



October 2025
Public Policy & Government Relations Update
Volume 1: Issue 8

Introduction

This October edition of the Public Policy and Government Relations (*PPGR*) update focuses on three areas, a reminder to vote, a summary of the unprecedented pressures on Medicaid and HIV services because of HR1 and an update about the federal shutdown. We also provide a summary of the ways in which PPGR is engaging with decision makers and advocates to make a difference.

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Early Voting Schedule for October & November

(Times may differ outside of New York City)

GET OUT AND VOTE

VOTE Early or on Nov 4, 2025

Find your early, or day of election
polling site:

NYS and NYC -

<https://voterlookup.elections.ny.gov/>

NYC - <https://www.vote.nyc/elections>
or call 311

Outside of NYS -

<https://www.vote.org/polling-place-locator/>



Early Voting Dates	Early Voting Hours
Saturday, October 25, 2025	9AM to 5PM
Sunday, October 26, 2025	9AM to 5PM
Monday, October 27, 2025	9AM to 5PM
Tuesday, October 28, 2025	10AM to 8PM
Wednesday, October 29, 2025	10AM to 8PM
Thursday, October 30, 2025	9AM to 5PM
Friday, October 31, 2025	8AM to 4PM
Saturday, November 1, 2025	9AM to 5PM
Sunday, November 2, 2025	9AM to 5PM

***Please see information specific to the NYC ballot initiatives under Additional Reading on page 7
(There are a total of 6 initiatives on the ballot)***

The Federal Shutdown

The federal government has been shut down since October 1, 2025, because Congress failed to pass a budget. The two parties in power disagree on how to move forward with funding the government. The Republican party wants to continue funding government at current levels until the middle of November, and the Democrats are demanding that Congress act to fix health care cuts which will start impacting people starting November 1, 2025. These cuts will cause the cost of insurance to increase dramatically, causing millions of people across the United States to become uninsured. As you know, from past readings, these cuts are largely a result of HR1.

A government shutdown occurs when Congress fails to pass the legislation needed to fund federal government agencies and operations. This results in a lapse in funding that forces a cessation of the most non-essential government functions and doesn't just affect federal employees, it also threatens the health and well-being of some of the most vulnerable people in our communities.

Nonprofit health insurance plans such as Amida Care, which serve people with complex needs — including transgender individuals, people living with HIV/AIDS, and others with serious health challenges, rely heavily on federal funding and support to operate. The effect of a shut down on Medicaid depends on how long it will last. Since Medicaid is a mandatory program, it remains funded, however Medicaid payment delays may occur because the federal staff who oversee the program may not continue to work.

Other critical programs such as federal food assistance (*Supplemental Nutrition Assistance Program or SNAP*) will run out of funding as of November 1, 2025. The Trump administration has notified states that it will **not** act to provide emergency funding for the program. As a result over 3 million New Yorkers, including children, are at risk of losing access to critical food assistance.

Today, Thursday October 30, 2025, Governor Hochul announced \$65 Million in new state funds for Emergency Food Assistance, providing 40 Million meals to New Yorkers to mitigate the impact. However, the state funding is not a replacement for SNAP.

In addition, federal heating assistance for more than 1.5 million New Yorkers is also delayed indefinitely.

As of the time this writing, there are no indications that Congress is near an agreement that will end the shutdown.

Impacts on Medicaid Due To Looming Threats

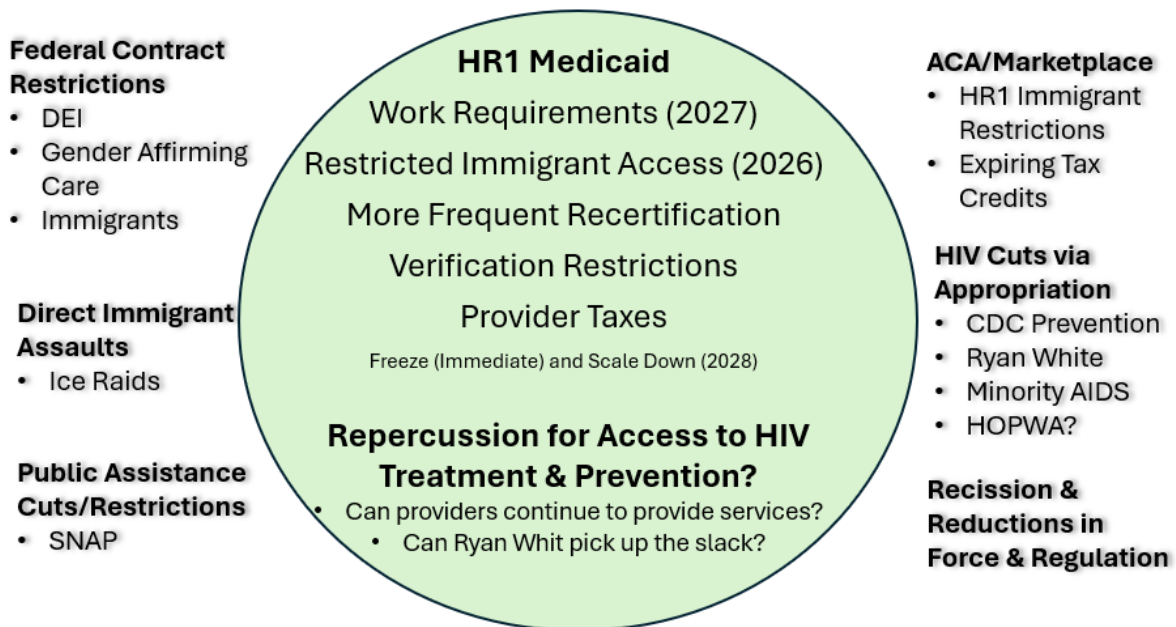
During a government shutdown, existing Medicaid and Medicare benefits continue for beneficiaries because their funding is considered mandatory spending. However, the shutdown can cause administrative delays and other disruptions due to staffing cuts at federal agencies. We are closely monitoring this.

Please see the section “Shutdown Impacts on Mandatory Programs” for more information related to the Government shutdown.

Big Picture – Threats to HIV and Medicaid

The diagram below depicts the federal threats to Medicaid and the HIV care delivery system.

Unprecedented Threats and Uncertainty



PPGR Engagements and Events

ACAP Fly In

On October 7 to 8, Joe Pressley joined CEO Doug Wirth for policy meetings in Washington D.C. with the Association for Community Affiliated Plans (ACAP). These meetings included a focus on federal updates and advocacy efforts and strategies.

On November 4 to 6, Joe will be going to Washington D.C. once again to join ACAP. This time there will be federal updates and meetings with Congressional and Senate legislative offices.

The Association for Community Affiliated Plans (ACAP) is the national trade association which represents not-for-profit Safety Net Health Plans. Collectively, ACAP plans serve more than 30 million enrollees through Medicaid, Medicare, Marketplaces and other public health coverage programs.

ViiV HIV Medicaid Round Table Presentation

On October 22, 2025, Lyndel Urbano and Rachel Klein from the AIDS Institute facilitated a presentation and discussion with federal HIV advocates. The presentation focused on summarizing the looming threats to HIV and Medicaid, as shown above in the diagram. The discussion focused on how the community can respond to the threats and take immediate action to mitigate impacts on people living with HIV. Pending Medicaid work requirements was a hot topic during the discussions. An issue was the need for action at the state and federal level to exempt people living with HIV from the requirements. Advocates will need to comment during the regulatory processes at the state and federal level for this to occur. PPGR is directly facilitating ways for this to happen.

National Minority AIDS Council (NMAC) Convening on PrEP

On October 29, Amida Care participated in a NMAC working meeting in Washington D.C. that brought together passionate leaders and advocates from across the country to launch an action-oriented coalition dedicated to safeguarding and strengthening PrEP coverage, especially for communities most impacted by HIV. Together, we will build a united front to ensure that lifesaving prevention services remain accessible, equitable, and fully supported. We will keep you posted on further outcomes from this session.

In Our Own Voices (IOOV) Presentation on Longer Acting Injectables

On October 30, 2025, Lyndel Urbano presented at the Unity In Diversity conference hosted by In our Own Voices in Albany, NY. The presentation focused on Longer Acting agents for HIV prevention.

SOMOS

Lyndel Urbano is joining a panel and hosting a reception on behalf of Amida Care at the SOMOS Puerto Rico conference in San Juan on November 5th to 8th. We are also happy to share that Pedro Carneiro from Health Services is joining Lyndel at SOMOS!

SOMOS, Inc., is a nonpartisan, nonprofit organization committed to addressing the needs of Hispanic youth and the community in New York State. The conferences gather many stakeholders from both the public, private and legislative sectors, including elected officials. This is an important opportunity to share our policy goals and show the important role that organizations like Amida Care play in the efforts to ending the epidemic.

HIV Medicaid Coalition Letter

Amida Care organized over 30 members of the HIV Medicaid Coalition, which we help coordinate, to send a letter to congressional leadership and New York's congressional delegation. The letter is a reminder of the 60th anniversary of Medicaid this year. The Medicaid program faces unprecedented threats due to HR1 cuts. The letter goes on to outline the impacts of HIV cuts and the danger of upending the efforts to end the HIV epidemic. The goal of the letter is to call on Congress to act to safeguard Medicaid, health care access and HIV funding. [Please see letter on page 6.](#)

October 22, 2025

The Honorable Charles E. Schumer
United States Senate
Washington, DC 20510

The Honorable Kirsten Gillibrand
United States Senate
Washington, DC 20510

The Honorable Members of the New York Congressional Delegation
United States House of Representatives
Washington, DC 20515

CC: The Honorable Kathy Hochul
Governor of the State of New York
Albany, NY 12224

Dear Senators Schumer and Gillibrand and Members of the New York Congressional Delegation,

This year marks the 60th anniversary of Medicaid, one of our nation's most transformative public health programs. Since 1965, Medicaid has ensured that millions of low-income Americans—including countless New Yorkers—can access essential medical care, preventive services, and lifesaving treatment. In New York, Medicaid has been a cornerstone of health equity, supporting hospitals, community-based providers, and efforts to reduce disparities across generations.

On behalf of the Statewide HIV Medicaid Coalition, representing providers and community organizations serving New Yorkers living with or at risk for HIV, we write to both celebrate this milestone and express deep concern over cuts to Medicaid, Medicare, and ACA-funded programs under HR1, as well as proposed reductions in federal HIV funding. Together, these actions not only threaten to dismantle six decades of progress and undermine New York's HIV care delivery system but will also move us away from the goal of ending the epidemic. These cuts will severely limit access to HIV prevention tools such as PEP and PrEP, putting more New Yorkers at risk and threatening the health of our communities.

As of May 2025, Medicaid covered nearly 7 million New Yorkers. HR1 is projected to **eliminate \$13 billion in annual healthcare funding**, including \$8 billion in hospital losses and \$300 million for community health centers, while shifting an additional \$3 billion in costs to New York State. These cuts could result in **1.5 million people losing coverage** and **65,000 healthcare jobs lost**.

If the FY 2026 Labor-HHS Appropriations Act is enacted into law, it would:

- **Defund the entire Ending the HIV Epidemic (EHE) Initiative**, totaling \$542 million across the Ryan White Program, CDC, and HRSA Community Health Center PrEP funding.
- **Eliminate Ryan White Parts C, D, and F**, cutting over \$360 million for early intervention, training, and community-based services.
- **Eliminate \$793 million in CDC HIV prevention funding and combine \$330 million for STI, TB, and opioid-related infectious disease prevention** into a single block grant to states.
- **Eliminate the SAMHSA Minority HIV/AIDS Fund** (\$119 million) and slash the **Office of the HHS Secretary's Minority HIV/AIDS Fund** by \$20 million.

Medicaid and related coverage programs are the backbone of HIV care in New York. Cuts will make it harder for people to get appointments, stay connected to care, and maintain medication adherence—driving preventable HIV infections and higher healthcare costs. The CDC estimates prevention efforts from 2017–2022 averted 9,000 infections and \$5 billion in lifetime medical costs. Ending such programs could cause over 213,000 new HIV cases and 10,600 deaths by 2030 (*AIDS and Behavior*, April 2025).

We urge you to act quickly to:

1. **Reverse Medicaid cuts**, including limits on provider taxes and state-directed payments.
2. **Continue enhanced ACA premium tax credits** to keep coverage affordable.
3. **Reject HR1 administrative restrictions**, including work requirements and excessive recertifications, that serve only to block access to coverage—not expand it.

As we commemorate six decades of Medicaid's success, we ask you to honor its legacy by protecting the programs that sustain health and dignity for all New Yorkers.

For questions regarding this letter, please contact: Joe Pressley, Vice President of Public Policy and Government Relations, Amida Care (jpressley@amidacareny.org, (646) 757-7705) or Lyndel Urbano, Senior Director of Public Policy and Government Relations, Amida Care (lurbano@amidacareny.org, (646) 757-7148).

Sincerely,

The Statewide HIV Medicaid Coalition

**Organizations Signing On
(List in Formation)**

Alliance for Positive Change
Amida Care
Apicha Community Health Center
Bailey House
Bridging Access To Care
Brooklyn Plaza Medical Center
Callen-Lorde Community Health Center
Community Healthcare Network
Destination Tomorrow
Diaspora Community Services
EngageWell IPA
Exponents
GMHC
Harlem United
Housing Works
iHealth, Inc.
Institute for Family Health
Iris House, Inc.
La Casa de Salud Inc
Latino Commission on AIDS
MetroPlusHealth
National Black Leadership Commission on Health (formerly National Black Leadership Commission on AIDS)
NEW Pride Agenda
REACH Medical
Rockland County Pride Center
Ryan Health
Southern Tier AIDS Program
St. Ann's Corner of Harm Reduction
Sun River Health
Truth Pharm
Upper Room AIDS Ministry (URAM)
VillageCare
VNS Health

PPGR Round Up

PPGR recognizes that there is a lot of uncertainty and risk when it comes to HIV and Medicaid funding at this time. With that, we are wholly committed to exerting our influence in mitigating risks by being active in pushing back against any Medicaid rate cuts, attempts to disrupt care to TGNB New Yorkers, and to find ways that help people who are placed at risk for HIV and preventing them from getting HIV. We continue to work at every level of government and in community to show up and ensure that our staff, members and support systems remain in place. Stay tuned for information about a statewide public accountability campaign that we are launching. Details to come in November!

Sincerely,
Joe Pressley, Lyndel Urbano & Casper Christiansen

Additional Reading

Overview of NYC Ballot initiatives

New York City ballot proposals: What do NYC voters need to know?

In addition to voting for the next mayor of New York City, voters will also answer six ballot questions when they head to the polls for the 2025 election. To read more about the below ballot proposals click [here](#), [here](#) and [here](#).

★ VOTE 2025 ★
THE ★ COUNTDOWN
NEW YORK CITY BALLOT QUESTIONS

PROPOSAL #1:

AMENDMENT TO ALLOW AN OLYMPIC SPORTS COMPLEX ON FOREST PRESERVE

“YES” AUTHORIZES NEW SKI TRAILS & RELATED FACILITIES IN THE ADIRONDACK FOREST PRESERVE

“NO” DOES NOT AUTHORIZE THIS USE

abc 7
EYEWITNESS NEWS

★ VOTE 2025 ★
THE ★ COUNTDOWN
NEW YORK CITY BALLOT QUESTIONS

PROPOSAL #2:

FAST TRACK AFFORDABLE HOUSING TO BUILD MORE ACROSS THE CITY

“YES” FAST TRACKS APPLICATIONS

“NO” LEAVES AFFORDABLE HOUSING SUBJECT TO LONGER REVIEW & FINAL DECISION AT CITY COUNCIL

abc 7
EYEWITNESS NEWS

★ VOTE 2025 ★
THE ★ COUNTDOWN
NEW YORK CITY BALLOT QUESTIONS

PROPOSAL #3:

SIMPLIFY REVIEW OF MODEST HOUSING AND INFRASTRUCTURE PROJECTS

“YES” SIMPLIFIES REVIEW FOR LIMITED LAND-USE CHANGES, INCLUDING MODEST HOUSING & MINOR INFRASTRUCTURE PROJECTS

“NO” LEAVES THESE CHANGES SUBJECT TO LONGER REVIEW, WITH FINAL DECISION BY CITY COUNCIL

abc 7
EYEWITNESS NEWS

★ VOTE 2025 ★
THE ★ COUNTDOWN
NEW YORK CITY BALLOT QUESTIONS

PROPOSAL #4:

ESTABLISH AN AFFORDABLE HOUSING APPEALS BOARD WITH COUNCIL, BOROUGH AND CITYWIDE REPRESENTATION

“YES” CREATES THE THREE-MEMBER AFFORDABLE HOUSING APPEALS BOARD TO REFLECT COUNCIL, BOROUGH, & CITYWIDE PERSPECTIVES

“NO” LEAVES AFFORDABLE HOUSING SUBJECT TO THE MAYOR'S VETO & FINAL DECISION BY CITY COUNCIL

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EYEWITNESS NEWS

★ VOTE 2025 ★
THE ★ COUNTDOWN
NEW YORK CITY BALLOT QUESTIONS

PROPOSAL #5:

CREATE A DIGITAL CITY MAP TO MODERNIZE CITY OPERATIONS

“YES” CREATES A CONSOLIDATED, DIGITAL CITY MAP

“NO” LEAVES IN PLACE FIVE SEPARATE MAP AND ADDRESS ASSIGNMENT FUNCTIONS, ADMINISTERED BY BOROUGH PRESIDENT OFFICES

★ VOTE 2025 ★
THE ★ COUNTDOWN
NEW YORK CITY BALLOT QUESTIONS

PROPOSAL #6:

MOVE LOCAL ELECTIONS TO PRESIDENTIAL ELECTION YEARS

“YES” MOVES CITY ELECTIONS TO THE SAME YEAR AS FEDERAL PRESIDENTIAL ELECTIONS, WHEN PERMITTED BY STATE LAW

“NO” LEAVES LAWS UNCHANGED

Republicans seek deep cuts to HIV prevention and treatment funding

Cuts proposed by the Trump administration and House Republicans could drive up new HIV cases by more than 200,000 by 2030, one expert projects. According to an [analysis published in April in the journal AIDS and Behavior](#), halting the CDC's HIV-prevention efforts would, from 2025 to 2030, increase the total number of new cases of the virus by more than 213,300 and the number of HIV-related deaths by over 10,600. The increased lifetime medical expenses of those new cases, the study projected, would be \$52.4 billion — a cost that dwarfs the proposed federal spending cuts and that would likely be shouldered considerably by taxpayers through Medicaid. Read the full article [here](#).

Protecting Individuals with HIV/AIDS from Losing Medicaid Coverage -

https://www.lac.org/assets/files/MitigatingHarmsforPeoplewithHIV_FINAL.pdf

This Legal Action Center report outlines the threats posed by HR1 work requirements for people living with HIV and provides recommendations on implementing those requirements to mitigate the threats.

IAPAC HIV Policy Brief: Safeguarding HIV Care Under OBBA

<https://www.iapac.org/home/advocacy/hiv-policy-brief-safeguarding-hiv-care-under-obbba/>

This IAPAC HIV Policy Brief – Safeguarding HIV Care Under OBBA – outlines the major risks and challenges, and presents actionable strategies for states, cities, and providers to prevent OBBA Medicaid work requirements from undermining decades of progress in HIV care.

KFF: A Look at the Potential Impact of High Unemployment Hardship Exemption to Medicaid Work Requirements.

<https://www.kff.org/medicaid/a-look-at-the-potential-impact-of-the-high-unemployment-hardship-exemption-to-medicaid-work-requirements/>

This issue brief describes the hardship exception for individuals living in counties with high unemployment, and using the most recent available county-level unemployment data from the Bureau of Labor Statistics (*BLS*) and county-level Medicaid expansion enrollment data, estimates the number of counties that could meet the criteria for this exception and the number of expansion enrollees living in those counties who could be exempt from the work requirements. Because county-level enrollment data for enrollees who would be subject to work requirements in Georgia and Wisconsin are not available, this analysis only includes expansion states.

Shutdown Impacts on Mandatory Programs

- **Pennsylvania Lt. Gov. Austin Davis Warns Trump and the GOP's Forthcoming Medicaid and Food Assistance Cuts Are a Disaster in the Making**
https://www.newsbreak.com/share/4203772250308-pennsylvania-lt-gov-austin-davis-warns-trump-and-the-gop-s-forthcoming-medicaid-and-food-assistance-cuts-are-a-disaster-in-the-making?_f=app_share&pd=08HQ1DiU&lang=en_US&send_time=1756646686&trans_data=%7B%22platform%22%3A0%2C%22cv%22%3A%2225.35.0.34%22%2C%22languages%22%3A%22en%22%7D&sep=sc_ios_comment_share_v2-v1&s=i3
- **Nearly 3 million New Yorkers face losing SNAP benefits in November**
<https://www.nydailynews.com/2025/10/25/ny-snap-benefits-stopping-government-shutdown/>
- **Governor Hochul Slams Washington Republicans for Holding SNAP Benefits Hostage from Millions of New Yorkers Starting in November** <https://www.governor.ny.gov/news/governor-hochul-slams-washington-republicans-holding-snap-benefits-hostage-millions-new>
- **New York issues \$30M in emergency food aid amid government shutdown**
<https://www.news10.com/news/albany-county/gov-hochul-addresses-residents-affected-by-federal-funding-cuts/>

https://soundcloud.com/govkathyhochul/governor-hochul-joins-new-yorkers-impacted-by-federal-cuts-to-make-announcement?si=2dfca2482cf34de4be1f75077e9b15bf&utm_source=clipboard&utm_medium=text&utm_campaign=social_sharing

Critical issues with a shutdown

- **Potential Disruption of Care**
Shutdowns can lead to delays in medical treatment, medications, and critical support services like mental health care, gender-affirming care, and HIV treatment. Even a short pause in care can have lasting health consequences. Medicare or Medicaid coverage will not be immediately interrupted. However, a shutdown can cause administrative delays and longer call wait times for certain services.
- **Loss of Coverage**
People who rely on financial help to afford health insurance (through subsidies or government programs) may lose their coverage if those supports are frozen. For low-income individuals, this can mean going without care altogether.
- **Threat to Specialized Health Plans**
Nonprofit plans designed to serve high-need communities operate on tight budgets. A pause in funding or payment from the government can make it impossible for them to continue operating or paying providers — putting the entire program at risk.
- **Public Health Setbacks**
Programs that help prevent HIV, offer testing, or distribute medications like PrEP could be

halted or scaled back. This could lead to an increase in new HIV infections, especially in communities that already face health inequities.

- **Widening Health Disparities**

Transgender people and individuals with HIV/AIDS already face stigma and barriers to care. A shutdown deepens those inequities by interrupting services that were designed to close the gap.

In Summary, What's at Stake:

If funding is delayed or interrupted:

- People may lose access to life-saving medications.
- Vital programs could shut down or scale back.
- New HIV infections could rise sharply.
- Health disparities could widen, undoing years of progress.

PPGR actively works to monitor and limit the impacts of the government shutdown on Amida Care members and to protect our Special Needs Plans.