



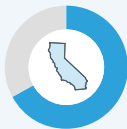
Medicaid Matters to California's 22nd Congressional District (CA-22)

California's Medicaid Program (Medi-Cal) is a lifeline for the Central Valley

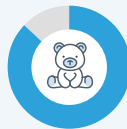
Medi-Cal provides health coverage for children, agricultural workers, veterans, vulnerable seniors, people with disabilities, and many more people in California's Central Valley.¹

Medicaid also serves as the core financial backbone of the Central Valley's health system, paying for care and services at local clinics and hospitals and serving as a critical engine for the local economy.

In CA-22, Medi-Cal Serves:



A total of 527,192 people — **67% of all residents living in the district**; CA-22 has one of the highest Medicaid enrollment counts in the country.²

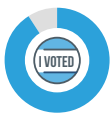


A total of 225,525 children³ — **87% of all children** in the district.⁴



A total of **53,187 seniors** and **adults with disabilities**.⁵

Millions of Californians will lose health coverage and care if Congress cuts or caps Medicaid funding, forcing the state to offset budget holes by throwing people off coverage, cutting provider reimbursement and/or eliminating essential health services. Any cut to Medicaid is a direct attack on the health and financial security of people living in the Central Valley and runs counter to the will of the vast majority of voters from across political parties who want Congress to continue to guarantee coverage for low-income people through Medicaid.⁶



A total of **91% of Central Valley voters** polled in 2024 said health care is “extremely” or “very” important for their government to focus on, with reducing costs and increasing access to care listed as top priorities.⁷



A total of **73% of all Californians** say Medicaid should be kept as is today.⁸

Protecting Medicaid Means:

CHILDREN IN CA-22

Have newborn care, checkups, care for diabetes and asthma, and more.

Stay healthy and ready to learn, miss fewer school days, graduate from high school and earn more as adults.⁹



FAMILIES IN CA-22

Have access to cancer screenings, mental health and substance use disorder treatment, and diabetes and blood pressure medications.

Have less risk of medical debt and eviction and can buy groceries or pay rent.¹⁰



SENIORS IN CA-22

Have access to nursing home care, transportation to medical appointments and home health services.

Stay healthy and receive needed care in their homes and communities.



Medicaid keeps families and farmworkers in CA-22 healthy and working

Many low-wage jobs either do not offer health coverage or offer coverage that is unaffordable. This is particularly true for agricultural communities like the Central Valley. Medicaid provides health coverage for workers at these jobs so they can remain healthy and earn income for their families.

- **At least 120,000 low-wage workers** in CA-22 are covered by Medi-Cal.¹¹
- **92% of adults** covered by Medicaid nationwide either work, care for a family member, have an illness or disability, or attend school.¹²
- **54% of California farmworkers** with health coverage are covered by Medicaid.¹³ One in three farmworkers have at least one chronic condition, such as diabetes or high blood pressure.¹⁴

Cutting Medicaid would make our country's affordability crisis much worse for families in the Central Valley who already face significant health care costs.

Medicaid is the bedrock of health systems in CA-22

Medi-Cal keeps hospitals in the Central Valley open. For example, it pays for nearly half of all hospital services provided at Adventist Health Hanford.¹⁵ If Medicaid is cut, Adventist will treat more uninsured people, and the amount of uncompensated care will increase. A total of 11% of residents are already uninsured in CA-22¹⁶ — increased losses in patient revenue would put Adventist and access to care for the whole community at risk.

Medi-Cal is also one of the most important tools in combating the behavioral health crisis in the Central Valley as the **largest payer of mental health care, substance use disorder treatment** and other community services to curb the opioid epidemic.¹⁷ And **2/3 of California's nursing home residents** are covered by Medicaid.¹⁸

Medicaid stabilizes California's state and local economies

Medicaid is the largest source of federal dollars for California, providing almost one-third of all federal funding to the state.¹⁹ Medicaid dollars directly ensure that counties across California can deliver essential health care without depleting resources reserved for other essential services, including public safety, transportation, housing and education.

Cutting Medicaid would make our country's affordability crisis much worse. Americans from all backgrounds just voted for economic security, imploring their representatives to lower costs on everyday needs including health care. Cutting Medicaid would be a direct betrayal to constituents by making health care more unaffordable. **Families in the Central Valley already face significant health care costs:**

- **75% report being unable to afford** out-of-pocket health expenses or medical bills.
- **63% report skipping or delaying** needed care due to cost.
- **48% have medical debt.**²⁰

Congress has the responsibility to stand with our nation's families by protecting Medicaid and opposing any attempts to weaken this core source of coverage and care for Californians.

Endnotes

- ¹ Katherine Wilson, “How Many in Your Congressional District Get Medi-Cal or a Premium Subsidy Through Covered California?” California Health Care Foundation, January 22, 2025, <https://www.chcf.org/publication/how-many-congressional-district-get-medi-cal-premium-subsidy-through-covered-california/#related-links-and-downloads>.
- ² California Department of Health Care Services (HCS), “Medi-Cal Certified Eligible Counts by Legislative Districts and Aid Category—July 2024 Month of Enrollment,” updated January 2025, <https://www.dhcs.ca.gov/dataandstats/statistics/Documents/Preliminary-Medi-Cal-Legislative-Districts-July2024.pdf>.
- ³ Ibid.
- ⁴ Families USA analysis of HCS, “Medi-Cal Certified Eligible Counts” and United States Census Bureau, “Public Health Insurance Coverage by Type and Selected Characteristics,” Table S2704, ACS 1-Year Estimates Subject Tables, 2023, accessed February 5, 2025, <https://data.census.gov/table/ACSST1Y2023.S2704?t=Health+Insurance&g=500XX00US0622>.
- ⁵ Families USA analysis of HCS, “Medi-Cal Certified Eligible Counts.”
- ⁶ Grace Sparks, Robin Rudowitz, and Ashley Kirzinger, “Public Opinion on the Future of Medicaid: Results from the KFF Medicaid Unwinding Survey and KFF Health Tracking Poll,” Henry J. Kaiser Family Foundation (KFF), June 4, 2024, <https://www.kff.org/medicaid/poll-finding/public-opinion-on-the-future-of-medicare-kff-medicare-unwinding-kff-health-tracking-poll/>.
- ⁷ California Health Care Foundation, “New CHCF Survey on Central Valley Health Care Experiences,” April 12, 2024, <https://www.chcf.org/press-release/new-chcf-survey-on-central-valley-health-care-experiences/>.
- ⁸ NORC at the University of Chicago, “Poll Explores Californians’ Attitudes on Medi-Cal, Covered California, and Federal Cuts to Both,” California Health Care Foundation, March 3, 2025, <https://www.chcf.org/publication/poll-californian-attitudes-medi-cal-covered-ca-federal-cuts/#poll-questions>.
- ⁹ Georgetown University McCourt School of Public Policy, Center for Children and Families, “How Medicaid Supports Student Success,” accessed March 11, 2025, <https://ccf.georgetown.edu/2025/01/09/how-medicare-supports-student-success/>.
- ¹⁰ David U. Himmelstein, Samuel L. Dickman, Danny McCormick, et al., “Prevalence and Risk Factors for Medical Debt and Subsequent Changes in Social Determinants of Health in the US,” *JAMA Network Open* 5, no. 9 (2022): e2231898, [doi:10.1001/jamanetworkopen.2022.31898](https://doi.org/10.1001/jamanetworkopen.2022.31898); Raymond Kluender, Neale Mahoney, Francis Wong, et al., “Medical Debt in the US, 2009–2020,” *JAMA* 326, no. 3 (2021):250–256, [doi:10.1001/jama.2021.8694](https://doi.org/10.1001/jama.2021.8694).
- ¹¹ U.S. Census Bureau, “Public Health Insurance Coverage by Type and Selected Characteristics.”
- ¹² Elizabeth Hinton and Robin Rudowitz, “5 Key Facts About Medicaid Work Requirements,” KFF, February 18, 2025, <https://www.kff.org/medicaid/issue-brief/5-key-facts-about-medicare-work-requirements/#:~:text=Among%20adults%20under%20age%2065,not%20working%20due%20to%20caregiving>.
- ¹³ Insure the Uninsured Project, “Making Medi-Cal Work for California Farmworkers,” December 2023, [FINAL.ITUP-Making-Medi-Cal-Work-For-Farmworkers-Dec23.pdf](https://www.insuretheuninsured.org/wp-content/uploads/2023/12/FINAL.ITUP-Making-Medi-Cal-Work-For-Farmworkers-Dec23.pdf).
- ¹⁴ Paul Brown, Edward Flores, and Ana Padilla, “Farmworker Health in California: Health in a Time of Contagion, Drought, and Climate Change,” The University of California Merced, Community Labor Center and California Department of Health, 2022, accessed March 11, 2025, https://clc.ucmerced.edu/sites/clc.ucmerced.edu/files/page/documents/fwhs_report_2.2.2383.pdf.
- ¹⁵ National Academy for State Health Policy, “Hospital Cost Tool,” last updated February 7, 2025, <https://tool.nashp.org/>.
- ¹⁶ U.S. Census Bureau, “Selected Characteristics of Health Insurance Coverage in the United States,” Table S2701, ACS 1-Year Estimates Subject Tables, 2023, accessed February 4, 2025, <https://data.census.gov/table/ACSST1Y2023.S2701?t=Health+Insurance&g=500XX00US0622>.
- ¹⁷ Faith Mabry, “House Passes Congressman Valadao’s Legislation to Combat Substance Use Disorder,” Congressman

David G. Valadao, California's 22nd Congressional District, press release, December 12, 2023, <https://valadao.house.gov/news/documentsingle.aspx?DocumentID=975>.

¹⁸ California Association of Health Facilities (CAHF), "Facts and Statistics: Long-Term Care Providers," revised March 2021, <https://www.cahf.org/About/Consumer-Help/Facts-and-Statistics>.

¹⁹ National Association of State Budget Officers (NASBO), *2024 State Expenditure Report: Fiscal Years 2022–2024* (Washington, D.C.: National Association of State Budget Officers, 2024), https://higherlogicdownload.s3.amazonaws.com/NASBO/9d2d2db1-c943-4f1b-b750-0fca152d64c2/UploadedImages/SER%20Archive/2024_SER/2024_State_Expenditure_Report_S.pdf.

²⁰ Jen Joynt, Rebecca Catterson, and Emily Alvarez, "The 2024 CHCF Central Valley Health Policy Survey: Local Residents Share Health Care Opinions and Experiences," California Health Care Foundation, April 11, 2024, <https://www.chcf.org/publication/the-2024-chcf-central-valley-health-policy-survey/>.

This publication was written by the following Families USA staff:

Mary-Beth Malcarney, Senior Advisor on Medicaid Policy

Ben Anderson, Deputy Senior Director, Health Policy

Mackenzie Marshall, Government Relations Manager

The following Families USA staff contributed to the preparation of this material
(listed alphabetically):

Nicholas Chang, Policy Analyst

Nichole Edralin, Associate Director, Design and Publications

Sweta Haldar, Senior Policy Analyst

Bailey Reavis, Senior Government Relations Manager

Jen Taylor, Senior Director, Government Relations

Sophia Tripoli, Senior Director, Health Policy

Kiersten Zinyengere, Communications Manager

