

Effective Dates of Health Provisions in OBBBA of 2025

	2025				2026				2027				2028				2029			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	ACA provisions				Medicaid provisions				Medicare provisions				Commercial insurance				Other health provisions			
Sec. 71304. Disallowing Premium Tax Credit in Case of Certain Coverage Enrolled in During Special Enrollment Period					▶ Jan 1, 2026															
Sec. 71305. Eliminating Limitation on Recapture of Advance Payment of Premium Tax Credit					▶ Jan 1, 2026															
Sec. 71302. Disallowing Premium Tax Credit During Periods of Medicaid Ineligibility Due to Alien Status									▶ Jan 1, 2027											
Sec. 71301. Permitting Premium Tax Credit Only For Certain Individuals									▶ Jan 1, 2027											
Sec. 71303. Requiring Exchange Verification of Eligibility for Health Plan													▶ Jan 1, 2028							
Sec. 71101. Moratorium on Implementation of Rule Relating to Eligibility and Enrollment in Medicare Savings Programs			▶ Date of enactment																	
Sec. 71102. Moratorium on implementation of rule relating to eligibility and enrollment for Medicaid, CHIP, and the Basic Health Program			▶ Date of enactment																	
Sec. 71111. Moratorium on implementation of rule relating to staffing standards for long-term care facilities under the Medicare and Medicaid programs			▶ Date of enactment																	

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Sec. 71113. Federal Payments to Prohibited Entities			► Date of enactment for a one-year period																	
Sec. 71115. Provider Taxes			► Date of enactment for freeze on provider taxes									► Oct 1, 2027 Phase down begins for provider tax safe harbor from 6% for expansion states								
Sec. 71116. State Directed Payments			► Date of enactment for freeze on total SDPs										► Jan 1, 2028 Phase down begins of state payments to providers							
Sec. 71117. Requirements Regarding Waiver of Uniform Tax Requirement for Medicaid Provider Tax			► Date of enactment																	
Sec. 71114. Sunsetting Increased FMAP Incentive					► Jan 1, 2026															
Sec. 71119. Requirement for States to Establish Medicaid Community Engagement Requirements for Certain Individuals						► June 1, 2026 CMS interim final rule on work requirements due			► Jan 1, 2027 States must implement work requirements or seek one or two-year good faith delay							► Jan 1, 2029 All states must implement work requirements				
Sec. 71109. Alien Medicaid Eligibility								► Oct 1, 2026												
Sec. 71110. Expansion FMAP for Emergency Medicaid								► Oct 1, 2026												

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Sec. 71112. Reducing State Medicaid Costs									► Jan 1, 2027											
Sec. 71107. Eligibility Redeterminations									► Jan 1, 2027											
Sec. 71104. Ensuring Deceased Individuals Do Not Remain Enrolled									► Jan 1, 2027											
Sec. 71118. Requiring Budget Neutrality for Medicaid Demonstration Projects Under Section 1115									► Jan 1, 2027											
Sec. 71103. Reducing Duplicate Enrollment Under the Medicaid and CHIP Programs									► Jan 1, 2027 States must establish a process to regularly obtain enrollment and address information										► Oct 1, 2029 States must submit monthly enrollee data to HHS	
Sec. 71105. Ensuring Deceased Providers Do Not Remain Enrolled													► Jan 1, 2028							
Sec. 71108. Revising Home Equity Limit for Determining Eligibility for Long-Term Care Services Under the Medicaid Program													► Jan 1, 2028							

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Sec. 71121. Making Certain Adjustments to Coverage of Home or Community-Based Services Under Medicaid															► July 1, 2028					
Sec. 71120. Modifying Cost Sharing Requirements for Certain Expansion Individuals Under the Medicaid Program																► Oct 1, 2028				
Sec. 71106. Payment Reduction Related to Certain Erroneous Excess Payments Under Medicaid																			► Oct 1, 2029	
Sec. 71202. Temporary Payment Increase Under the Medicare Physician Fee Schedule to Account for Exceptional Circumstances					► Jan 1, 2026															
Sec. 71203. Expanding and Clarifying the Exclusion for Orphan Drugs Under the Drug Price Negotiation Program													► Jan 1, 2028							
Sec. 71201. Limiting Medicare Coverage of Certain Individuals													► Jan 4, 2028 (18 months post enactment)							

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► Jan 1, 2025																					
				► Jan 1, 2026																	
				► Jan 1, 2026																	
		► After date of enactment																			
		► Oct 1, 2025 \$10 B available to CMS to allocate to states		► Dec 31, 2025 Deadline for CMS approval of one-time state applications for grants				► Oct 1, 2026 \$10 B available				► Oct 1, 2027 \$10 B available				► Oct 1, 2028 \$10 B available				► Oct 1, 2029 \$10 B available	