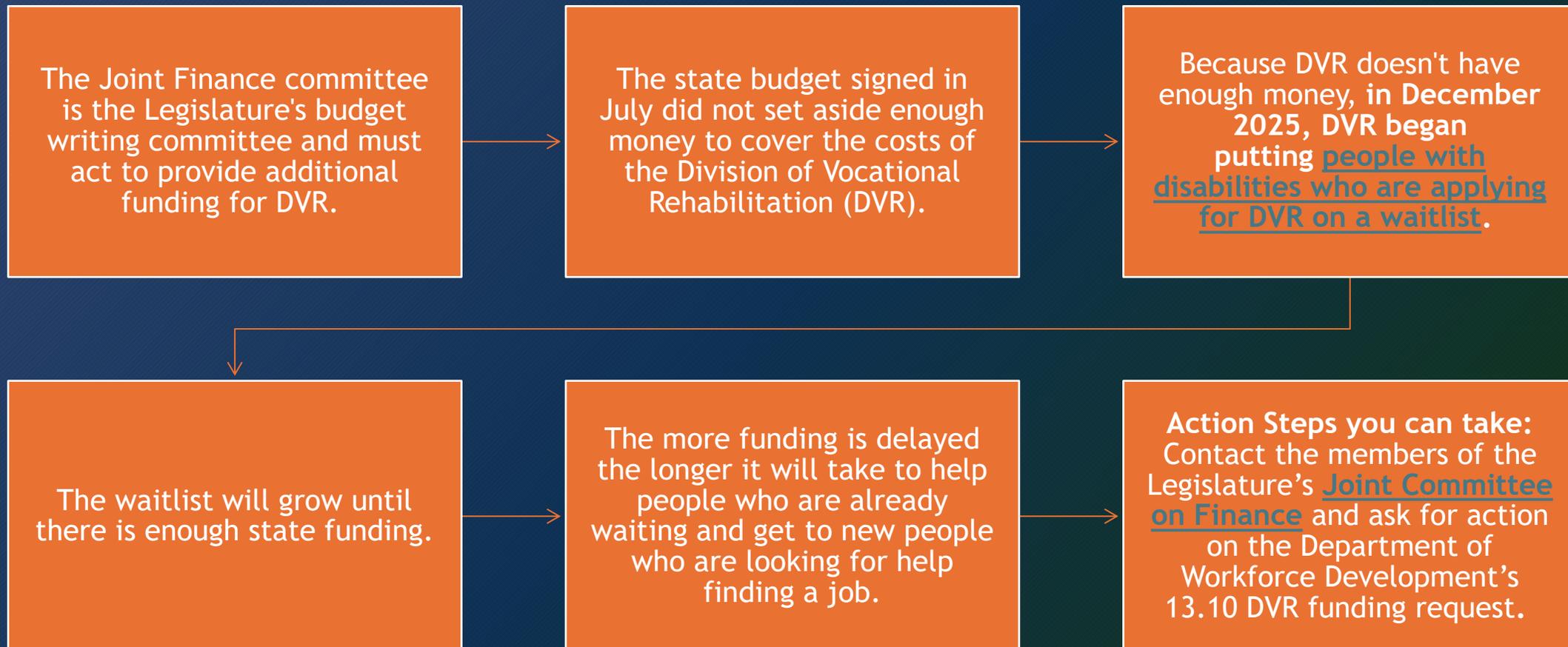


The Senate and Assembly passed AB 019, which makes the penalties for certain crimes against people with disabilities ("adults at risk") the same as the penalties for certain crimes against older adults ("elders at risk"). **The Governor will decide whether to sign the bill into law or veto it.**



The Senate and Assembly passed AB 614, which lets teachers decide which students they keep in class. **The Governor will decide whether to sign the bill into law or veto it.**

Not too late (yet) for Joint Finance to find funding for DVR to end wait lists



Will a special session be called to reduce revenue in exchange for short-term spending wins?



The Governor and Assembly Speaker have said publicly they are talking about reducing revenue (tax cuts) in exchange for some spending increases now.



There are some rumors that one of the spending increases might include a short-term fix for the current budget's shortfall in special education funding.



Advocates do not believe these talks are going to result in long-term fix on how special education is funded to ensure that the reimbursement level promised in the state budget matches actual costs schools have.



Reducing revenue (tax cuts) means that there will be less money next budget to respond to federal funding cuts and meet increasing needs.

Wisconsin is at least \$500M short of what is needed to do what we are doing now.

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\$70 M requested to for SNAP to meet new federal requirements from HR1



\$140 M shortfall in what was promised for special ed for year one. (Shortfall for year 2 of budget is not known yet).



\$11 M shortfall for DVR, waiting list imposed.



Wisconsin Medicaid projects \$213 M deficit by June 30, 2027.



\$218 M shortfall for 22 appropriations where revenue from fees helps fund programs.



LFB releases revenue projections noting higher tax revenue than expected, but also uncertainty that a CMS interpretation could result in a \$792 M Medicaid shortfall.

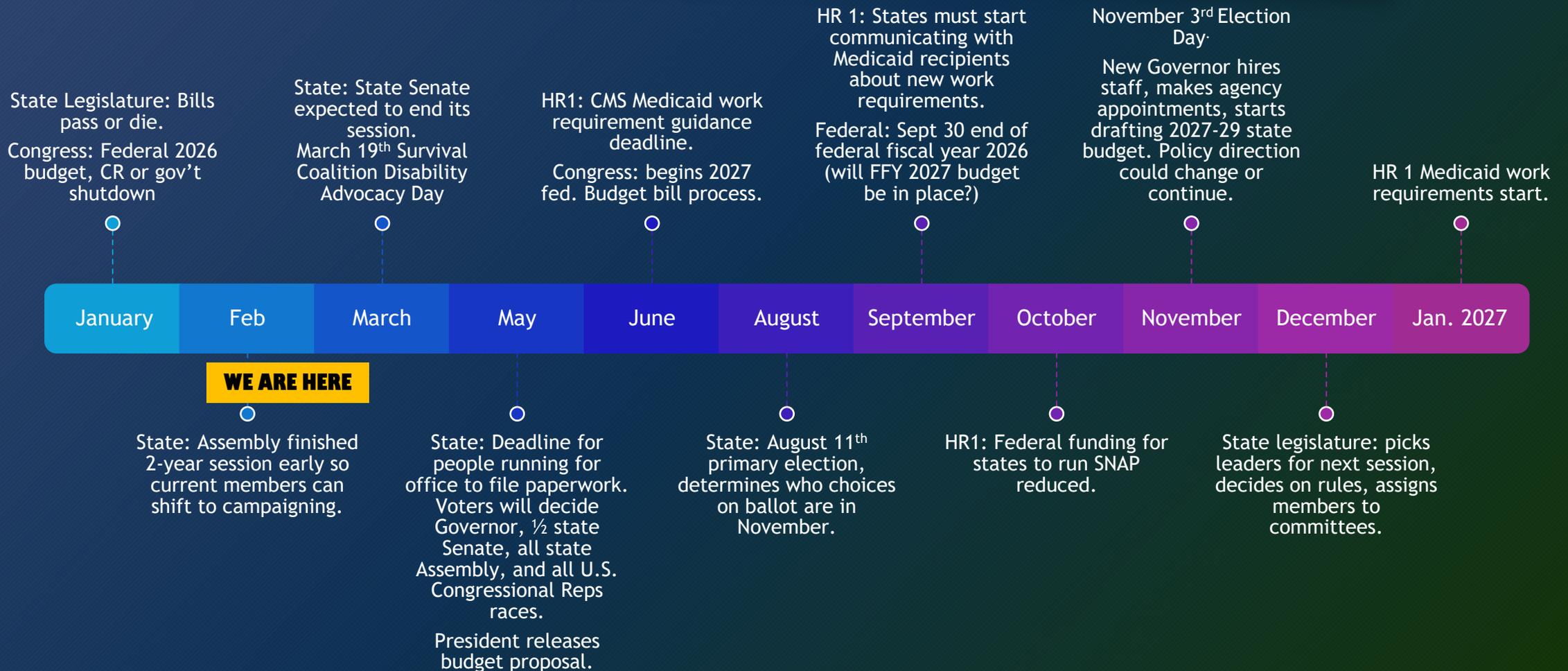


Unknowns that could be budget busters: state reinsurance fund (ACA Marketplace), removing caps from school voucher programs.

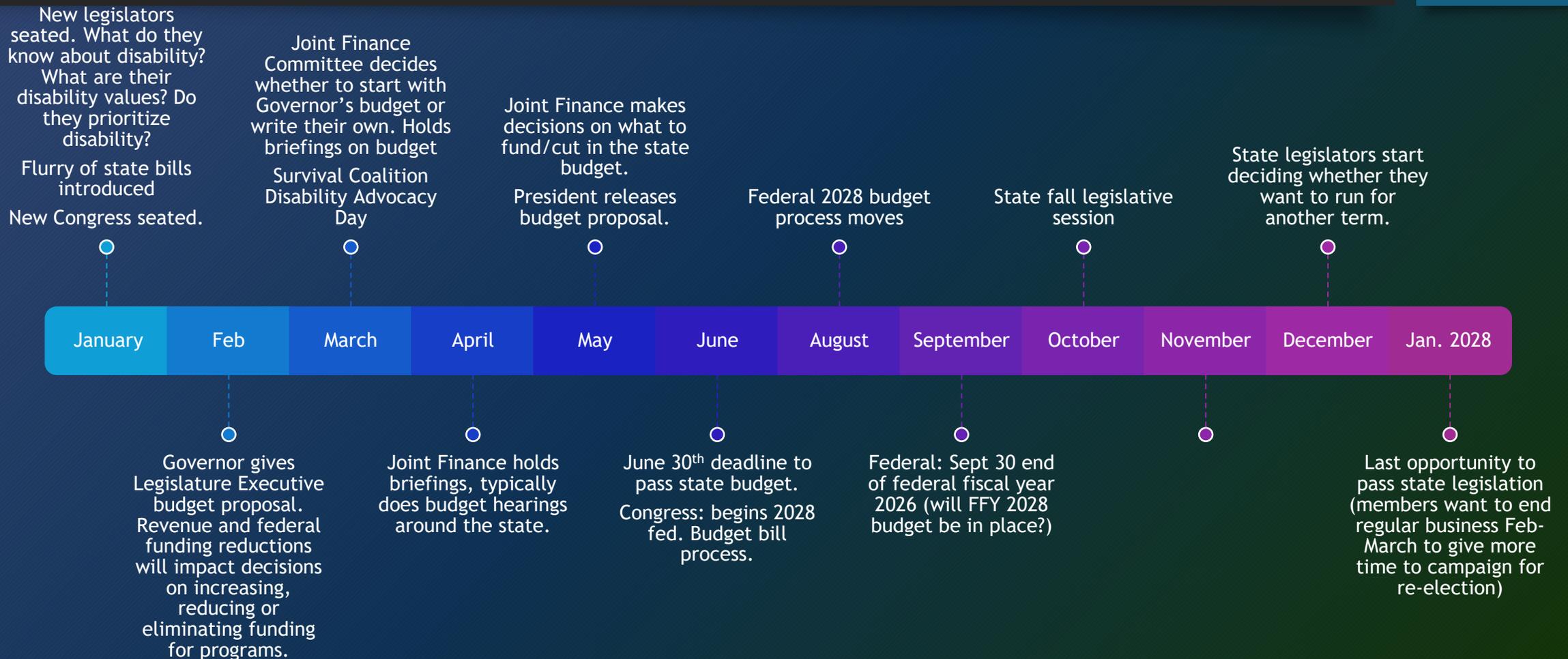


Cuts or elimination of federal grants that have supported state, county, and local programs may create new budget holes or funding gaps.

Buckle up: 2026 is going to be a big year to make sure disability issues are priority issues



2027 is when states feel impact of federal funding cuts.



Congress

Government
Shutdown,
2026 Budget
bill, ACA
subsidies

Congress is back

The Dept. of Homeland Security shutdown continues.

President's State of the Union speech barely mentioned health care.

- The President did not mention Medicaid and research funding cuts, ACA subsidies, or a specific health care policy plan.
- The President announced a “war on fraud” to be led by VP JD Vance, saying “we’re going to be able to find enough of that fraud, we will actually have a balanced budget overnight.”

2nd reconciliation bill looking unlikely

Administration continues acting, and Congress continues not acting

SAVE Act stalls

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- The Senate was supposed to vote on SAVE act this week. It did not.
- Sen. Thune promised a vote before the Senate's next recess at the end of March (but only if Congress ends the DHS shutdown first)
- Some members want the Senate to get rid of 60 vote threshold needed to bring a bill to a floor vote (filibuster).
- For now, the Senate is unwilling to get rid of the filibuster



NPR.ORG

A Republican plan to overhaul voting is back. Here's what's new in the bill

SAVE act explainer:

<https://www.npr.org/2026/02/19/nx-s1-5719252/trump-voting-save-america-act-explainer>

Another voting bill introduced (Make Elections Great Again)

20

- The “Make Elections Great Again Act” bill would:
 - ban universal voting by mail
 - prohibit the counting of ballots received after Election Day.
 - ban ranked-choice voting for federal elections and would
 - prohibit voters from giving sealed mail ballot packets to someone else for delivery, a practice currently allowed in 18 states.
 - grant far more authority to the Department of Homeland Security to obtain information about voters from states.
 - reinforce the House-passed SAVE Act bill’s voter ID requirements, including establishing citizenship by requiring people to show a passport or a birth certificate to register and identification to vote.
- Critics see the bill as broader legislative effort aimed at keeping control of Congress this fall and helping to amplify the president’s false claims of mass voter fraud if they lose.



NYTIMES.COM

Republicans, Braced for Losses, Push More Voting Restrictions in Congress

<https://www.nytimes.com/2026/02/17/us/politics/republicans-vote-fraud-id-midterms.html>

[Noncitizen voting is rare. Why is Washington so focused on it?](#)

Up to Congress to make sure federal funding is spent as they intend

21

01

What will Congress do to provide oversight and enforce that Congress's spending directives are followed by the administration?

02

What will Congress do if the administration freezes, impounds, redirects or restricts funds to states and programs?

03

What will you do make sure the funds Congress appropriates are spent as directed and in a timely manner?

04

What will you do if the administration does not spend money as Congress directed?

Administration

Administrative
rules, Federal
Agency Actions

DOGE releases Medicaid spending data

23

- Last Friday a HHS Department of Government Efficiency team released Medicaid spending data on claims, medical procedures and payments from January 2018 through December 2024.
- The Department of Health and Human Services collects Medicaid claims data from states that administer the program. Until now, much of the information has been fragmented and difficult to access.
- The Trump administration often cites waste, fraud and abuse as justification for deep program cuts — including the nearly \$1 trillion in cuts to federal Medicaid spending in HR 1.
- Elon Musk said the public could use to look for fraud themselves.
- The Wall Street Journal wrote an editorial saying the public release could make it possible to identify high-billing Medicaid providers and unusual patterns — including alleged fraudulent autism diagnoses and treatments billed by Medicaid providers.



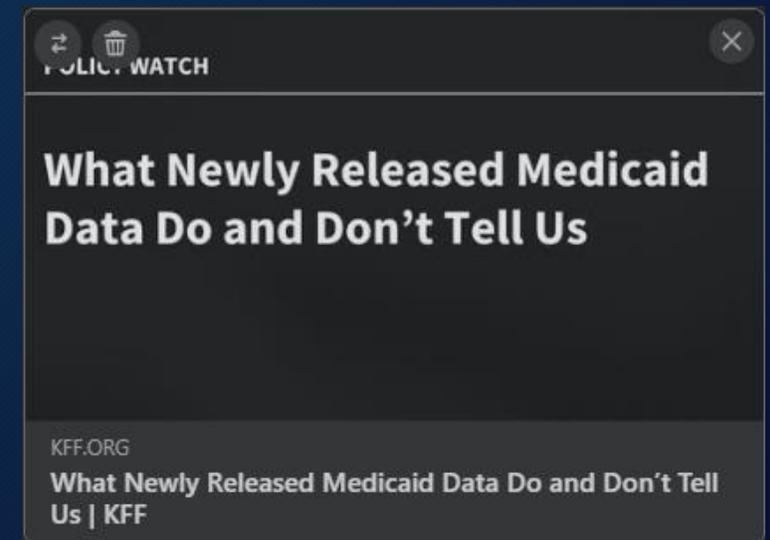
[NHeLP Condemns Weaponization of Medicaid Data](#)

[Axios article](#)

What Newly Released Medicaid Data Do and Don't Tell Us

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- Entire categories of services are missing, including all hospital care and prescription drugs, which are significant shares of Medicaid spending.
- Other critical factors are missing that help people understand Medicaid spending:
 - **Enrollment.** State policy sets who can get into Medicaid. States with higher numbers of people in Medicaid have greater use of services.
 - **Benefits and Coverage.** How much services are used also depends on what services states offer and how they determine who is eligible to use those services.



<https://www.kff.org/medicaid/what-newly-released-medicaid-data-do-and-dont-tell-us/>

What Newly Released Medicaid Data Do and Don't Tell Us

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- Other critical factors are missing that help people understand Medicaid spending (cont.):
 - **Payment rates.** Spending on services depends on how much states are paying for each service, which depends on state decisions about how much payment rates should be to ensure reasonable access to care.
 - **Diagnoses.** Conditions that have high care or ongoing management cost more. The data does not say what condition the procedures are used to treat.
 - **Place of service and other modifiers.** The data exclude information about where the services were performed (including whether they were provided in-person or remotely) which can impact cost.



<https://www.kff.org/medicaid/what-newly-released-medicaid-data-do-and-dont-tell-us/>

DOGE releases Medicaid spending data

26

- Data watchers worry that it is impossible to distinguish fraud from legitimate high-volume provision of services, unless, of course, you *redefine the provision of services as fraud*.
- They worry this data release will enable attacks on home and community based services (HCBS).
- The top spending item is "personal care services" the third is "residential habilitation" the fifth is "attendant care services."
- These are all home and community-based services — the services that allow disabled, elderly, and developmentally disabled people to live in their own homes and communities instead of being warehoused in institutions.
- HHS DOGE is framing the core infrastructure of community living as suspicious spending.



https://www.patreon.com/posts/hhs-doge-billing-150728416?utm_medium=clipboard_copy&utm_source=copyLink&utm_campaign=postshare_fan&utm_content=web_share

Paragon Institute releases report accusing fraud in HCBS and certain disability services

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- “Home- and community-based services and non-emergency medical transportation are especially vulnerable to fraud because decentralized care delivery, self-direction, low barriers to provider entry, and weak verification make it difficult to ensure services are actually provided as billed, particularly when Medicaid allows payments to family members with minimal oversight.”
- “Applied behavioral analysis services for autism and substance use disorder services have experienced explosive spending growth driven by expanded coverage mandates, overlapping federal funding streams, and fragmented oversight, despite limited evidence of effectiveness and widespread improper billing.
- The report recommends Congress cap federal Medicaid funding to states, and that CMS should use existing authorities to withhold federal funds, take back money from states, and ban Medicaid payments to family caregivers.



<https://paragoninstitute.org/medicaid/beyond-minnesota-four-medicaid-services-vulnerable-to-fraud-and-the-case-for-stronger-cms-enforcement/>

Paragon Institute releases report accusing fraud in HCBS and certain disability services

28

- “Unlike institutional care, which is subject to more centralized regulation and where oversight is easier, HCBS often relies on decentralized networks of caregivers and state-administered payment systems. These differences create conditions that are ripe for abuse. HCBS is particularly difficult to monitor, because the care is delivered in homes by caregivers who are often relatives or friends. Many states permit “self-direction,” under which beneficiaries effectively control Medicaid funds and hire family members as paid caregivers—dramatically weakening safeguards against false claims, inflated hours, and non-delivery of services.”



<https://paragoninstitute.org/medicaid/beyond-minnesota-four-medicaid-services-vulnerable-to-fraud-and-the-case-for-stronger-cms-enforcement/>

Vance stops \$260 M of Medicaid funding to Minnesota

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- The Trump administration has “temporarily halt[ed]” almost \$260 M in Medicaid funding to the state of Minnesota over fraud concerns.
- The Trump administration says similar withholdings may be coming for other states, including California
- If Minnesota doesn’t have enough funds available, it may have to halt payments to providers, which could affect care.
- CMS is also looking for fraud in Medicare.
- For six months CMS will block any new Medicare enrollments for suppliers of durable medical equipment, prosthetics, orthotics or other supplies used to treat chronic conditions or assist in injury recovery.
- Oz also announced a new crowdsourcing effort he said would help “crush fraud” by soliciting Americans’ tips and suggestions.



<https://apnews.com/article/minnesota-medicaid-funding-fraud-trump-47b160fd664cdfef355ae00ca5fecc0>

[Federal Judge Blocks Trump Plan To Cut \\$600 Million In Health Funds](#)

Private Equity Increasingly Taking Over Autism Therapy Centers

30

- In the last 10 years, more than 500 autism providers were bought by investment firms seeking to ultimately sell them for a profit.
- Private equity firms have also invested heavily in disability service providers that offer residential care, home health, personal assistance and other services for people with intellectual and developmental disabilities.
- A report last year found that between 2013 and 2023 there were more than 1,000 private equity acquisitions of disability and elder care providers.
- “Yet another segment of health care that has emerged as potentially profitable to private equity investors and it is very distinct from where we have traditionally known investors to go, so the potential for harm can be a lot more serious,” said Yashaswini Singh, a health economist at Brown’s School of Public Health and an author of the study. “We’re also dealing with children who are largely insured by Medicaid programs, so if private equity increases the intensity of care, what we’re really looking at are impacts to state Medicaid budgets down the road.”



<https://www.disabilityscoop.com/2026/02/23/private-equity-increasingly-taking-over-autism-therapy-centers/31871/>

<https://jamanetwork.com/journals/jamapediatrics/fullarticle/2843100>

Proposed rule to make it easier to buy plans that cover less, have higher out of pocket costs

31

- A set of regulatory proposals would make big changes to health plan offerings on the Affordable Care Act marketplace next year
- The rule would have more insurance options that might have lower premiums, but only because it leaves people exposed to much higher expenses once they get sick.
- Insurers would be required to cover less care, some changes would make it harder for people to enroll, and consumer protections would be reduced.
- The new rules favor catastrophic health plans, which cover major costs but leave most routine care costs to patients
- Generally, benefits kick in only after the enrollee spends \$15,000 on care — a year's income for those at or below the poverty level.
- The rule proposes sharply raising some annual out-of-pocket costs — to more than \$27,000 for one type of coverage
- The rules could cause up to two million people to drop coverage in 2027.



<https://www.thebulwark.com/p/trump-stealth-attack-affordable-care-act-obamacare-narrow-networks-catastrophic-coverage>

<https://kffhealthnews.org/news/article/aca-trump-proposal-catastrophic-coverage-premiums-care-networks>

[New A.C.A. Plans Could Increase Family Deductibles to \\$31,000](#)

Education Department hands off more of its responsibilities to other US agencies

32

- The U.S. Dept. of Education has two new agreements that give away programs and grants to other federal agencies
- Dept. of Health and Human Services will take over grant programs that send millions of dollars to schools for safety and community engagement efforts.
- The Education Secretary has said she wants to move special education programs to HHS too, but for now special education remains at U.S. Dept of Education.
- The latest agreements make no mention of the department's Office of Special Education and Rehabilitative Services, which manages billions of dollars in grants and oversees state compliance with the Individuals with Disabilities Education Act.



<https://apnews.com/article/education-department-trump-state-hhs-e82a5ea582f1b730a9591bc4f767621e>

Trump officials propose testing a citizenship question amid a push to alter the census

33

- Participants in this year's field test of the 2030 census may be asked about their U.S. citizenship status
- Months ago President Trump called for a “new” census on social media that would, for the first time in U.S. history, exclude millions of people living in the country without legal status.
- In Congress, a growing number of Republican lawmakers are backing similar proposals to leave out some or all non-U.S. citizens from a set of census numbers used to determine each state's share of congressional seats and Electoral College votes.
- According to the 14th Amendment, those census apportionment counts must include the "whole number of persons in each state."
- Previous Census Bureau research has found that adding a citizenship question would likely undermine the count's accuracy by lowering response rates for many of the least-responsive populations.



<https://www.nprillinois.org/2026-02-05/trump-officials-propose-testing-a-citizenship-question-amid-a-push-to-alter-the-census>

Social Security Workers Are Being Told to Hand Over Appointment Details to ICE

34

- **WORKERS AT THE Social Security Administration** have been told to share information about in-person appointments with agents of Immigration and Customs Enforcement
- Most appointments with SSA take place over the phone, but some appointments still happen in person.
- This applies to people who are deaf or hard of hearing and need a sign language interpreter, or if someone needs to change their direct deposit information.
- Social Security numbers are issued to US citizens but also to foreign students and people legally allowed to live and work in the country.
- In some cases, when a child or dependent is a citizen and the family member responsible for them is not, that person might need to accompany the child or dependent to an office visit.

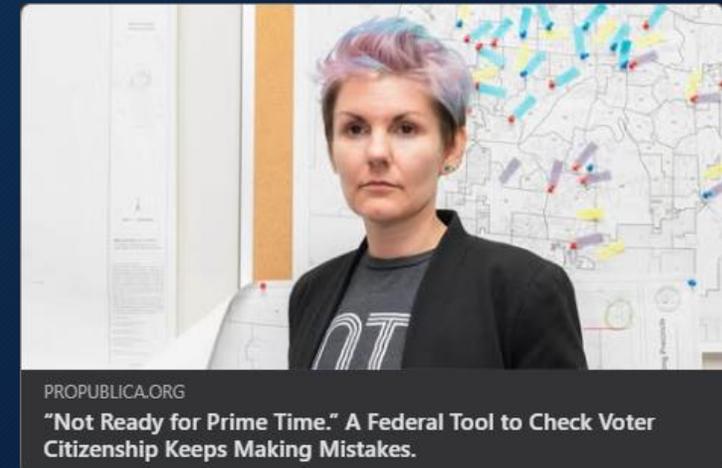


<https://www.wired.com/story/social-security-administration-appointment-details-ice/>

A Federal Tool to Check Voter Citizenship Keeps Making Mistakes

35

- An expanded federal tool for identifying noncitizens on voter rolls is making persistent mistakes, particularly in assessing citizenship for people born outside the U.S.
- Some of those people subsequently become U.S. citizens, a step that the system doesn't always pick up.
- The Department of Homeland Security Systematic Alien Verification for Entitlements, or SAVE was once used mostly to check immigrants' eligibility for public benefits, but has been expanded
- At Trump's direction, DHS has pooled confidential data from across the federal government to enable states to mass-verify voters' citizenship status using SAVE.
- When SAVE flags voters as noncitizens, they are also referred to DHS for possible criminal investigation. (It is a crime to falsely claim citizenship when registering to vote.)



<https://www.propublica.org/article/save-voter-citizenship-tool-mistakes-confusion>

Continued coverage of impact of Reconciliation bill

Lots of
articles to
share.

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Missouri: Families, caregivers plead with Missouri lawmakers to reverse governor's disability cuts

37

- Missourians with developmental disabilities, their families, care staff and advocates oppose \$80.7 million in proposed cuts to services that help people with disabilities live safely in their homes.
- The budget proposal would cut \$28.6 M in state Medicaid spending which means Missouri loses almost twice as much federal Medicaid funding as a result.
- The cuts include proposed pay rate reductions of 21% for personal assistants and by 30% providers of structured group programs, called day habilitation.
- The governor's proposed budget could lead to a waitlist for new applicants by late summer or fall. Community residential placements could see waitlists by winter.



<https://missouriindependent.com/2026/02/13/families-caregivers-plead-with-missouri-lawmakers-to-reverse-governors-disability-cuts/>

Idaho: Disability Advocates explain what eliminating HCBS services would mean

38

- Four Idahoans who rely on Medicaid programs for themselves or their children - discuss cuts to disability programs, including home and community-based services and therapies which help Idahoans with disabilities live independently, being proposed to balance the state budget.
- Advocates describe the care they need and what additional cuts (on top of 4% provider rate cuts that have already happened) would mean to the lives of people who need care.
- Great examples of real people sharing their stories and showing what cuts mean to people with disabilities, families, and aging caregivers.



[Idaho Medicaid Users on Potential Budget Cuts | Idaho Reports | Full Panel \(18 minutes\)](#)

Colorado: Proposes more cuts to Medicaid-funded disability services

39

- Medicaid funded services that pay for people with disabilities to go on community outings and cover household cleaning, cooking and laundry are the latest services facing cuts as Colorado deals with a major budget shortage.
- The state proposes capping the number of hours caregivers can be paid to take people on outings through the “Community Connector” benefit. The cap will save \$10 M in state money next year.
- The state proposes capping hours allowed for “homemaker” services. The cap will save \$2.6 M.



<https://coloradosun.com/2026/02/16/medicaid-cuts-disability-community-connector>

Colorado: Proposes more cuts to Medicaid-funded disability services

40

- Many parents who left the workforce when they had children with disabilities receive funding support through the community outings program and homemaker services.
- Cuts could mean Medicaid pays more if care must be covered by more expensive Medicaid services or moved into institutional settings.
- The Medicaid agency says people are not using the benefit correctly, and it is not intended to pay for duties that are “typical parental responsibility.”



<https://coloradosun.com/2026/02/16/medicaid-cuts-disability-community-connector>

Washington State: Proposed 2026 budget narrows eligibility criteria for Medicaid-funded resources

41

- Washington state's proposed budget would make it harder for people with intellectual or developmental disabilities to get into a state Medicaid Home and Community Based Services waiver.
- To qualify for the waiver, a person must demonstrate functional eligibility, meaning they are evaluated to see how much and what care they need.
- The proposal would mean people would have to show a greater level of need to get into the waiver.
- That means some people who can get into the waiver now, wouldn't be able to be in the program anymore
- Up to 5,000 people statewide could lose access to services
- The proposed changes create savings by reducing the number of people using services.



<https://www.columbian.com/news/2026/feb/17/advocates-5000-disabled-people-in-washington-could-lose-access-to-services/>

Maryland proposing budget cuts to disability programs

42

- Maryland's budget proposal balances a \$1.5 billion projected shortfall through by making \$1.8 billion in spending cuts, cost shifts and transfers.
- In December, lawmakers directed state leaders to find at least \$600 million in targeted cuts.
- Governor Moore says the state's projected deficit due to policy decisions made by the Trump administration and financial impacts from HR 1.
- Some of the biggest cuts are proposed for the state's Developmental Disabilities Administration (DDA), resulting in \$150 million in savings for the state.
- Other budget saving tactics include no provider rate increases for employees within the Department of Health, Department of Human Services and Department of Education.



<https://www.wypr.org/wypr-news/2026-01-21/moore-proposes-a-low-growth-maryland-budget-with-no-tax-increases>

Medicaid cuts, federal policy changes could mean fewer care workers just when we need them most

- Worker shortages, Medicaid funding cuts, and immigration restrictions mean there are fewer workers willing, or able, to fill these roles.
- Medicaid funding cuts will impact agencies that employ aides and nursing assistants and would likely result in low paid workers being paid less.
- “We have this growing demand [for care], and it sounds like the supply [of care workers] is going to reduce pretty significantly over the next few years,” Chidambaram said.
- The workforce shortage is here, cuts/policy changes will increase the shortage, and the effects will not fade quickly. “It’s going to impact us for the next 30 years.”



[Underpaid and under pressure: The eldercare workforce leading America's job growth](#)

Georgians With Disabilities Are Still Being Institutionalized, Despite Federal Oversight

44

- Nearly 15 years ago, the U.S. Department of Justice sued Georgia for putting people in state hospitals solely because they have developmental disabilities.
- Georgia agreed to improve community based services make sure people could live in the community and would not be forced into institutions.
- 15 years later, people with developmental disabilities and mental illness regularly can't find community placements, so they cycle in and out of hospitals and nursing homes.
- In Georgia, many home and community service providers have gone out of business increasing a housing shortage for people with developmental disabilities and mental illness.
- Many service providers blamed the shortage of home and community services on Georgia's low Medicaid reimbursement rates, which have made it hard for providers to keep workers.



KFFHEALTHNEWS.ORG

Georgians With Disabilities Are Still Being Institutionalized,
Despite Federal Oversight - KFF Health News

<https://kffhealthnews.org/news/article/georgia-disabilities-institutionalized-federal-oversight-doj/>

States' approach to SNAP fraud/mistakes may target the wrong people

45

- HR 1 made changes to the SNAP program (FoodShare in Wisconsin) that means states will have to pay penalties if their error rate is too high.
- States are trying different ways to reduce fraud and mistakes (errors) so they don't have to pay more.
- Errors are different than fraud. Errors are unintentional mistakes by SNAP agencies or recipients; fraud is intentional theft.
- SNAP errors occur when the state overpays or underpays SNAP recipients. A mistake like forgetting to report changes to how many people are living in the household or the agency incorrectly calculating household expenses are examples of mistakes that are counted as errors.



<https://stateline.org/2026/02/25/red-states-target-snap-fraud-errors-under-threat-of-costly-federal-penalties/>

States' approach to SNAP fraud/mistakes may target the wrong people

46

- Some people try get SNAP benefits for which they're not eligible, which is fraud.
- But organized electronic SNAP theft by thieves who take control of EBT accounts is a bigger and costlier source of fraud, and the person using SNAP may not know it's happening.
- Thieves use electronic methods such as card skimming or cloning, bot attacks and phishing scams.
- Skimming is a form of theft where devices are illegally installed inside sales terminals at a store and capture card data.
- That data is then used to make unauthorized purchases or steal from the victim's account.



<https://stateline.org/2026/02/25/red-states-target-snap-fraud-errors-under-threat-of-costly-federal-penalties/>

States' approach to SNAP fraud/mistakes may target the wrong people

47

- Staffing shortages, outdated technology and changes to eligibility rules that require oversight are making it harder for state agencies to avoid overpaying or underpaying recipients – the errors that will cost states money under the new federal law.
- Many states are trying to find ways to reduce error rates, but the proposals mostly focus on the SNAP user rather than on the bigger administrative problems that allow most of the fraud and waste to occur.
- Policies like verifying SNAP recipients' eligibility each month – which can involve cross-checking multiple databases or collecting extra documentation – can increase state agencies' workloads without lowering error rates.
- This is especially likely if states don't boost funding to handle the extra paperwork, investigate fraud or resolve recipient and agency errors.



<https://stateline.org/2026/02/25/red-states-target-snap-fraud-errors-under-threat-of-costly-federal-penalties/>