Last December, President Trump and the GOP majority in Congress pushed through massive tax cuts that will cost nearly $2 trillion over 10 years (2018-2027), and which mostly benefit the wealthy and big corporations. Already, they are using the ballooning deficits caused by these tax cuts as an excuse to make deep cuts to Medicare, Medicaid, Social Security, education and other vital services for working families.

Weeks after the first tax cuts were enacted, President Trump’s budget proposed cutting $1.3 trillion from Medicare, Medicaid and the Affordable Care Act to shrink the deficit. Not long after that, House Republicans proposed slashing $5 trillion from critical services, including $2 trillion from Medicare, Medicaid and the Affordable Care Act.

As if those first big tax cuts weren’t damaging enough, House Speaker Paul Ryan plans for the U.S. House of Representatives to vote in late September on a new and even bigger round of tax cuts requested by President Trump. This second round is estimated to cost about $3 trillion over 10 years (2026-2035). Once again, these tax cuts will mostly benefit the richest Americans and pose further threats to vital public services working families rely on.

The table below shows how much of a tax break the richest 1% in District of Columbia are estimated to receive this year from the first round of tax cuts, the size of their average tax cut, and their average income. It does the same for 2026, the first year that the second round of tax cuts kicks in if this legislation now before Congress becomes law. All estimates are from the Institute on Taxation and Economic Policy.

<table>
<thead>
<tr>
<th></th>
<th>COST OF TAX CUTS</th>
<th>AVERAGE TAX CUT</th>
<th>AVERAGE INCOME OF TOP 1%</th>
</tr>
</thead>
<tbody>
<tr>
<td>ROUND 1 TAX CUTS (in 2018)</td>
<td>$231 million</td>
<td>$64,570</td>
<td>$3.2 million</td>
</tr>
<tr>
<td>ROUND 2 TAX CUTS (in 2026)</td>
<td>$78 million</td>
<td>$17,980</td>
<td>$3.7 million</td>
</tr>
</tbody>
</table>

Sources: Institute on Taxation and Economic Policy

WHAT TAX CUTS FOR THE RICHEST 1% COULD PAY FOR IN DISTRICT OF COLUMBIA

Below are ways that $78 million in tax cuts for the richest 1% in 2026 could be spent benefiting District of Columbia working families. All 2026 cost figures have been adjusted for inflation.

HEALTH CARE

- **Medicaid**: Pay the federal share in 2026 of Medicaid health coverage for 6,570 state enrollees. [Source: Kaiser Family Foundation]

- **Medicare**: Provide each of the state’s estimated 113,300 Medicare beneficiaries in 2026 with $686 to assist with out-of-pocket healthcare costs. [Source: Centers for Medicare & Medicaid Services] The average U.S. Medicare beneficiary pays over $3,000 annually in such costs. Even beneficiaries who receive supplemental coverage through Medicaid spend over $2,500 a year on out-of-pocket costs.

FOOD & NUTRITION

- **Supplemental Nutrition Assistance Program (SNAP, formerly Food Stamps)**: Cover the costs in 2026 of nutrition assistance for 39,312 state residents in households that struggle to put food on the table. This is 33% of the 118,937 people currently receiving nutrition assistance. [Source: USDA Food & Nutrition Service]

EDUCATION

- **Teacher Pay**: Give each of the state’s 4,958 teachers a $15,672 raise. [Source: National Education Association]

- **Hire More Teachers**: Hire 827 more teachers at the state’s average salary of $93,904 (in 2026 dollars) to reduce class sizes, allowing for more individualized instruction. [Source: National Education Association]

HOUSING

- **Rental Assistance**: Provide federal rental assistance for an additional 4,648 households, at an average cost of $16,717 (in 2026 dollars). Currently 31,000 households receive assistance, far fewer than need it to secure decent housing. [Source: Center on Budget and Policy Priorities]

- **Nationwide**: Only 23% of eligible renters receive federal rental assistance due to funding limitations. In District of Columbia, there are 39,000 unassisted low-income households that pay more than half of their income in rent. [Source: Center on Budget and Policy Priorities]

INCOME SUPPORT

- **Earned Income Tax Credits**: Increase federal EITCs for state residents by 49% from $160 million to $237 million in 2026. About 55,840 state households benefit from the EITC, which encourages work and lifts families out of poverty. [Source: Tax Policy Center]
METHODOLOGY & ENDNOTES

**Medicaid** spending per enrollee (including full-benefit enrollees and partial-benefit enrollees) is from Fiscal Year 2014 and is inflated to 2026 based on the 10-year average annual Medicaid spending growth rate of 5.5% estimated by CBO in its April 2018 Medicaid baseline.\(^{18}\) We find the federal portion of spending per enrollee by multiplying the total spending per enrollee by the Fiscal Year 2014 Federal Medical Assistance Percentage (FMAP).\(^{19}\)

Projected **Medicare** enrollment in 2026 is based on July 2018 enrollment in original Medicare and Medicare Advantage plans from the Medicare Enrollment Dashboard and adjusted based on the projected growth in Medicare Part A enrollment from CBO’s April 2018 Medicare Baseline.\(^ {20}\) Between 2018 and 2026, average monthly Part A enrollment is projected to grow from 60 million to 77 million, or by 23%.

Average **teachers’ salary** and spending on **housing rental assistance** and **food and nutrition assistance** are from 2016-2018 and are inflated to 2026 dollars using the Bureau of Labor Statistics historical CPI-U data and Congressional Budget Office (CBO) future CPI-U estimates from the August 2018 10-Year Economic Projection.\(^{21}\)

**EITC** amounts are from tax year 2015 and are first inflated to 2017 using historical CPI-U data from the Bureau of Labor Statistics and then are inflated to 2026 using CBO’s future estimate for Chained CPI-U (as Round 1 of the tax cuts changed the way inflation is measured for the purposes of adjusting EITC and other tax parameters).

---

11. Ibid.
13 NEA, Table B-6.
19 Kaiser Family Foundation, “Federal Medical Assistance Percentage (FMAP) for Medicaid and Multiplier” (Timeframe: FY 2014). https://www.kff.org/medicaid/state-indicator/federal-matching-rate-and-multiplier/?currentTimeframe=5&sortModel=%7B%22colId%22:%22%22Location%22,%22%22sort%22:%22asc%22%7D