

February 2026 Legislative Advocate Report

By Jennifer Baker, CalRTA Legislative Advocate

H.R. 1 Significantly Impacts Health Care Access in California

The Senate Committee on Budget and Fiscal Review held a hearing this month highlighting key impacts of H.R. 1 on both Medi-Cal and CalFresh. These programs collaboratively provide health care to over 14 million low-income individuals (approximately 1/3rd of all Californians) as well as provide federally funded food assistance to close to 5.4 million low-income individuals. Medi-Cal spending in 2025-26 is close to \$197 billion, including \$46 billion from the state General Fund. For the same fiscal year, CalFresh spending is \$13.3 billion, which includes \$122 million in General Fund dollars.

The new work requirements and eligibility changes included in H.R. 1 are estimated to leave one to two million people without sufficiently meeting the new requirements to maintain Medi-Cal, and close to 660,000 individuals no longer be eligible for CalFresh. Significant additional administrative burdens for individuals and the state will leave access to these two critical services beyond the reach of a large portion of the state's population.

The cost estimates administratively alone for some provisions related to Medi-Cal will initially be close to \$650 million in 2026-27 and are projected to be a few billion dollars annually from the General Fund. The CalFresh cost shifts included in H.R. 1 will likely increase annual costs to the General Fund by \$480 million annually and will cost the counties close to \$190 million annually. These figures do not include a number of other cost shifts, which will apply significant pressure on the state's General Fund and may likely leave significant gaps in care for many in the state.

Working-Age Americans Lack Adequate Retirement Savings

The National Institute on Retirement Security issued a recent report titled "[*Retirement in America: an Analysis of Retirement Preparedness Among Working-Age Americans*](#)." The report indicated many working people lacked access to employer-provided retirement plans in the private sector. For the average older adult, Social Security provides approximately half of their retirement income. Furthermore, among individuals with defined contribution savings, the median savings is solely \$40,000. Overall, the data signifies that many adults across the nation may significantly lack adequate savings for retirement, including those who have reached the typical retirement age.

Aging Master Plan Released

The California Department of Aging recently released its fifth annual report titled: "[*California Master Plan for Aging*](#)," which highlights progress midway through the state's ten-year blueprint to improve the lives of older adults, people with disabilities, and caregivers. The Master Plan for Aging outlines five goals focused on housing, health, inclusion, caregiving, and economic security, emphasizing a "whole of government" and "whole of society" approach, with strong partnerships across state agencies, local governments, philanthropy, and community stakeholders. It notes that by 2030, one in four Californians will be age 60 or older, underscoring the urgency of coordinated planning and investment.

Under Goal One: Housing for All Ages and Stages, the state advanced a three-year action plan to prevent and end homelessness, reorganized housing oversight by creating a new housing and homelessness agency, expanded transitional rent supports through Medi-Cal, invested in affordable housing and care facilities, and strengthened emergency preparedness in response to major climate related disasters in Los Angeles County. Goal Two: Health Reimagined, highlights progress through California Advancing and Innovating Medi-Cal, expanded coordinated care for people enrolled in both Medicare and Medi-Cal, behavioral health transformation following voter approval of Proposition One, expanded community-based adult services, rural health investments, and new efforts to address older adult suicide and Alzheimer's disease. The report notes approximately 720,000 Californians live with Alzheimer's disease and details improvements in early detection, surveillance, and dementia care regulations.

Goal Three: Inclusion and Equity, Not Isolation, centers on racial equity, intergenerational engagement, LGBTQIA plus community research, and modernization of the statewide aging network through the [California 2030 initiative](#). The state secured federal approval for its 2025 to 2029 State Plan on Aging and is developing the first statewide consumer website to help residents navigate long-term services and supports. Workforce initiatives promote age-friendly employment practices, lifelong learning, and research on older adult employment trends. Goal Four: Caregiving that Works, underscores the importance of supporting both paid and unpaid caregivers, elevating lived experience through advisory bodies, and strengthening cross-sector collaboration. Goal Five: Affording Aging, focuses on economic security, including the use of the Elder Index in the Master Plan data dashboard to measure cost-of-living challenges for older adults.

Across all goals, the report stresses accountability through public dashboards and an implementation tracker, significant philanthropic investment exceeding five million dollars, deep engagement with advisory committees, and a new Lived Experience Advisory Board. Overall, the report presents the Master Plan for Aging as a comprehensive, data-driven framework designed to ensure equity, dignity, independence, and opportunity for Californians of all ages and abilities as the state approaches 2030.

Bills Introduced

The deadline to introduce new legislation has passed, resulting in 1,897 newly introduced bills. Once introduced, a bill must be in print for 30 days before it can be sent to a committee for consideration. While a number of bills have been introduced with their initial desired goals stated, many are not yet ready for comprehensive review. These bills will likely be amended prior to, or during their first hearing in a policy committee. Bills are now being reviewed and will be presented with recommended positions shortly. Once positions have been finalized, letters stating those positions will be sent to the respective legislative committees that will be reviewing these bills. Status reports on legislation will be added to future monthly updates once positions have been finalized and communicated.

Legislative Calendar

March 26 – Legislative Spring Recess.

April 6 – Legislature reconvenes from Spring Recess.

April 8 – CalRTA Lobby Day.

April 24 – Last day for policy committees to hear bills that are fiscal.

May 1 – Last day for policy committees to hear non-fiscal bills.

May 8 – Last day for policy committees to meet prior to June 1.

May 15 – Last day for fiscal committees to hear bills introduced in their house. Last day for fiscal committees to meet prior to June 1.

May 25-29 – Floor session only.

May 29 – Last day for each house to pass bills introduced in that house.

June 1 – Committee hearings may resume.

June 15 – Budget bill must be passed by midnight.

June 25 – Last day for a legislative measure to qualify for the November election.

July 2 – Last day for policy committees to meet. Legislative Summer Recess begins.

August 3 – Legislature reconvenes from Summer Recess.

August 14 – Last day for fiscal committees to meet.

August 17-31 – Floor Session only.

August 31 – Last day for each house to pass bills. Final recess begins upon adjournment.

September 31 – Last day for Governor to sign or veto bills.