

# Trump's plan to slash Medicaid will harm older women – and the economy

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From supporting healthy pregnancies and children to helping disabled people flourish, from providing critical health care for low-income families to supporting older Americans in their final years, Medicaid helps Americans thrive. Medicaid is essential for the 72 million people who rely on the program for health care. Additionally, it is a critical contributor to our economy by directly supporting the jobs of millions of U.S. health care workers in communities across the country, especially in rural areas.

Yet, Congressional Republican leaders and the Trump administration intend to slash Medicaid funding by implementing unnecessary and costly work requirements and reducing essential federal funds through per capita caps and block grants – all of which amount to cuts to the services people rely on.

**The federal government plays a crucial role in financing the Medicaid program and any reductions in those funds has the potential to threaten the health and wellbeing of Medicaid enrollees, particularly older women and disabled women.**

Almost 1 in 5 Americans ages 50 to 64 receive their health insurance through Medicaid, and almost half of these beneficiaries are disabled. Medicaid is also crucial for millions of low-income people dually enrolled in Medicare, 60 percent of whom are women. Slashing Medicaid cuts access to affordable Medicare for millions of older and disabled women. This especially impacts Long-Term Supports and Services (LTSS), which help people with disabilities, older adults and those with chronic conditions live their daily lives. An estimated 56 percent of people age 65 or older will require LTSS throughout their lifetime. Medicaid is currently the payer of 44 percent of LTSS and is the primary payor for 63 percent of all nursing home residents.

**Older women, including women of color and disabled women, could be especially impacted by Medicaid cuts**

The Trump administration has proposed trillions of dollars in radical cuts to federal spending, including Medicaid, and the House Republicans have directed the committee

which oversees Medicaid to slash spending by \$880 billion over a decade to pay for tax cuts. To illustrate the potential harm of cuts to Medicaid, Jeanne Lambrew translated the potential impact of Medicaid cuts into programmatic impacts, including cutting the number of program participants. We extend her analysis to illustrate how cutting \$880 billion from Medicaid could harm older women of color, veterans and disabled women.

**We estimate that an \$880 billion cut to Medicaid over the next decade is the equivalent of cutting the number of annual Medicaid beneficiaries by nearly 4.8 million recipients ages 65 and older.** Of these 4.8 million seniors:

- Nearly 60 percent – 2.8 million – are women.
- More than 1.3 million older women of color would lose benefits, including 462,900 Black women, 512,900 Latinas, 238,000 Asian American, Native Hawaiian and Pacific Islander women, and 18,300 American Indian/Alaska Native women.
- Nearly 1.7 million disabled women ages 65 and older would lose benefits.
- Nearly 448,000 older veterans, including 29,500 women, would lose benefits.
- We also find that women account for the majority of seniors receiving Medicaid in every state. Older Medicaid recipients are especially likely to be women in Alabama, Connecticut, New Jersey and Maine.

## **Cutting Medicaid harms the health care workforce and the economy**

Given its critical role in funding the health care workforce, cutting Medicaid would harm the economy. Direct care workers – key supports to seniors and their families – are overwhelmingly women and disproportionately women of color whose work is dramatically undervalued and underpaid. Yet the direct care workforce is also one of the fastest growing industries, increasing from 3.5 million workers in 2014 to over 5 million workers in 2023. Coupled with America’s aging population, we are facing a shortage in direct care workers.

Medicaid is critical for the direct care field. These workers not only frequently rely on Medicaid for their health insurance, it also supports their livelihood. Yet we estimate that the House majority proposal to cut \$880 billion from Medicaid could pay the salaries of more than 1.9 million full-time personal care providers on average each year. Thus, **reductions in Medicaid could end up costing workers their jobs, thus increasing unemployment and likely reducing GDP, all of which harms local economies.**

Medicaid allows older American women to live fulfilling lives and supports the direct care workforce. Funding Medicaid is an investment in our country’s future and efforts to cut Medicaid harm us all.

## Seniors in Every State Would be Harmed by Cuts to Medicaid

State	Seniors	Women seniors	Share who are women
Alabama	76,100	48,000	63.1%
Alaska	9,500	4,900	51.6%
Arizona	99,900	56,300	56.4%
Arkansas	42,800	25,900	60.6%
California	708,800	417,500	58.9%
Colorado	61,800	34,900	56.5%
Connecticut	66,600	42,200	63.4%
Delaware	14,300	7,900	55.7%
District of Columbia	14,300	8,800	61.8%
Florida	394,900	234,100	59.3%
Georgia	142,700	86,600	60.7%
Hawaii	19,000	10,300	54.2%
Idaho	19,000	10,900	57.4%
Illinois	152,200	91,600	60.2%
Indiana	80,900	49,400	61.1%
Iowa	38,100	22,900	60.1%
Kansas	28,500	17,300	60.6%
Kentucky	66,600	39,400	59.2%
Louisiana	80,900	48,600	60.1%
Maine	28,500	17,800	62.4%
Maryland	76,100	46,600	61.2%
Massachusetts	133,200	80,300	60.3%
Michigan	142,700	83,100	58.2%
Minnesota	57,100	32,400	56.7%
Mississippi	52,300	31,800	60.7%
Missouri	61,800	36,600	59.2%
Montana	14,300	7,700	53.9%
Nebraska	19,000	11,100	58.1%

<b>Nevada</b>	38,100	22,100	58.0%
<b>New Hampshire</b>	9,500	5,500	57.3%
<b>New Jersey</b>	118,900	74,300	62.5%
<b>New Mexico</b>	38,100	21,200	55.8%
<b>New York</b>	456,700	270,400	59.2%
<b>North Carolina</b>	133,200	80,500	60.4%
<b>North Dakota</b>	9,500	5,600	58.9%
<b>Ohio</b>	142,700	83,800	58.7%
<b>Oklahoma</b>	42,800	26,100	60.9%
<b>Oregon</b>	66,600	37,400	56.2%
<b>Pennsylvania</b>	195,000	117,000	60.0%
<b>Rhode Island</b>	19,000	11,900	62.3%
<b>South Carolina</b>	71,400	43,200	60.5%
<b>South Dakota</b>	14,300	8,000	56.2%
<b>Tennessee</b>	90,400	53,600	59.3%
<b>Texas</b>	314,000	186,500	59.4%
<b>Utah</b>	23,800	13,900	58.4%
<b>Vermont</b>	9,500	5,600	58.8%
<b>Virginia</b>	76,100	45,800	60.2%
<b>Washington</b>	85,600	49,400	57.7%
<b>West Virginia</b>	28,500	17,300	60.5%
<b>Wisconsin</b>	71,400	42,400	59.4%
<b>Wyoming</b>	4,800	2,500	52.2%
<b>National</b>	4,757,300	2,826,300	59.4%

Source: National Partnership for Women & Families and Justice in Aging analysis of the number of seniors who would lose benefits annually if \$880 billion in cuts to Medicaid over 10 years were applied directly to seniors' benefits. Analysis uses Congressional Budget Office and American Community Survey 2023 one-year dataset. Totals may not add due to rounding. See methods note for additional detail.

For methodological information about this analysis see the online version [here](#).

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The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help all people meet the dual demands of work and family. More information is available at [NationalPartnership.org](https://NationalPartnership.org).

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