Changes to Medicaid, Medicare, and Marketplace Coverage for Non-U.S. Citizens

Tips for navigating eligibility changes and maintaining access to care

Between 2026 and 2027, eligibility rules for non-U.S. citizens are changing across three federal health coverage programs: (1) Medicaid and the Children's Health Insurance Program (CHIP), (2) Medicare, and (3) the Health Insurance Marketplace. This guide explains who is affected, what is changing, and when and how to maintain access to care.

Which non-citizens are affected?

Under H.R. 1 (sometimes referred to as the One Big Beautiful Bill Act or OBBBA), your coverage may be affected if you are not a U.S. citizen and are in one of the immigration categories listed in the "At risk of losing eligibility" column below. Not all non-U.S. citizens are at risk of losing coverage.

At risk of losing eligibility	Likely to remain eligible
• Refugees and asylees • Temporary protected status (TPS) recipients • Humanitarian parolees • Survivors of trafficking (T visa) • Survivors of domestic violence (U visa, VAWA) • People granted withholding of removal	• Lawful permanent residents (green card holders) • Certain Cuban or Haitian entrants • Citizens of Compact of Free Association (COFA) countries • Children and pregnant people in some states

What is changing and when?

These changes are being implemented in stages between 2026 and 2027.

What is changing	When
Lawfully present immigrants with income below the federal poverty line lost help paying for Marketplace plans (premium tax credits). This mainly affects newer green card holders in their first five years in the U.S. Affected individuals can still purchase a Marketplace plan but must pay the full premium.	**Jan. 1, 2026**
Medicaid and CHIP eligibility is restricted to U.S. citizens, lawful permanent residents, certain Cuban or Haitian entrants, and COFA migrants. Refugees, asylees, TPS holders, parolees, and other lawfully present immigrants will no longer be eligible. Emergency Medicaid may still cover emergency medical assistance for individuals who otherwise meet Medicaid eligibility rules, regardless of immigration status.	**Oct. 1, 2026**
Marketplace subsidies are restricted to U.S. citizens, lawful permanent residents, certain Cuban or Haitian entrants, and COFA migrants. Refugees, asylees, TPS holders, parolees and other lawfully present immigrants will no longer qualify for help paying for Marketplace plans, but many can still purchase unsubsidized coverage.	**Jan. 1, 2027**
Medicare eligibility is restricted to U.S. citizens, lawful permanent residents, certain Cuban or Haitian entrants, and COFA migrants. Refugees, asylees, TPS holders, parolees, and other lawfully present immigrants will no longer be eligible. **Current enrollees in these groups will be disenrolled from Medicare** and should receive notice from the Social Security Administration.	**By Jan. 4, 2027**

What should you expect in coming months?

If you are in one of the affected groups, your state Medicaid agency, the Social Security Administration, or the Marketplace may request updated immigration documentation before your coverage end date. Open every letter promptly, keep your address and phone number current with each agency, and respond to every request for information by the deadline.

If you get a notice that your coverage is ending and think a mistake has been made—act quickly.

Medicaid or CHIP: You may request a fair hearing within 10 days of the notice date to keep your coverage active during the appeal. You can still appeal after 10 days, but coverage may end while your case is reviewed.

Medicare: You have the right to appeal a coverage termination. Follow the instructions on the notice from the Social Security Administration or call 1-800-MEDICARE (1-800-633-4227). Free help is available from your State Health Insurance Assistance Program (SHIP).

Marketplace coverage: You can appeal a Marketplace decision within 90 days of the notice through HealthCare.gov or your state Marketplace.

You do not need a lawyer to file appeals. Free legal aid organizations can help. Keep a copy of every notice you receive and every response you send.

What steps can you take if you're at risk of losing coverage?

Check if your state offers coverage for non-U.S. citizens

Some states cover non-U.S. citizens through special Medicaid and CHIP programs or through separate state-funded programs. Programs and rules vary, and some are being scaled back. Contact your state Medicaid office or department of social services to learn what is available where you live.

See if you can buy Marketplace coverage

Even if you lose financial help (subsidies) starting in 2027, many lawfully present immigrants can still buy unsubsidized Marketplace plans. DACA recipients are an exception: a federal rule that took effect in August 2025 bars them from buying Marketplace coverage at all, even at full price. Compare plans and prices at HealthCare.gov or your state's online Marketplace. Free local help is available from a Navigator or Certified Application Counselor.

Find care at a federally qualified health center

Federally qualified health centers are clinics that charge on a sliding scale based on your income and cannot turn you away because of inability to pay or immigration status. They offer comprehensive services, including primary care, behavioral health, dental, and discounted medications. Find a location near you at findahealthcenter.hrsa.gov.

In an emergency, go to the hospital

Federal law requires hospitals to treat you in an emergency, regardless of immigration status or ability to pay. Additionally, a program called Emergency Medicaid may be available to individuals who would otherwise be eligible for Medicaid but for their immigration status. Emergency Medicaid covers care for immediate, severe, and life-threatening conditions, but coverage is temporary, typically only for the period of the emergency.