

‘Tears My Heart to Pieces’: North Carolina Braces for Medicaid Cuts

President Trump’s domestic policy law jeopardizes plans to reopen one rural county’s hospital — and health coverage for hundreds of thousands of state residents.



The only hospital in Martin County, N.C., closed two years ago. Credit...Kate Medley for The New York Times

By [Eduardo Medina](#)

Reporting from Williamston, N.C.

July 6, 2025

The only hospital in Martin County, N.C., closed in 2023, but the electricity is still on inside. Air conditioning continues to keep its empty patient rooms cool. And the county still pays the bills for the building’s medical gas system.

That is because the people of Martin County, in rural eastern North Carolina, have been determined to keep the beige brick building from deteriorating — and to somehow reopen their hospital, which had been struggling financially for years.

When North Carolina expanded Medicaid later in 2023, after the hospital shuttered, offering government health insurance to the state's low-income adults, Martin County saw an opportunity. Plans materialized to partly reopen the hospital, largely because federal dollars were pouring into the state to cover patients' care under Medicaid.

But those plans are now in jeopardy, as is Medicaid coverage for hundreds of thousands of North Carolina residents, after Congress passed President Trump's sweeping domestic policy bill. To help pay for tax cuts, the bill slashes federal spending on Medicaid, leaving states that expanded the program under Obamacare in a particularly difficult spot.

If Medicaid expansion is eliminated in North Carolina, Martin General Hospital almost surely will not reopen — “a catastrophic and deadly consequence,” said Paul Roberson, a real estate agent and community leader in Williamston, where a sign in front of the hospital reads, “CLOSED. If you need immediate assistance, dial 911.”

“Not having the hospital here is costing lives,” Mr. Roberson said, noting that the nearest hospital was about a 30-minute drive away. “This is the most important thing for us.”

Health experts say that rural America stands to suffer the most if the Medicaid population shrinks; Mr. Trump's bill will lead to 11.8 million more uninsured Americans by 2034, according to the nonpartisan Congressional Budget Office. In North Carolina, which has one of the largest populations, the effects could be particularly dire.

Image



A sense of desperation is acutely felt in Martin County, where a population of roughly 22,000 people lives in a rural health care desert. Credit...Kate Medley for The New York Times

In interviews last week, local health officials and chief executives of hospital systems across the state said that expanding Medicaid had helped create a lifeline for rural hospitals, allowing some to bounce back from financial deficits. And several North Carolina residents who became eligible for Medicaid through the expansion said they felt worried about the possibility of once again navigating life without health coverage.

“I’m going to have to abandon the diagnostic process for my neurological disorder, and try to function as if it’s not happening,” said Lori Kelley, 58, of Harrisburg, N.C. Over the last 18 months, she said, Medicaid coverage had allowed her to have surgery to save a finger and detect two tumors.

More than 660,000 people have enrolled in Medicaid in North Carolina through the expansion, most of them low-income adults. They include about 14 percent of the adults in Martin County.

The new law will require most adults with Medicaid to periodically prove they work, volunteer or take classes at least 80 hours per month. Most already do, but many could run into hurdles with the verification process and lose coverage.

More concerning to state officials is that the Trump law could trigger the end of Medicaid expansion in North Carolina by lowering a tax the state depends on to cover its share of the cost. The new law may also force the state to end a related program that boosts federal payments for hospitals that treat Medicaid patients. Lawmakers could pass a legislative fix, but they have remained deadlocked over the state budget, and some health experts said they doubted a solution could be reached.

Gov. Josh Stein, a Democrat, said on Thursday that the Republican-controlled state legislature “must step up to protect our bipartisan Medicaid expansion law,” adding, “This will require taking a hard look at our laws, our state budget and our long-term revenue requirements.”

In his former role as the speaker of the North Carolina House of Representatives, Senator Thom Tillis, a Republican, blocked an effort to expand Medicaid in 2013. But like many Republicans who initially opposed expanding the program, his opinion changed after many of his constituents, and hospitals in his state, began benefiting from it. Last weekend, Mr. Tillis announced that he strongly opposed the president’s bill because would “force the state to make painful decisions like eliminating Medicaid coverage for hundreds of thousands.”

Almost immediately, Mr. Trump attacked him on social media. Mr. Tillis then said that he would not seek re-election; he was one of three Republican senators who voted against the bill last week.

As Martin County pauses efforts to reopen its hospital, rural hospitals elsewhere in the state are worried about their survival. In the two decades preceding Medicaid expansion, about a dozen hospitals closed in North Carolina.

Image



If a lot of people lose Medicaid coverage in North Carolina, Martin General Hospital almost surely will not reopen. Credit...Kate Medley for The New York Times
At the last minute, Congress provided \$50 billion in funding for rural hospitals in the Trump law. But many hospital executives have said it would not be nearly enough to make up for the cuts to Medicaid and other health programs.

Penney Burlingame Deal, the president and chief executive of Onslow Memorial Hospital in Jacksonville, N.C., said the law “will create a desperate situation for the people who work here, our patients and the entire community.”

That sense of desperation is acutely felt in Martin County, where roughly 22,000 people, more than a quarter of whom are older than 65, live in a health care desert. Two physicians remain there. The nearest hospital with robust services is 40 minutes away, in Greenville. Some people who cannot afford to drive there take buses on slow routes, residents said.

Verna Marie Perry, 66, who used to work for the county’s adult and aging services department, said she fields calls on a weekly basis from friends in need of emergency medical attention. Neighbors have called her crying moments after someone close to them died while being transported to the nearest hospital.

“To think that if they pass that bill, we can’t get our hospital,” Ms. Perry said through tears last week, “oh God, it tears my heart to pieces.”

Largely thanks to Medicaid expansion and the program that boosted payment rates for hospitals, ECU Health, a system that serves a swath of rural North Carolina, was considering reopening Martin General for emergency care and some diagnostic services.

ECU Health already operates under tight financial margins. Brian Floyd, the hospital network's chief operating officer, said that, as things stand now, the chances of reopening the hospital are low.

“I can only say that if I lose Medicaid expansion, and we don’t have the subsidy payment systems, and we’re operating in the red by a 5 percent margin, that’s money I don’t have to serve Martin County,” Mr. Floyd said.

Image



Cathy Price, who voted for Mr. Trump last year, said she supports the president’s efforts to purge Medicaid fraud or waste in the country. Credit...Kate Medley for The New York Times

Cathy Price, 72, used to work as a nurse at Martin General and has lived her entire life in Williamston. Ms. Price, who voted for Mr. Trump last year, said she supports the president’s efforts to rid Medicaid of fraud and waste — the reasons he has given for the cuts. But she worries that the window to reopen the hospital is closing.

“We’re in a life-and-death crisis,” Ms. Price said. “People’s lives are on the line because of the hospital not being here.”

Last August, Jo Ayers, 72, was at home with her 91-year-old father, Bennie A. Moore, who was preparing to mow their farm’s grass. Mr. Moore, a Korean War veteran who owned a septic tank business, had been known as a charitable figure in the community. He would happily overpay for livestock that local children raised and put up for sale.

On Aug. 19, Mr. Moore experienced acute congestive heart failure. Ms. Ayers dialed 911, but was told that it would take emergency workers — whom many residents say are stretched thin — 20 minutes to reach them, and another 20 minutes to transport Mr. Moore to the nearest hospital. She put her father in her own car, speeding toward Bertie Memorial Hospital in Windsor.

Mr. Moore grew paler. As they approached the hospital and reached a final traffic light, he stopped breathing. He was dead by the time they arrived.

Image



Jo Ayers, 72, and her son, Russ Ayers. Credit...Kate Medley for The New York Times
As Ms. Ayers recounted the story inside her mobile home, her son, Russ Ayers, 51, shielded his eyes and cried, saying: “A 91-year-old man should not be dependent on his daughter to carry him to the hospital and watch him die.”

Now, as they learn how the federal bill may doom their hometown hospital's chances of reopening, Ms. Ayers and her son said they were concerned that other families may experience similar crises.

"It's going to cause a lot of people suffering," Ms Ayers said.

Eduardo Medina is a Times reporter covering the South. An Alabama native, he is now based in Durham, N.C.