State Proposals for Medicaid Work and Community Engagement Requirements

In January 2018, the Centers for Medicare & Medicaid Services (CMS) issued a new policy allowing states to implement work and community engagement requirements for certain Medicaid enrollees. States would be permitted to seek federal approval to require non-elderly, non-pregnant, and non-disabled adults to participate in these types of activities to qualify for Medicaid or certain aspects of Medicaid coverage. This chart summarizes states’ pending and approved Section 1115 waivers, waiver renewals, and waiver amendments to implement work and community engagement requirements.

<table>
<thead>
<tr>
<th>State</th>
<th>Waiver Status</th>
<th>Medicaid Expansion Status</th>
<th>Work Requirement Hours</th>
<th>Qualifying Activities</th>
<th>Population Group</th>
<th>Exempted Groups</th>
<th>Penalties for Non-Compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>AL</td>
<td>Pending</td>
<td>Has not implemented ACA Medicaid expansion</td>
<td>35 hours/week; 20 hours/week for parents and caretaker relatives with a child under age 6</td>
<td>Employment -On-the-job training -Job search and job readiness activities -Attendance in high school, GED certification classes, an institution of higher education, or vocational classes -Volunteer work activities or community service -Technical training Individuals who fulfill the work requirements but become ineligible due to their income level exceeding Medicaid eligibility levels will be provided with 18 months of transitional Medicaid coverage.</td>
<td>Parent or Caretaker Relative eligibility group, up to age 60</td>
<td>-Disabled individuals, including anyone receiving SSDI, SSI, or Medicare -Medically frail individuals or individuals with a medical condition that prevents them from complying with the work requirements (validated by a medical professional) -Pregnant women or women receiving post-partum care -Individuals age 60 or older -Individuals required to care for a disabled child or adult -Individuals who are either compliant with or exempt from the TANF JOBS program -An individual who is a single custodial parent caring for a child age 12 months or younger, or caring for a child under the age of 6 for whom appropriate childcare is not available -Individuals who are able to provide a good cause for not meeting work requirement (similar to those in TANF JOBS program) -Only one individual in the household can be exempted for any of the reasons related to being the parent or caretaker of a child or disabled individual, unless there are valid extenuating circumstances</td>
<td>Individuals who are subject to the requirements will receive notice of the requirements, and will be given 90 days to become compliant or provide proof they qualify for an exemption. If after 90 days, an individual is non-compliant and non-exempt, the individuals will be terminated from the Medicaid program. Individuals who meet the requirements but later become non-compliant will also have 90 days to become compliant or demonstrate they meet an exemption.</td>
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| AZ    | Approved Jan. 18, 2019 (not yet implemented) | Implemented Affordable Care Act (ACA) Medicaid expansion through waiver (originally implemented traditional expansion; state sought waiver and received approval in Sept. 2016 to implement alternative model) | 80 hours/month | -Employment, including self-employment  
-Participating in employment readiness activities, which can include:  
-Education (less than full time)  
-Job skills training  
-Life skills training  
-Health education classes  
-Engage in job search activities similar to those required to receive unemployment benefits  
-Community service | Able-bodied individuals age 19-49 in an ACA Medicaid expansion group | -Individuals 50 years and older  
-Individuals who are members of federally recognized tribes  
-Pregnant women and post-partum women up to the end of the month in which the 60th day of post-pregnancy occurs  
-Former foster youth up to age 26  
-Individuals with serious mental illness  
-Individuals receiving temporary or permanent disability benefits or who are determined to be medically frail  
-Individuals who are in active treatment for a substance use disorder  
-Part-time high school, trade school, college, or graduate students  
-Victims of domestic violence or homeless individuals  
-Caretakers of a child under age 18 or of a child who is 18 and is a full-time student expected to graduate before turning 19 (limit one caretaker per child)  
-Caregivers who are responsible for the care of an individual with a disability  
-Individuals with an acute medical condition (physical or behavioral) that would prevent them from complying  
-Individuals with a disability as defined by federal disabilities rights laws who are unable to comply for disability-related reasons  
-Individuals complying with other state-approved work programs | Individuals will need to report monthly that they are meeting the community engagement requirements.  
Individuals who do not meet requirements will have an initial three-month grace period; noncompliance after this period will result in suspension of eligibility for two months.  
Individuals with suspended eligibility will have their eligibility reactivated after the end of the two-month suspension period, as long as they meet all other eligibility criteria.  
Individuals can request and demonstrate good cause if unable to complete activity hours or report participation. Good cause exemptions include:  
-Disability of individual or if individual has an immediate family member in the home with a disability and is unable to meet requirements due to this;  
-Illness of the individual or a family or household member requiring beneficiary to care for the individual;  
-Severe inclement weather, including a natural disaster; or  
-Individual has family emergency or other life changing event (e.g., divorce, homelessness, domestic violence, birth or adoption, or death).  
Arizona also proposed a lifetime coverage limit of five years for most able-bodied adults who failed to comply with the work requirements, but CMS did not approve this |
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<td>AR</td>
<td>Approved Mar. 5, 2018; began implementing as of June 1, 2018.</td>
<td>Implemented ACA Medicaid expansion through waiver</td>
<td>80 hours/month</td>
<td>-Employment or self-employment, or those whose income is consistent with being employed/self-employed at least 80 hours/month -Enrollment in educational program (high school, higher education, or GED classes) -On-the-job or vocational training -Job search or job search training (up to 40 hours/month) -Community service -Participation in classes on health insurance, using health care, or healthy living (up to 20 hours/year) -Participating in programs through state Department of Workforce Services -Compliance with either SNAP or Transitional Employment Assistance (TEA) employment programs</td>
<td>Non-medically frail individuals ages 19-49 in ACA Medicaid expansion group at or below federal poverty level, with individuals ages 19-29 exempt in 2018 (in the waiver, the state also requested limiting the ACA Medicaid expansion eligibility group to those earning 100 percent of the federal poverty level (FPL) or less; this aspect of the waiver was not approved)</td>
<td>-Individuals 50 and older -Full-time students (attending high school, an institution of higher education, vocational training, or job training) -Those exempt from SNAP work requirements -Those receiving Transitional Employment Assistance (TEA) cash assistance or who are exempt from TEA work requirements -Individuals incapacitated in the short term or medically certified as physically or mentally unfit for employment, or has an acute medical condition validated by a medical professional that would prevent compliance with requirements -Caregivers of an incapacitated individual -Those who live with a minor dependent child age 17 or younger -Those receiving unemployment benefits -Those participating in alcohol or drug addiction treatment program -Pregnant women, through the end of post-partum care -Individuals determined to be medically frail</td>
<td>Individuals must demonstrate compliance on a monthly basis. Loss of eligibility if enrollee fails to meet work requirements for any three months during the coverage year (either consecutive or non-consecutive months), with coverage termination occurring at the end of the third month of noncompliance. Unless a good cause exemption is met, individual would be locked out of coverage until start of next coverage year and would need to file a new application at that time. Good cause exemptions include: -Disability of individual or if individual has an immediate family member in the home with a disability and is unable to meet requirements due to this; -Hospitalization/serious illness of the individual or an immediate family member in the home; -Birth or death of a family member in the home; -Severe inclement weather or natural disaster causing inability to meet requirement; or -Individual has family emergency or other life changing event (e.g., divorce or domestic violence). If state determines that an individual’s failure to comply or report compliance was the result of a catastrophic event or circumstances beyond an individual’s control, the individual will receive retroactive coverage to the date coverage ended without the need for a new application.</td>
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<td>IN</td>
<td>Approved Feb. 2, 2018 (implementing as of Jan. 2019, but no work hours are required during the first six months)</td>
<td>Implemented ACA Medicaid expansion through waiver</td>
<td>Requirements will increase over the course of the individual’s first year of participation, beginning at five hours/week at the seventh month of enrollment and increasing to 20 hours/week at 18 months and beyond</td>
<td>Subsidized or unsubsidized employment, Participating in state’s Gateway to Work program, Managed care entities employment initiatives, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training, Job skills training, Job search activities, Education related to employment; general education (e.g. GED or community college), Accredited ESL education or homeschooling, Vocational education/training</td>
<td>Able-bodied individuals enrolled in Healthy Indiana Plan (HIP), up to age 60 (ACA Medicaid expansion group, Transitional Medical Assistance recipients, some parents and caretakers)</td>
<td>-Full- and part-time students, Pregnant women, Primary caregivers of a dependent child below the compulsory education age, or who are primary caregivers of a disabled dependent, Medically frail individuals, Certification of temporary illness or incapacity, In active substance use disorder treatment, Individuals over age 59, Former foster care youth under age 26 (they are not covered under the demonstration), Homeless individuals, Individuals who are meeting or are exempt from TANF work requirements, Recent incarceration (within last six months), Individuals enrolled in state’s Medicaid employer premium assistance program, Some other exemptions possible based on individual review</td>
<td>Each December, state will evaluate if enrollees have met work requirement hours for the prior 12-month calendar year. If requirements are not met, eligibility will be suspended beginning on the first day of the new calendar year. Individuals with suspended benefits can reactivate eligibility by meeting one of the following criteria: 1) becoming eligible under another eligibility group; 2) qualifying for an exemption; 3) completing one calendar month of the work requirement hours and submitting documentation information to the state. Unless an individual reactivates eligibility, eligibility will remain suspended until redetermination date; if at that time the individual does not qualify for an exemption, enrollment will be terminated and individual will need to reapply to regain coverage. Good cause exemptions include, but are not limited to: 1) Individual has a disability or has an immediate family member within the home with a disability and was unable to meet requirements due to this; 2) Individual is a victim of domestic violence; 3) Additional circumstances may be granted exemptions, as the state deems necessary.</td>
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| KY    | Approved Jan. 12, 2018, but not implemented. The National Health Law Program, the Kentucky Equal Justice Center, and the Southern Poverty Law Center, filed a lawsuit challenging the waiver on Jan. 24, 2018. On June 29, 2018, a federal district court judge blocked implementation of the work requirements (and other aspects of the waiver), which were scheduled to begin July 1. In response, CMS opened a new comment period on the waiver from 7/19/18-8/18/18. On Nov. 20, 2018, CMS again approved the waiver, but another lawsuit was filed in Jan. 2019. The waiver was blocked again on March 27, 2019. | Implemented ACA Medicaid expansion through waiver (originally implemented traditional expansion; state sought waiver in 2016) | 80 hours/month; requirements will be phased in by region | -Subsidized or unsubsidized employment  
-Self-employment  
-Job skills training  
-Job search activities  
-Enrollment in educational program related to employment (e.g., management training)  
-General education (e.g., high school, GED, college or graduate education, ESL classes)  
-Vocational education and training  
-Community work experience  
-Community service/public service  
-Caregiving services for a non-dependent relative or other individual with a chronic, disabling health condition  
-Participation in substance use disorder treatment | Able-bodied adults ages 19 to 64 (ACA Medicaid expansion group, Transitional Medical Assistance recipients, some parents and caretakers)  
Kentucky HEALTH beneficiaries who have not been subject to the requirements in the past five years will be provided a three-month grace period prior to being subject to the requirements | -Children under age of 19  
-Pregnant women  
-Primary caregivers of a dependent (either minor child or disabled adult; limited to only one exemption per household)  
-Medically frail individuals  
-Full-time students  
-Former foster care youth  
-Individuals diagnosed with an acute medical condition that would prevent them from complying with the requirements | After a one-month opportunity to become compliant, individuals who fail to meet requirements for a month will have their benefits suspended unless a good-cause exemption is issued.  
Good cause exemptions include:  
-Disability of the individual or if individual has an immediate family member in the home with a disability and is unable to meet requirements for due to this;  
-Hospitalization/serious illness of the individual or an immediate family member in the home;  
-Birth or death of a family member in the home;  
-Severe inclement weather or natural disaster causing inability to meet requirement; or  
-Individual has family emergency or other life changing event (e.g., divorce or domestic violence).  
Individuals can reactivate eligibility on the first day of the month after the individual complies with the requirements during a 30-day period or completes a state-approved health literacy or financial literacy course (the option to take a course is only available once in a 12-month benefit period).  
Individuals who, during a suspension period, become pregnant, are determined to be medically frail, become a primary caregiver of a dependent (either minor child or disabled adult — limited to only one exemption per household), are diagnosed with an acute medical condition that would prevent them from compliance with requirements (validated by a medical professional), or become a full-time student, or become eligible for Medicaid under an eligibility group not subject to the work and community engagement requirements can reactivate benefits, with an effective date aligned with their new eligibility category or status.  
Individuals with suspended benefits at the time of their redetermination date who do not qualify for an exemption will have their enrollment terminated and will have to submit a new application to regain coverage |
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| MI    | Approved Dec. 21, 2018 (not yet implemented) | Implemented ACA Medicaid expansion through waiver | 80 hours/month | -Employment, self-employment, or having income consistent with being employed or self-employed (e.g. makes at least minimum wage for an average of 80 hours per month)  
-Education directly related to employment (i.e. high school equivalency test preparation, postsecondary education)  
-Job training or vocational training directly related to employment  
-Unpaid workforce engagement directly related to employment (e.g. internship)  
-Tribal employment programs  
-Participation in substance use disorder (SUD) treatment (court ordered, prescribed by a licensed medical professional, or Medicaid-funded SUD treatment)  
-Community service completed with a nonprofit 501(c)(3) or 501(c)(4) organization (can only be used as a qualifying activity for up to 3 months in a 12-month period)  
-Job search directly related to job training  
-Individuals in compliance with or who are exempt from SNAP or TANF work requirements will be deemed compliant with the Medicaid work requirements | Non-disabled adults ages 19-62 in ACA Medicaid expansion group | -Caretaker of a family member under 6 years of age (only one parent at a time can claim this exemption)  
-Individuals currently receiving temporary or permanent long-term disability benefits from a private insurer or from the government  
-Full-time student who is not a dependent or whose parent or guardian qualifies for Medicaid  
-Pregnant women  
-Caretaker of a dependent with a disability who needs full-time care based on a licensed medical professional’s order (this exemption is allowed only one time per household)  
-Caretaker of an incapacitated individual even if the incapacitated individual is not a dependent of the caretaker  
-Individuals who have proven they meet a good cause temporary exemption  
-Medically frail individuals  
-Individuals with a medical condition resulting in a work limitation according to a licensed medical professional order  
-Individuals who have been incarcerated within the last 6 months  
-Individuals currently receiving unemployment benefits  
-Individuals under age 21 formerly in the state’s foster care system | Individuals will need to demonstrate compliance on a monthly basis  
An individual is allowed 3 months of noncompliance within a 12-month reporting period. After 3 months of noncompliance, individuals who remain noncompliant will not receive health care coverage for at least one month. Individuals can have coverage reinstated once they come into compliance with the requirements.  
If an individual is found to have misrepresented compliance with the work requirements, the individual will not be allowed to participate in the Healthy Michigan Plan for a one-year period. |
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| MS    | Pending       | Has not implemented ACA Medicaid expansion | 20 hours/week | -Working in paid employment  
- Self-employment  
- Participation with Office of Employment Security  
- Volunteering with approved agencies  
- Participation in alcohol or drug abuse treatment program  
- Compliance with SNAP and TANF work requirements  
Individuals who fulfill the workforce training or community engagement requirement but become ineligible due to their income level exceeding Medicaid eligibility levels will be provided with 12 month transitional medical assistance coverage. Once this coverage is exhausted, an additional 12 months of coverage will be offered if these individuals continue to meet the workforce training or community engagement requirement. | Non-disabled adults ages 19-64 covered under traditional Medicaid, including low-income parents and caretakers and individuals eligible for transitional medical assistance  
- Native Americans  
- Pregnant women  
- Children under age 19  
- Disabled individuals; individuals enrolled in 1915 (c) waivers  
- Individuals 65 years and older  
- Individuals residing in an institution  
Exemptions will also apply to an individual who is:  
- Diagnosed with mental illness;  
- Determined disabled by Social Security;  
- Physically or mentally unable to work;  
- Receiving or has applied for unemployment insurance;  
- A primary caregiver for: a child under the age of 6; a person diagnosed with a mental illness; or a disabled family member;  
- Participating in an alcohol or drug abuse treatment program;  
- Receiving treatment for cancer;  
- Enrolled in an institution of higher learning at least part time; or  
- High school student age 19 or older, attending at least half-time. | Those who choose not to participate in the workforce training or community engagement activities and who do not qualify for another category of eligibility will lose coverage. Beneficiaries who lose coverage due to lack of participation will be reinstated immediately upon notification of compliance. |
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| NH    | Approved May 7, 2018 (implementing as of March 2019; reporting began in June 2019). | Implemented ACA Medicaid expansion through waiver | At least 100 hours per calendar month | -Subsidized or unsubsidized employment  
-Education directly related to employment, in the case of an individual who has not received a high school diploma or equivalent  
-Secondary school/course of study leading to a certificate of general equivalency  
-Enrollment at an accredited community college, college or university that is counted on a credit hour basis  
-Vocational training (not to exceed 12 months)  
-On-the-job training  
-Job skills training related to employment  
-Job search/readiness activities, such as job training workshops and time spent with employment counselors  
-Participation in substance use disorder treatment  
-Community service and public service  
-Caregiving services for a non-dependent relative or other individual with a disabling health, mental health, or developmental condition  
-Compliance with SNAP or TANF work requirements | Able-bodied adults covered by the ACA Medicaid expansion | -Individuals temporarily unable to participate due to illness or incapacity as documented by a licensed provider  
-Individuals participating in a state-certified drug court program  
-Parent or caretaker where the required care is certified as necessary by a licensed provider  
-Parent or caretaker of a dependent child under age 6 (only one exemption per household)  
-Parent or caretaker of a dependent child of any age with a disability  
-Pregnant women or women 60 days or less post-partum  
-Medically frail individuals  
-Individuals with a disability who are unable to comply due to disability-related reasons  
-Individuals residing with an immediate family member with a disability and are unable to meet requirements due to family member’s disability  
-Individuals who experience a hospitalization or serious illness, or who reside with an immediate family member who experiences a hospitalization or serious illness  
-Individuals who are exempt from TANF or SNAP work requirements  
-Individuals enrolled in state’s voluntary Health Insurance Premium Program | Individuals will have 75 calendar days after the start of the requirement or after their eligibility determination to meet the requirement. Failure to comply will result in suspension of eligibility, unless there is a good cause exception.  
Good cause exceptions include:  
-Disability of the individual or if individual has an immediate family member in the home with a disability and is unable to meet requirements for due to this;  
-Hospitalization/serious illness of the individual or an immediate family member in the home;  
-Birth or death of a family member in the home;  
-Severe inclement weather or natural disaster causing inability to meet requirement;  
-Individual has family emergency or other life changing event (e.g., divorce or domestic violence); or  
-Other reasons as defined or approved by the state.  
If individuals are non-compliant, the state will inform individuals that their eligibility will be suspended at the end of the following month, until an individual reports that they meet a good cause exception or qualify for an exemption, or that they make up the deficient hours for the month that resulted in noncompliance.  
If individuals remain non-compliant or do not meet an exemption, the state will suspend eligibility effective the first of the month following the one-month opportunity to cure.
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| OH    | Approved Mar. 15, 2019 (not yet implemented) | Implemented ACA Medicaid expansion | 20 hours/week (80 hours averaged monthly) | -Work or employment in exchange for money  
-Self employment  
-Work in exchange for goods and services (in kind work)  
-Unpaid work, including unpaid formal and informal volunteer, community service and public service activities  
-Education and training activities  
-Formal and informal job search or job readiness programs (for no more than 30 days in a year unless combined with another qualifying activity and less than half the required hours are spent in job search or job readiness programs or job search is the only activity completed)  
-Participation in and compliance with SNAP and/or TANF work registration or employment and training requirements | Able-bodied adults in ACA Medicaid expansion group, up to age 50 | -Individuals age 50 and older  
-Individuals who are physically or mentally unfit for employment  
-Individuals who are caring for a disabled or incapacitated household member  
-Pregnant women and women during the 60-day postpartum period  
-Parent/caretaker/individual residing in same house with minor child (under age 19)  
-Individual who has applied for or is receiving unemployment benefits  
-Students who are in school at least half time  
-Individuals who are participating in a drug or alcohol treatment program  
-Applicants for or recipients of SSI  
-Individuals participating in the state’s Specialized Recovery Services program  
-Eligible incarcerated individuals  
-Individuals residing in counties approved by the USDA Food and Nutrition Service for a waiver of the Able-Bodied Adults without Dependents time limit  
-Individuals who are exempt from SNAP and/or TANF work requirements  
-Medically frail individuals | Individuals subject to the requirements must demonstrate compliance on an annual basis.  
Beneficiaries will be non-compliant if the state is unable to verify via data available through state systems and data sources that the beneficiary is compliant or if the beneficiary has not reported their compliance to the state within 60 days of being notified that they are required to participate in community engagement.  
If a beneficiary does not report within the 60 days that they are completing a qualifying activity, meet the criteria for an exemption, or experience a good cause circumstance, the beneficiary will be considered non-compliant and be disenrolled from Medicaid.  
Disenrollment will occur the first day of the month following appropriate notice after the end of the 60-day period by which the individual was notified about the community engagement requirement. Individuals who are disenrolled for non-compliance can reapply immediately or at any time following disenrollment.  
Good cause reasons include but are not limited to:  
-Hospitalization or serious illness  
-Illness of an immediate family member requiring the presence of the individual subject to the requirements or beneficiary has an immediate family member living in the home who experiences a hospitalization or serious illness  
-Emergencies, as defined by the state  
-Severe inclement weather (including a natural disaster)  
-Unavailability of transportation  
-Domestic violence |
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<td>Pending</td>
<td>Has not implemented ACA Medicaid expansion</td>
<td>Average of 80 hours/month, with a phased-in hours per week approach available: -First three months no verification required (grace period); -At least 10 hours/week for 4-6 months of enrollment -At least 15 hours/week for 7-9 months of enrollment -At least 20 hours/week for 10-12 months of enrollment Individuals recently released from incarceration will have a 9-month grace period</td>
<td>-Employment -Workforce Innovation and Opportunity Act (WIOA) Program -Employment &amp; Training (E&amp;T) Program; job search or job search training activities when offered as part of other E&amp;T program components are acceptable as long as those activities comprise less than half the total required time spent in the components -Education related to employment -General Education Development/Diploma (GED) -Vocational education/training -Participation in Oklahoma Works -Volunteer work (e.g. classroom volunteer, faith-based or community service programs) -Meeting any combination of work, participating in work training or volunteering the specified number of hours per week, averaged monthly</td>
<td>Non-disabled adults ages 19-50 covered under traditional Medicaid (exemptions noted in Exempted Groups section)</td>
<td>-Individuals under age 19 or over age 50 -Pregnant women -Individuals who are medically certified as physically or mentally unfit for employment -Parent or caretaker responsible for care of a dependent child under age 6 -Individuals complying with TANF or SNAP work requirements -Individuals participating in drug or alcohol treatment program -Students enrolled at least part time in a recognized school, training program, or institution of higher education -Individuals complying with a work registration requirement under Title IV of the Social Security Act or the federal-state unemployment compensation system -Self-employed individuals working a minimum of 30 hours/week or receiving weekly earnings equal to federal minimum wage multiplied by 30 hours -Individuals with disabilities -Individuals enrolled in Oklahoma Health Care Authority family planning program -Individuals in the Oklahoma Health Care Authority Breast and Cervical Cancer Program -Foster care parents -Former foster care members -Native Americans and Alaska Natives</td>
<td>Individuals who do not comply with the requirements will be terminated in accordance with current termination and notification policies Individuals who lose eligibility after non-compliance may re-apply if they comply with work requirements for at least the specified number of hours in a 30-day period Individuals can submit a good cause exemption request; the exemptions align in part with those in the SNAP program</td>
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| SC    | Pending       | Has not implemented ACA Medicaid expansion | Average of 80 hours/month per quarter | -Employment  
-Participation in adult secondary education program through public school district or technical college  
-Full-time participation in a degree or certificate program in an accredited institution of higher education  
-Compliance with unemployment insurance work-search requirements  
-Compliance with SNAP work requirements  
-Community or public service, including verifiable volunteerism with public entities or qualified charitable organizations | Non-disabled adults under age 65 enrolled in the state’s Medicaid as a Parent Caretaker Relative program | -Members of federally recognized tribal organizations  
-Pregnant women  
-Disabled individuals, including individuals who have a medical condition that would prevent them from participating  
-Individuals over age 65  
-Primary caregiver of a child or a disabled individual  
-Individuals receiving Social Security Disability Insurance or Supplemental Security Income  
-Individuals participating in a Medicaid-covered treatment program for alcohol or substance abuse addiction, including opioid addiction  
-Individuals receiving treatment for cancer, including those receiving treatment through Medicaid’s Breast and Cervical Cancer Program  
-Individuals who are compliant with or exempt from SNAP or TANF work requirements  
-Individuals eligible through the former foster care eligibility category  
-Individuals enrolled in a limited-benefit Medicaid program  
-Home and community-based services waiver participants or individuals in institutions  
-Other case-by-case exemptions may be made | Individuals who are non-compliant for at least three consecutive months would have benefits suspended for three months, or until work requirements are met. Individuals’ benefit eligibility would be reactivated without a full reapplication upon notice to the state of compliance.  
No eligibility suspension would occur during the months in which statewide unemployment is greater than 8 percent |
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<td>SD</td>
<td>Pending (though the program will begin operating on a voluntary basis beginning 7/1/18)</td>
<td>Has not implemented ACA Medicaid expansion</td>
<td>80 hours/month On an individualized basis, the 80 hour requirement may be reduced to a lesser amount</td>
<td>-Employment Meeting monthly milestones through activities such as: -English as a second language courses -Health insurance literacy courses -Financial literacy courses -Disease management courses and other healthy living courses -Treatment for chronic or behavioral health conditions -High school equivalency education -Post-secondary education and training -Volunteer work -Caregiving for an elderly or disabled individual -Resume writing and soft skills training -Job searching Individuals will be connected with a case manager to assist with connecting individuals to support services and to develop an employment and training plan Individuals will be eligible for Transitional Medical Benefits (TMB) for 12 months if their income exceeds the Medicaid income eligibility limit, and for up to an additional 12 months of premium assistance if they have income above the Low Income Families program limit but below 100% FPL. One well-adult visit and one preventive dental visit is required during the period an individual is eligible for TMB to qualify for premium assistance.</td>
<td>Parents ages 19-59, in two of the state’s counties (Minnehaha and Pennington)</td>
<td>-Individuals age 18 or younger or age 60 or older -Full-time students -Pregnant women -Disabled individuals -Medically frail individuals -Individuals participating in other state workforce participation programs that meet the same objectives (e.g., SNAP, TANF, or unemployment insurance) -Nonparent caretaker relatives -Parents of dependent children under one year of age who are living in the parent’s residence -Primary caregivers of elderly or disabled individuals living in the caretaker’s residence</td>
<td>Newly enrolled individuals will be granted a three-month period from their initial application month before they become subject to the requirements During the first and second months of non-compliance, individuals must contact the Department of Labor and Regulation (DLR) within 30 days to develop a corrective action plan. After the third month of non-compliance, individuals will be given a 10-day notice of termination of Medicaid eligibility. Individuals who lose eligibility can work with DLR to take corrective action within 30 days of coverage closure to reinstate coverage, which will be determined by the Department of Social Services. Failure to obtain reinstatement during the 30 day period will result in a 90-day ineligibility period. Individuals who are disenrolled but are subsequently determined to qualify for an exemption and remain eligible will have eligibility reinstated starting the month they qualify for the exemption. Individuals can qualify for a good cause exemption prior to disenrollment due to non-compliance, which include but are not limited to: -Family member in the home with a disability and individual is unable to meet requirements due to serving as short-term caretaker for that family member; -Hospitalization/serious illness of the individual or an immediate family member in the home; -Death of a family member in the home; -Severe inclement weather or natural disaster causing inability to meet requirement; -Individual has family emergency or other life changing event (e.g., divorce or domestic violence)</td>
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<td>TN</td>
<td>Pending</td>
<td>Has not implemented ACA Medicaid expansion</td>
<td>20 hours/week (averaged monthly)</td>
<td>-Paid employment -Self-employment (individual must be able to demonstrate income consistent with working at least 20 hours/week, averaged monthly) -General education (e.g. high school or high school equivalency, college, ESL courses, etc.) -Vocational education and training -Participation in job search or job skills training activities sponsored by the state’s Department of Labor &amp; Workforce Development -Accredited homeschooling -Community service (volunteering) in approved settings -Individuals complying with SNAP or TANF work requirements will be deemed compliant</td>
<td>Non-pregnant, non-disabled, non-elderly adults in parent/caretaker relative eligibility category</td>
<td>-Individuals age 65 and older -Individuals who are physically or mentally incapable of work, as certified by a medical professional -Medically frail individuals -Individuals with a short-term or long-term disability or an acute medical condition that would prevent them from complying, validated by a medical professional -Individuals participating in inpatient or residential treatment or an intensive outpatient program for a substance use disorder -Individuals who are the primary caregiver of a child under age 6 (one exemption per household) -Individuals providing primary caregiver services for a household member (child or adult) with a disability or incapacitation or medical frailty that prevents the caretaker from meeting work requirement -Individuals receiving unemployment benefits -Individuals who have recently been directly impacted by a catastrophic event such as a natural disaster -Pregnant women and women during their period of postpartum coverage</td>
<td>Individuals will be required to document compliance on a monthly basis. To maintain coverage, individuals must meet the requirement for four months out of every six-month period. Individuals who have not demonstrated compliance for at least four months of the six-month reporting period will be subject to benefit suspension. Benefits will remain suspended until an individual demonstrates compliance with the requirements for one month. Good cause exemptions may be granted for acute or short-term individual circumstances that warrant special consideration (e.g. individuals experiencing homelessness, victims of domestic violence, victims of human trafficking, etc.)</td>
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| UT    | Approved March 29, 2019 (not yet implemented) | Nov. 2018 ballot measure to adopt full ACA Medicaid expansion beginning 4/1/19 was passed by voters. However, state legislature passed and governor signed into law SB 96 in Feb. 2019 to modify the voter-approved expansion. SB 96 only expands Medicaid up to 100% FPL, and adds work requirements that begin in 2020. (It also includes an enrollment cap; state is receiving its regular FMAP for the partial expansion population; in May 2019 state submitted a new proposal to request enhanced FMAP and implement per capita cap.) | Hours not specified (see Qualifying Activities section) | Individuals will be required within the first three months of a 12 month benefit year or following notification that the individual is subject to the work requirement (whichever is later), complete the following activities: 1) register for work through the state’s online system; 2) complete an online assessment of employment training needs; 3) apply for employment, either directly or through the state’s automated employment application submission process, with at least 48 potential employers; 4) complete the online training modules, as determined appropriate by the online assessment. | Medicaid expansion population of individuals with incomes 100% FPL and below, under age 60 | -Individuals age 60 and older  
-Pregnant or up to 60 days postpartum  
-Physically or mentally unable to meet requirements (as determined by a medical professional or documented through other data sources)  
-Parents/caretakers with dependent child under age 6  
-Caretaker for disabled individual  
-Member of a federally recognized tribe  
-Receiving or has applied for unemployment insurance benefits  
-Participating regularly in SUD treatment program, including intensive outpatient treatment  
-Student enrolled at least half time in any school or vocational training or apprenticeship program  
-Participation in refugee employment services  
-Family Employment Program (FEP) recipients who are working with an employment counselor  
-Individuals in compliance with or who are exempt from SNAP and/or TANF work requirements  
-Individuals working more than 30 hours/week | Failure to comply within the three months an individual is required to complete the work requirements will result in loss of eligibility, unless s/he can demonstrate a good cause exemption. Eligibility is terminated on the last day of the month in which the individual receives notification of his or her non-compliance, unless an appeal is filed or the individual qualifies for a good cause exception. Individuals can become eligible again by meeting requirements; these individuals must reapply and would be re-enrolled with eligibility effective the first day of the month in which the individual re-applies. If the individual reports having met the requirements within one month of disenrollment, s/he will not have to submit a new application. Good cause exemptions include: -Disability of individual or if individual has an immediate family member in the home with a disability and is unable to meet requirements due to this; -Hospitalization/serious illness of the individual or an immediate family member in the home; -Birth or death of a family member in the home; -Severe inclement weather or natural disaster causing disability of individual or immediate family member in the home; -Individual has family emergency or other life changing event (e.g., divorce or domestic violence); -Individual has no access to internet or transportation to a place where the requirements can be completed, such as a job center or library; -There are fewer than 48 employers in the individual’s geographic area that potentially could offer employment or from whom the individual reasonably could be expected to accept an employment offer; or -Individual is the primary caretaker of a child age 6 or older and was unable to meet the requirement due to childcare responsibilities |
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| VA    | Pending      | Implemented ACA Medicaid expansion (coverage begins 1/1/19) | 20 hours/mo. for first three months; 40 hours/mo. six months after enrollment; 60 hours/mo. nine months after enrollment; 80 hours/mo. 12 months after enrollment | -Subsidized or unsubsidized employment  
-Self-employment  
-Job skills/job readiness training or job search activities  
-Participation in a state workforce program  
-Participation in a tribal workforce program  
-Participation in state’s Agriculture and Foreign Labor or other migrant workforce program  
-Education related to employment, general education such as a GED preparation program, participation in chronic disease management classes or nutrition education classes, participation in financial literacy, health literacy, or insurance literacy education classes, or participation in ESL classes  
-Vocational education, training, and apprenticeships  
-Community work experience programs, community service or public service (excluding political activities) that can reasonably improve work readiness  
-Caring services for a non-dependent relative or other person with a chronic, disabling health condition  
-Any additional activities deemed as supporting the health of enrollees and promote program objectives | Individuals age 19-64 with incomes up to 138% FPL | -Individuals under age 19 and age 65 or older  
-Full time, three-quarter time, and part-time students in post-secondary education, including community college course leading to industry certifications or a STEM-H related degree or credential  
-Individuals dually enrolled in Medicaid and Medicare  
-Individuals who have blindness or who have a disability, including SSI or SSDI recipients and recipients of state-based disability program benefits  
-Pregnant women and post-partum women up to six months after delivery  
-Former foster care children under age 26  
-Primary caregiver for a dependent child under age 19 or for an adult dependent with a disability or non-dependent relative with a disability  
-Medically frail individuals (further details in waiver documents; includes individuals with a SUD diagnosis, chronically homeless individuals, individuals who were incarcerated in past 12 months, and others)  
-Individuals meeting TANF or SNAP eligibility requirements  
-Individuals with serious mental illnesses or disabling mental disorders or residing in institutions  
-Victims of domestic violence  
-Additional exemptions as deemed necessary | Non-exempt individuals who fail to comply for three consecutive or non-consecutive months within a 12-month period will have their coverage suspended; notices will be sent to individuals indicating coverage will be suspended if they do not demonstrate compliance within 30 days of the notice. Eligibility will be maintained for individuals who submit an appeal request or report a good cause exemption prior to disenrollment. Enrollees whose coverage is suspended can have coverage reinstated upon:  
-The end of the 12-month period of an enrollee’s coverage year  
-Demonstration of compliance for one month  
-Qualifying for another Medicaid eligibility category  
-Qualifying for a good cause exemption  
-Turning age 65 | Good cause exemptions will also be provided to certain individuals; duration of exemption will be dependent on individual circumstances:  
--Hospitalization/serious illness of the individual or an immediate family member in the home;  
--Individuals who are temporarily incapacitated;  
--Birth or death of a family member in the home;  
--Severe inclement weather;  
--Family emergency or other life changing event (e.g. separation or divorce);  
--Individuals residing in geographic areas where state workforce programs are unavailable or at capacity;  
--Provider attestation of inability to engage in work and community engagement on short-term basis; or  
--Individuals displaced or significantly impacted by a natural or man-made disaster or catastrophic event |
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| WI    | Approved Oct. 31, 2018 (not yet implemented) | Has not implemented ACA Medicaid expansion (state has waiver to cover childless adults aged 19-64 up to 100% FPL) | 80 hours/month | -Working in exchange for money or for goods or services  
- Unpaid work (e.g., volunteer work or community service)  
- Self-employment  
- Participating in allowable work, job training, or job search program (e.g., FoodShare Employment and Training and other state-approved workforce programs) | Adults ages 19-49 who are eligible for Medicaid as childless adults | - Individuals receiving SSDI or other disability benefits  
- Primary caregiver of individual who cannot care for self  
- Physically or mentally unable to work as determined by the state or verified as unable to work by a health care professional or social worker  
- Individuals experiencing chronic homelessness  
- Receiving or has applied for unemployment insurance and in compliance with unemployment compensation work requirements  
- Exempt from SNAP work requirements  
- Participating in certain alcohol or drug abuse treatment programs  
- Enrolled in institution of higher learning (including vocational programs or GED classes) at least half time  
- Individuals attending high school at least half-time | Individuals will be disenrolled and not allowed to re-enroll for six months if they do not comply with the work requirements for an aggregate period of 48 months.  
Good cause exemptions include:  
- Disability of individual or if individual has an immediate family member in the home with a disability and is unable to meet requirements due to this;  
- Hospitalization/serious illness of the individual or an immediate family member in the home;  
- Birth or death of a family member in the home;  
- Severe inclement weather or natural disaster causing inability to meet requirement;  
- Individual has family emergency or other life changing event (e.g., divorce or domestic violence) The state originally sought to require individuals to complete drug screening assessments, and also a drug test if needed; in the approved waiver instead of these requirements, a completion of a health risk assessment is a condition of eligibility. |

Notes: Kansas submitted a waiver proposal to CMS in December 2017 that included Medicaid work requirements for certain individuals; in December 2018, CMS approved the waiver, but the state asked CMS to defer consideration of the work requirements. North Carolina submitted a waiver proposal to CMS in November 2017 that included Medicaid work requirements, but the work requirements were contingent on proposed legislation to expand Medicaid through a program called Carolina Cares that did not move forward. Maine’s request to implement Medicaid work requirements that was submitted under former Gov. LePage was approved Dec. 21, 2018; on Jan. 22, 2019, Gov. Mills informed CMS that the state would not accept the terms of the waiver and would instead direct state officials to make vocational training and workforce supports available to enrollees.