

2026 Supplemental Budget Comparison 2.23.25

Item	Governor’s Supp Budget 12/22/25	House Budget 2/22/26	Senate Budget 2/22/26
<p>Assisted Living Rebase</p>	<p>-\$45M Total Funds (-\$21M GF-S) Delayed to July 1, 2027. Medicaid rates remain at 81.7% of 2022 benchmark wages and costs.</p>	<p>-\$45M Total Funds (-\$21M GF-S) Delayed to July 1, 2027. Medicaid rates remain at 81.7% of 2022 benchmark wages and costs.</p>	<p>Fully funded on schedule July 1, 2026. Medicaid rates move to 81.7% of 2024 benchmark wages and costs.</p>
<p>Assisted Living Bridge Rates (~\$21 ppd)</p>	<p>Held at current rate</p>	<p>Held at current rate.</p>	<p>Reduced: -\$8M Total Funds (-\$4M GF-S) Limited to the amount necessary to prevent a decrease in the total per resident day rate after accounting for the rate increase from the rebase. (If you are getting a Bridge Rate, it will remain frozen at the total rate level.</p>
<p>Skilled Nursing Facility Rates \$376/ppd = Statewide Average</p>	<p>-\$102M Total Funds (-\$49M GF-S) \$354/ppd = Statewide Average Delayed rebase to July 1, 2027.</p> <ul style="list-style-type: none"> Removes Gap Funding that keeps individual providers from falling off a rate cliff due to one-time budget maneuvers. 	<p>\$395/ppd = Statewide Average Held July 1, 2026, rates at last year’s appropriated level.</p>	<p>-\$20M Total Funds (-\$10M GF-S) \$382/ppd =Statewide Average Still assessing impacts at the individual provider level.</p> <ul style="list-style-type: none"> Fully funds July 1, 2026, rebase. Phases down rate add-ons by 50% that were put in place to prevent providers from falling off a fiscal cliff when one-time budget items were shut off.
<p>Specialized Dementia</p>	<p>No proposal</p>	<p>-\$660k Total Funds (-\$360k GF-S) Eliminates the specialized dementia care plus \$204 daily rate add-on and shifts 29 clients onto the specialized dementia care enhanced \$140 daily rate add-on.</p>	<p>-\$660k Total Funds (-\$360k GF-S) Savings are achieved by reducing enhanced behavior support services for clients receiving Specialized Dementia Care.</p>
<p>Behavioral Health Work Group</p>	<p>None</p>	<p>None</p>	<p>+\$100k for a task force to include ALs, ESFs, and AFHs that serve community behavioral health supports & intensive behavioral support supervision program.</p> <p>Goal: Improve system-wide efficiencies, data-driven outcomes, and cost effectiveness of these programs.</p>
<p>HR1 Eligibility: Providing certain services to undocumented immigrants(non-citizens). Federal law restricts eligibility; states that want to expand access must pay entirely with state revenue.</p>	<p>+\$7.6M GF-S (No Federal Match) 500 non-citizen slots. No phase-in.</p>	<p>+\$19.1M GF-S (No Federal Match) Phase-in 1,162 non-citizen slots.</p>	<p>+\$19.1M GF-S (No Federal Match) 600 non-citizen slots beginning October 1, 2026; phase up to 1,162 in the next biennium.</p>

*State Accounts used to fund long-term care are as follows: **GF-S** → General Fund – State (state tax dollars, collected revenue); “Total funds” includes GF-S and federal Medicaid matching funds.