

COUNTY OF EL DORADO

330 Fair Lane
Placerville, CA 95667
(530) 621-5390
(530) 622-3645 Fax

KIM DAWSON
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April 7, 2026

The Honorable Monique Limón
Senate President Pro Tempore
1021 O Street, Suite 8518
Sacramento CA, 95814

The Honorable John Laird
Chair, Senate Committee on Budget and
Fiscal Review
1021 O Street, Suite 8720
Sacramento CA, 95814

The Honorable Roger Niello
Vice Chair, Senate Committee on Budget and
Fiscal Review
1021 O Street, Suite 7110
Sacramento CA, 95814

RE: County H.R. 1 Budget Request

Dear President Pro Tempore Limón, Senator Laird, and Senator Niello,

The County of El Dorado writes to express our commitment to working with your Administration to protect our safety net from the impacts of H.R. 1. This law fundamentally shifts fiscal responsibility for health and human services programs from the federal government to states and counties. In order to prevent our safety net from crumbling, counties need a true partnership with the state. Toward that end, we write to share a multi-year countywide H.R. 1 budget request that was developed jointly with counties and county association partners.

H.R. 1 will increase county health and human services program costs due to expanded demand for indigent medical care, direct cost shifts to counties, increased county eligibility workload, and changes to Medi-Cal financing. The County of El Dorado has projected in recent years that mandated safety net program expenditures will soon exceed the realignment, state, and federal revenue for these programs. El Dorado County has been trying to address this upcoming funding

challenge, but now in one year, due to H.R. 1, find that these mandated programs cannot be sustained without local discretionary revenues. This comes at a time when expenditure growth is outpacing growth in local discretionary revenues; in the current fiscal year the County reduced department's reliance on local discretionary resources by 3% when compared to FY 2024-25.

Statewide counties are anticipating that the impact of these changes could result in county costs ranging from \$6.0 billion to \$9.5 billion annually at full implementation. Counties have collectively developed a reasonable multi-year request for state funding of **\$1.9 billion in 2026-27 and \$4.5 billion in 2027-28** to address these impacts. This request is outlined below and further detailed in the coalition H.R. 1 County Budget Multi-Year Request attachments.

County Indigent Care – \$761 million in 2026-27 and \$2.4 billion in 2027-28 and ongoing

Counties are mandated to provide indigent care to low-income Californians who have no other source of health care. When the Affordable Care Act was implemented and demand for indigent care dramatically reduced, the Realignment funding provided to counties to meet this mandate was redirected by the state. For El Dorado County, indigent care costs averaged \$4 million annually before the Affordable Care Act. With more than one million people estimated to lose Medi-Cal coverage, California residents will come to counties for these services and currently counties do not have a funding source to provide this care on behalf of the state. Counties need funding from the state to provide state-mandated basic health care to roughly 417,000 people, or about one-third of the individuals who are estimated to lose coverage through the new community engagement requirements, seek this care, and be eligible for these services. The indigent care funding request also includes \$200 million in one-time funding in 2026-27 to rebuild the infrastructure that will be needed to provide this care and \$50 million in ongoing funding for public health programs to provide services to individuals who lose health care coverage.

Public Hospital Systems – \$500 million in 2026-27 and \$850 million in 2027-28 and ongoing

County public hospital systems rely on a funding mechanism known as state-directed payments to cover the non-federal share of costs for providing inpatient Medi-Cal services. H.R. 1 reduces the ability of states to use these payments, which will significantly reduce public hospital system revenues. Counties request funding to begin stabilizing public hospital system revenues and protect patient care. Although El Dorado County does not operate a public hospital system, any reductions in service will negatively impact the regional system of hospital care which El Dorado County residents depend upon.

County Eligibility – \$373 million in 2026-27 and \$402 million in 2027-28 and ongoing

The county eligibility workforce plays an essential role in helping individuals and families obtain and retain Medi-Cal coverage and CalFresh benefits. Counties face a substantial increase in

workload as a result of the new Medi-Cal community engagement requirements, more frequent Medi-Cal redeterminations, and reinstated and expanded CalFresh work requirements. El Dorado County anticipates that H.R. 1 will result in the need for local discretionary resources to provide the minimum level of mandated eligibility services. If supplemental funding is not provided for these state-mandated services, El Dorado County may in future years need to cut discretionary services to our senior residents that reduce their use of safety net programs.

The county eligibility request reflects the increased funding that will be needed for counties to implement the new eligibility requirements and maximize the number of people who can obtain exemptions or meet the work requirements to keep their health care and nutrition assistance. It also includes two budget neutral CalFresh items: (1) provide a temporary match waiver allowing counties to draw down full federal funding; and (2) hold counties harmless for penalties occurring outside of county control which are exacerbated by H.R. 1.

County Behavioral Health – \$224 million in 2026-27 and \$828 million in 2027-28 and ongoing

In addition to Medi-Cal specialty mental health services and substance use disorder services, counties provide behavioral health coverage to other individuals. Demand for these services is likely to increase as individuals lose eligibility for Medi-Cal. Existing obligations related to emergency psychiatric placement will be impacted by reductions in community Medi-Cal eligibility, which will directly increase County costs for this essential community safety function. Additionally, loss of eligibility will decrease preventative service availability for individuals with mental health or substance abuse needs, increasing the demand on already taxed County Behavioral Health systems.

Summary

The county H.R. 1 multi-year budget request is intended to mitigate direct harm to El Dorado County residents who will lose health and nutrition services, as well as prevent cuts to other critical services that counties provide such as public safety and elections. With this funding, counties will be able to maximize the number of individuals who retain Medi-Cal and CalFresh, rebuild county indigent care programs to serve individuals who lose health coverage, and protect needed patient care in public hospitals.

El Dorado County is eager to partner with the Legislature and the Administration to find workable fiscal and policy solutions to protect El Dorado County residents. Thank you for your consideration.

Respectfully,

Brooke Laine, Chair
Board of Supervisors
El Dorado County

Attachments:

County H.R. 1 Budget Request Summary
County H.R. 1 Budget Request Analysis

cc: Honorable Members, Senate Committee on Budget and Fiscal Review
(see below)
Mariana Corona Sabeniano, Chief of Staff, Office of Senate President pro Tempore
Monique Limón
mariana.sabeniano@sen.ca.gov
Elisa Wynne, Staff Director, Senate Committee on Budget and Fiscal Review
Elisa.Wynne@sen.ca.gov
Kirk Feely, Fiscal Director, Senate Republican Caucus
kirk.feely@sen.ca.gov
Gabriel Petek, Legislative Analyst, Legislative Analyst's Office
Gabe.Petek@lao.ca.gov
Carolyn Chu, Chief Deputy Legislative Analyst, Legislative Analyst's Office
Carolyn.Chu@lao.ca.gov

Honorable Members, Senate Committee on Budget and Fiscal Review:

senator.laird@senate.ca.gov
senator.niello@senate.ca.gov
senator.durazo@senate.ca.gov
senator.grove@senate.ca.gov
senator.menjivar@senate.ca.gov
senator.archuleta@senate.ca.gov
senator.blakespear@senate.ca.gov
senator.cabaldon@senate.ca.gov
senator.choi@senate.ca.gov
senator.hurtado@senate.ca.gov
senator.mcnerney@senate.ca.gov

senator.ochoabogh@senate.ca.gov
senator.perez@senate.ca.gov
senator.reyes@senate.ca.gov
senator.seyarto@senate.ca.gov
senator.smallwood-cuevas@senate.ca.gov
senator.weberpierson@senate.ca.gov
senator.richardson@senate.ca.gov