

Medicaid Work and Community Engagement Requirements

A number of states have formally asked the Centers for Medicare & Medicaid Services (CMS) for permission to impose work requirements as a condition of Medicaid eligibility through research and demonstration waiver authority under Section 1115 of the Social Security Act (the Act). CMS has granted waivers to 11 states—Arizona, Arkansas, Indiana, Kentucky, Maine, Michigan, New Hampshire, Ohio, South Carolina, Utah, and Wisconsin—to adopt work and community engagement requirements and has issued subregulatory guidance indicating the circumstances under which it will approve similar requests.¹

Work and community engagement requirements are not currently in effect in any state. One state, Wisconsin, plans to implement these requirements later in 2020; however, their exact implementation date is unclear.² South Carolina and Ohio received approval from CMS to implement the requirements in December 2020 and January 2021, respectively, but their actual implementation dates are similarly unclear.

The other eight states that received approval to implement these requirements have either had their approvals vacated in federal court or have suspended or terminated their requirements voluntarily. Specifically, waiver approvals for Arkansas, Michigan, and New Hampshire were vacated by the U.S. District Court for the District of Columbia and remanded to CMS for further review.³ As a result, these states are not permitted to enforce them at this time and the future of work requirements in these states is in question.⁴ Kentucky's waiver approval was similarly vacated, and although the state initially appealed this ruling, it later chose to terminate the Kentucky HEALTH program (CHFS 2019).^{5,6} Arizona, Indiana, and Utah have each chosen to postpone implementation of these requirements until further notice and Maine's governor has decided not to implement the requirements.⁷

In guidance to states describing its goals for Section 1115 demonstrations, CMS expressed support for coordinated strategies to “promote upward mobility, greater independence, and improved quality of life among individuals” (CMS 2017a). CMS links these outcomes to employment, and argues that strategies to support employment in other aspects of the Medicaid program have increased beneficiary employment rates and participation in job search and training, as well as earned income among those leaving the program (CMS 2018a).⁸ Many states' waiver applications share CMS's expectations that such changes will support beneficiaries' transitions to commercial coverage and self-sufficiency, and reduce their reliance on public programs.

The federal government first began approving policies to require work as a condition of Medicaid eligibility in 2018. Previously, some states, including Indiana, Montana, and Pennsylvania, were permitted to refer Medicaid applicants to voluntary work support programs (MACPAC 2019, 2015). Opponents of these



policies have pointed to the significant number of Medicaid beneficiaries already working and have raised concerns about potential harms to beneficiaries and challenged CMS's legal authority to approve such requests.

This issue brief describes the features of the CMS guidance and approved state waivers to implement work and community engagement requirements, in both states with active waivers, and in states where requirements are suspended or will not move forward. It includes discussion of the populations subject to requirements, allowable work and community engagement activities, and penalties associated with non-compliance. It also describes implementation considerations that CMS has requested that states take into account, as well as monitoring, evaluation, and process requirements. The brief concludes by outlining some concerns that have been raised about work or community engagement requirements.

The information in issue brief is current as of June 2020. The Biden Administration has since withdrawn authority to implement work and community engagement requirements, or indicated that it plans to do so, in all states that received such an approval during the Trump Administration. As a result, work and community engagement requirements are not permitted to go into effect in any state.

Features of Work and Community Engagement Requirements

Approved waivers require certain non-disabled, non-elderly, non-pregnant individuals to meet work and community engagement requirements as a condition of Medicaid eligibility. These waivers, and those still under consideration at CMS, have many common features, but vary with regard to:

- which populations are required to participate in work or community engagement as a condition of eligibility, and within those populations, which individuals qualify for an exception to the requirement;
- activities that qualify as work or community engagement, and the number of hours beneficiaries are required to complete; and
- penalties for non-compliance with the requirement.

CMS has provided some guidance around how states should design these policies but has also indicated that it will generally allow states flexibility.

States are also seeking waivers to implement other changes to their programs, such as changes to income eligibility thresholds, asset limits, required premiums and disenrollment or lock-out periods for non-payment, health savings accounts, and healthy behavior incentives. Such policies are beyond the scope of this brief. For further information on how states have adopted these approaches in waivers expanding Medicaid coverage to non-disabled adults, see [Testing new program features through Section 1115 waivers](#).



Populations subject to and exempt from requirements

CMS is currently allowing states to implement work and community engagement requirements as a condition of eligibility for non-elderly, non-pregnant adults eligible on a basis other than disability, with some exceptions (CMS 2018a). Most states with approved waivers are Medicaid expansion states and have adopted work requirements for the expansion population, and in some cases, other adults.

CMS also has granted approval to establish work and community engagement programs in two non-expansion states, South Carolina and Wisconsin.⁹ South Carolina applies requirements to parents and caretaker relatives, who are covered up to 95 percent of the federal poverty level (FPL), beneficiaries receiving transitional medical assistance, and other targeted, non-disabled adults (CMS 2019a, b).¹⁰ Wisconsin applies work requirements to non-elderly, non-disabled, non-pregnant adults up to 95 percent of the federal poverty level (FPL) (CMS 2018b).¹¹ A number of additional non-expansion states have work and community engagement requests pending with CMS, including Alabama, Mississippi, Oklahoma, South Dakota, and Tennessee.

CMS requires states to exempt certain subpopulations from requirements that would otherwise apply to non-disabled, non-pregnant, non-elderly adults. These include medically frail individuals and individuals with acute medical conditions confirmed by a medical professional. CMS has also suggested that states align Medicaid exemptions with those used in the Temporary Assistance for Needy Families (TANF) or Supplemental Nutrition Assistance (SNAP) programs.¹² With regard to individuals who have disabilities but are not eligible for Medicaid on the basis of a disability, states are required to comply with federal civil rights laws, make reasonable modifications, and ensure that these individuals are not denied eligibility for failure to meet work requirements.¹³ Additionally, states are required to take steps to ensure that eligible individuals with opioid addiction or other substance use disorders can access treatment (CMS 2018a).

States have generally proposed to include these exemptions as well as some additional ones. For example, many states would exempt individuals with caretaker responsibilities, individuals who are mentally or physically unable to work, and individuals who are attending school (Table 1A).

Activities defined as work or community engagement

CMS allows states to define work and community engagement activities within certain parameters. States must consider individuals to be in compliance with Medicaid requirements automatically if they are satisfying TANF or SNAP work requirements. CMS also encourages states to consider allowing a range of activities to qualify as community engagement, including career planning, volunteering, and participating in tribal employment programs (CMS 2018a).

States have generally aligned qualifying activities for Medicaid with those used in TANF or SNAP, such as vocational training, community service programs, and general equivalency diploma preparation activities.¹⁴ Many allow additional activities to count towards the definition of work, such as participating in a job-training program administered by the state or a managed care organization, or attending an English-as-a-second-language course (Table 2A).



States have designed their work and community engagement policies differently. Several states allow individuals meeting certain criteria to satisfy the requirement automatically. For example, prior to its decision to suspend enforcement of the requirements, Indiana considered individuals working 20 hours per week to satisfy the requirement automatically (FSSA 2019). In other cases, individuals must track their participation in a specified number of hours of qualifying activities (typically 20 hours per week or 80 hours per month, although New Hampshire required 100 hours per month). Some states limit how many hours per month can be attributed to certain activities. Under its previously approved waiver, Arkansas, for example, allowed job-training or job-search activities to count up to 40 hours per month only. In general, beneficiaries may not carry over extra hours from one month into another; however, South Carolina allows beneficiaries to apply extra hours from one month to other months in the same quarter (CMS 2019a, b). Other states require beneficiaries not meeting an exemption to engage in a specific list of employment training and search activities, but do not require a minimum number of participation hours. For example, prior to suspending its program, Utah required beneficiaries to register for work through the state, complete an assessment of employment training needs, submit at least 48 job applications, and complete certain job training modules (Table 2A).

Some states are phasing in their work and community engagement requirements. Prior to the court ruling, Arkansas phased them in by age group, beginning with individuals age 30 through 49 in June 2018, and individuals age 19 through 29 in January 2019 (CMS 2018c). Prior to its decision to suspend enforcement of the requirement, Indiana was phasing in requirements, with hourly requirements increasing gradually from zero hours per week for the first six months to a maximum of 20 hours per week after 18 months (CMS 2018d).¹⁵ Kentucky planned to phase in the requirement by county (CMS 2018e).

Penalties for non-compliance

States differ in the penalties for beneficiaries who do not comply with the work requirements, some of which are already in use in the TANF and SNAP programs. Most states plan to suspend eligibility until beneficiaries comply with work requirements. Prior to March 2019 action by the U.S. District Court, Arkansas disenrolled beneficiaries after three months of non-compliance, and prevented them from reenrolling until the following calendar year. Wisconsin has a fixed lockout period of six months after beneficiaries fail to meet the work requirements for 48 consecutive or non-consecutive months. Arizona planned to automatically reactivate eligibility after a two-month suspension period, the only state with such a policy (Table 3A).

Implementation Considerations

CMS has asked states to take particular issues related to implementation into account, including how states track and verify compliance, provide beneficiaries with necessary supports, and address economic and structural barriers. Though the agency has not required states to detail the process for handling these issues in either their proposals or the waivers' special terms and conditions (STCs), it generally requires states to submit an implementation plan within 90 days of waiver approval.



Tracking and verifying compliance

CMS guidance does not address how states should track and verify compliance with work requirements. It does require states to use an administrative data match to ensure that beneficiaries are not required to report information to multiple programs if they are exempt from or compliant with SNAP or TANF work requirements. For other beneficiaries, states have taken different approaches.

In Arkansas, beneficiaries were required to document their compliance through an online portal or by phone by the fifth day of each month.¹⁶ Beneficiaries could report an exemption through the online portal at any time (CMS 2018c). In Michigan, prior to the court ruling, beneficiaries were required to report monthly, and had several options for doing so (e.g., by telephone, in person, mail, or fax.) consistent with established procedures for other Medicaid eligibility criteria (CMS 2018f).¹⁷ Arizona planned a similar approach prior to postponing implementation (CMS 2019c). Prior to the court ruling, New Hampshire also required beneficiaries to report monthly with several reporting options; however, the state encouraged beneficiaries to report through online portals (Landry 2018). As originally approved, beneficiaries in Kentucky would be encouraged to report online but permitted to report over the phone, in person, or by mail (Putnam 2018). Other states have alternative rules for reporting:

- Ohio requires beneficiaries to report compliance within 60 days of receiving notice that they are subject to requirements. Further reporting is not required unless circumstances change (CMS 2019d).
- South Carolina has different rules for different qualifying activities. Beneficiaries who meet the requirements through employment at application are not required to report again until their redetermination. Beneficiaries who meet the requirements through other activities must report compliance every 90 days (CMS 2019a, b).
- Prior to suspending its requirements, Utah required beneficiaries to complete a set of employment training and search activities once per 12-month benefit period (CMS 2019e).
- Upon resuming enforcement, Indiana will review and verify beneficiary compliance each December (CMS 2018d).
- Wisconsin has not yet specified how it will track and verify compliance and exemptions.

Beneficiary supports

CMS requires states to describe their strategies to assist beneficiaries in meeting work and community engagement requirements and link them to additional resources for job training or other employment services, child care assistance, transportation, or other work supports (CMS 2018a). CMS also encourages states to include descriptions of procedures to assess individuals' disabilities, medical diagnoses, or other barriers to employment and self-sufficiency in order to identify necessary supports or reasonable modifications (CMS 2018a).

In some states, including Indiana, Ohio, Utah, and Wisconsin, work and community engagement requirements were designed to link beneficiaries to existing state job-training programs. At least one state, Mississippi, requested that CMS allow it to include employment-related training as a Medicaid-covered benefit, and that costs associated with doing so be considered a "cost not otherwise matchable" with a 90



percent matching rate (CMS 2018g).¹⁸ However, CMS has specified that federal Medicaid funds cannot be used to finance support services.

Attention to market forces and structural barriers

CMS will provide states with flexibility in responding to the local employment market, for example, by phasing in or suspending program features as necessary in regions with limited employment opportunities, or that face economic stress or lack viable transportation. The STCs of each approved waiver require states to assure that they will evaluate areas with high rates of unemployment, limited educational opportunities, or a lack of public transportation to determine whether to make further exemptions from the requirements.

Process Requirements

Like other Section 1115 demonstration waivers, waivers that implement work and community engagement requirements are subject to all relevant public notice and transparency requirements, and where applicable, tribal consultation requirements. These waivers also require states to submit regular monitoring reports and undergo independent evaluations. CMS has outlined general requirements in the STCs concerning what states must evaluate and monitor, such as the requirement's impact on coverage and access, and whether the requirement affects beneficiaries' ability to obtain employment and transition to employer-sponsored coverage.

In March 2019, CMS issued evaluation and monitoring guidance to states, designed to strengthen expectations for states implementing certain types of demonstrations, including work and community engagement requirements. The guidance includes a monitoring report template outlining the specific quantitative and coverage monitoring metrics states are expected to report as well as evaluation design guidance that includes the key hypotheses, evaluation questions, measures, and methodologies that states are expected to include in their evaluations.¹⁹

Each state must submit an evaluation design plan to CMS for review. As of April 2020, CMS has not approved and posted a state evaluation design plan to Medicaid.gov.

Concerns with the Requirements

Work and community engagement requirements are a new and controversial feature of Medicaid waivers. Those opposed to these waivers argue that such requirements will lead to coverage losses without increasing employment. Even though 60 percent of non-disabled adults with Medicaid are employed on a full- or part-time basis, and many others would potentially qualify for an exemption, requirements to verify employment or claim an exemption could discourage individuals from applying for or renewing coverage, or submit supporting documentation (Garfield et al. 2017; Ku and Brantley 2017). Coverage loss projections indicate that most people disenrolled for failure to comply with the requirements would be those who remain eligible for Medicaid but failed to report participation hours or exemptions (Garfield et al. 2018). However, coverage losses could be particularly pronounced among individuals who have



substantial barriers to work (e.g., behavioral health problems or issues with arranging child care), as they may be ineligible for exemptions but unable to satisfy the work requirement (Garfield et al. 2018, Rosenbaum et al. 2017, Katch 2016).

The number of Medicaid beneficiaries whose coverage could be affected by a work requirement depends on each demonstration program's design specifications, but many states proposing work requirements anticipate reductions in Medicaid enrollment over the five-year demonstration period relative to the status quo. In the first seven months of Arkansas's program, 18,164 individuals were disenrolled (DHS 2018). After the first month of New Hampshire's program, 16,874 individuals failed to comply with the requirements; however, the state chose to extend the reporting deadline and did not disenroll anyone (Bookman 2019). Other states also project coverage losses. For example, Kentucky estimated that 97,000 fewer beneficiaries would be covered by Medicaid as a result of the policies in the waiver, including work requirements (CMS 2017b). Indiana estimated that approximately 25 percent of the population subject to the work requirement (approximately 25,000 people) would choose not to participate and therefore would be disenrolled (CMS 2017c). These observed and expected coverage losses are consistent with caseload declines in cash assistance programs accompanying the transition to TANF and its work requirements. For more on the evidence from TANF, see [Work as a Condition of Medicaid Eligibility: Key Takeaways from TANF](#).

Five federal lawsuits have been filed regarding Medicaid work requirements in the U.S. District Court of the District of Columbia: one each on behalf of Medicaid beneficiaries in Kentucky, Arkansas, New Hampshire, Indiana, and most recently Michigan. These lawsuits argue that work requirements and other features of the waivers constitute a major overhaul of the Medicaid program that is contrary to its objectives and outside the scope of Section 1115 waiver authority. Specifically, they note that the basic purpose of the Medicaid program is to provide medical assistance to people whose income and resources are insufficient to pay for the cost of necessary services (Callow 2018, Rosenbaum 2018).

In the cases of Arkansas, Kentucky, and New Hampshire, the court ruled that the Secretary of the U.S. Department of Health and Human Services (the Secretary) failed to consider whether the waivers would help the states fulfill this purpose, calling the Secretary's decision to approve the waivers "arbitrary and capricious." These rulings vacated the approvals of the waivers, remanding them to the Department for further review. The court granted summary judgment to plaintiffs in Michigan, similarly vacating Michigan's waiver.^{20,21} Rulings in the Arkansas, Kentucky, and New Hampshire cases were appealed to the U.S. Court of Appeals for the District of Columbia Circuit; the court upheld the initial decisions in Arkansas and New Hampshire's cases and dismissed Kentucky's case due to the state's decision to terminate the program.

Endnotes

¹ Additional states, including Alabama, Idaho, Mississippi, Montana, Nebraska, Oklahoma, South Dakota, and Tennessee have submitted applications for waivers with work requirements. Kansas and Virginia also applied, but later asked CMS to defer



consideration (DMAS 2018, CMS 2017d). According to press reports, other states have expressed interest in applying for such waivers but we only have included states with formal waiver applications in this fact sheet.

² Wisconsin has repeatedly delayed implementation to allow more time to set up the program, but still plans to begin requirements some time in 2020 (Wahlberg 2020).

³ *Young v. Azar* 1:19-cv-03526 (D.D.C. 2020), *Philbreck v. Azar* 19-773-JEB (D.D.C. 2019), *Gresham v. Azar* 1:18-cv-01900-JEB (D.D.C. 2019). The ruling in Arkansas's case, *Gresham v. Azar*, was upheld by the U.S. Court of Appeals for the D.C. Circuit in February 2020 (*Gresham v. Azar* 1:18-cv-01900 (D.C. Cir. 2020)).

⁴ Michigan initially implemented work requirements in January 2020, New Hampshire initially implemented them in June 2019, and Arkansas implemented them in June 2018 (Dwyer 2020, Bookman 2019, CMS 2018e, Meyer 2018).

⁵ *Stewart v. Azar* 313 F. Supp. 3d 237 (D.D.C. 2018).

⁶ Kentucky received initial approval for a demonstration of work and community engagement requirements in January 2018, which had been scheduled to take effect on July 1, 2018 (CMS 2018h). The June 2018 ruling in *Stewart v. Azar* vacated the approval, remanding it to CMS for further review. CMS issued a reapproval for Kentucky's demonstration program on November 20, 2018, which was again vacated in March 2019 (CMS 2018e). The decision to terminate the Kentucky HEALTH program was made following a change in state administration: Governor Andy Beshear announced this action soon after taking office in December 2019 (CHFS 2019).

⁷ After becoming governor in January 2019, Maine governor Janet Mills formally notified CMS that the state was rejecting the terms and conditions of the waiver and would not move forward with implementation (Mills 2019). Citing ongoing litigation on these requirements and other factors in the national landscape, Arizona's Medicaid director notified CMS in October 2019 that the state would delay the state implementation of the requirements indefinitely (AHCCS 2019). Indiana made a similar announcement in October 2019 (FSSA 2019a). Additionally, in April 2020, Utah announced that it would suspend work requirements temporarily in response to the COVID-19 pandemic (Meyer 2020).

⁸ Examples include Medicaid buy-in programs that allow workers with disabilities to earn higher incomes and still maintain Medicaid coverage, voluntary work and job-training referral programs, and other employment supports. Historically, participation has been optional (i.e., not a requirement of eligibility) and focused on people with disabilities or people who are receiving home- and community-based services under state plan authority in Section 1915(c) or Section 1915(i) of the Act (CMS 2018a).

⁹ Two additional states, Maine and Utah, received CMS approval to implement work and community engagement requirements before they expanded Medicaid. In Maine, work and community engagement requirements would have applied to the state population of non-disabled, non-elderly adult beneficiaries as of December 2018, which included parents and low-income caretakers with income up to 100 percent of the federal poverty level (FPL), former foster care youth, and transitional medical assistance beneficiaries (CMS 2018i). However, Maine governor Janet Mills chose not to move forward with implementation (Mills 2019). In Utah, work and community engagement requirements applied to the state population of non-disabled, non-elderly adult beneficiaries, who at the time were covered if they had income up to 100 percent FPL (CMS 2019e). Utah later adopted the full Medicaid expansion and received approval to apply requirements to this population as well.

¹⁰ South Carolina applies work and community engagement requirements to nearly all non-disabled, non-pregnant adult Medicaid beneficiaries in the state. See the MACPAC fact sheet on *South Carolina Waivers: Healthy Connections Works and Palmetto Pathways to Independence* for more details on these populations (MACPAC 2020a).

¹¹ Wisconsin and South Carolina's income eligibility thresholds are effectively 100 percent FPL due to the standard five percent of the FPL disregard.



¹² Exempted populations in SNAP and TANF vary by state. In TANF they often include pregnant women, parents who receive Supplemental Security Income or Social Security Disability Insurance, caretakers of disabled family members, or children under age six. In SNAP, exempted populations include individuals under age 16 or over age 59, individuals between age 16 and 18 enrolled in school or a training program, individuals receiving disability benefits or who are otherwise physically or mentally unfit, caretakers of disabled dependents, parents needed to care for a child under age 6, and those exempt from or meeting requirements for other programs such as TANF or unemployment insurance (Falk et al. 2016).

¹³ Reasonable modifications could include providing support services or requiring fewer hours of participation in qualifying work or community engagement activities (CMS 2018a).

¹⁴ In the TANF program, states have discretion to design TANF work requirement policies for exemptions such as required participation hours, but must meet federal work participation rate requirements (i.e., that 90 percent of two-parent families work at least 35 hours per week, and half of all families work for 30 hours per week) or they will be subject to a reduction in federal funds. SNAP work requirements are less analogous than TANF work requirements to those proposed for state Medicaid programs. In SNAP, non-exempt beneficiaries must notify the state annually whether they are employable and working. They cannot voluntarily reduce work below 30 hours per week, quit a job without cause, or fail to accept a job if offered one. States determine the penalty for non-compliance within federal maximum penalties (Falk et al. 2016).

Activities defined as work activities under TANF are outlined in Section 407(d) of the Act and include:

- unsubsidized employment;
- subsidized public or private sector employment;
- work experience (including work associated with the refurbishing of publicly assisted housing) if sufficient private sector employment is not available;
- on-the-job training;
- job-search and readiness assistance; community service programs;
- vocational educational training (up to 12 months per individual); job skills training directly related to employment; education directly related to employment or satisfactory attendance at a secondary school or in a course of study leading to a certificate of general equivalence; and
- the provision of child care services to an individual participating in a community service program (Falk et al. 2016).

¹⁵ As of October 2019, when the state chose to suspend implementation, beneficiaries were required to complete 10 hours of qualifying activities per week. It is not clear how the state will count months in which the requirements are suspended for the purposes of phasing in hourly requirements.

¹⁶ Typically, states are required to meet process requirements for verifying eligibility criteria, including regulations at 42 CFR 435.916(c) and 42 CFR 435.945 requiring states to provide multiple means of submission (e.g., online, via mail, or other electronic means). However, CMS waived that requirement for Arkansas, permitting the state to allow beneficiaries to submit documentation or exemptions only through the online portal. Arkansas was required to consider the impact of any reporting obligations on a person without access to the Internet and assure, to the extent practicable, that availability of Medicaid services will not be diminished as a result (CMS 2018c). In December 2018, Arkansas chose to open a phone line for reporting in addition to the online portal.

¹⁷ These include regulations at 42 CFR 435.916(c) and 42 CFR 435.945 which require states to provide multiple means of submission from applicants and follow general requirements for verifying eligibility.

¹⁸ The Secretary can permit federal financial participation for costs not otherwise matchable, allowing states to cover services and populations not included in the Medicaid state plan.

¹⁹ For more discussion on the challenges states and CMS face in conducting and using Section 1115 demonstration evaluations, see the MACPAC report to Congress on *Improving the Quality and Timeliness of Section 1115 Demonstration Evaluations* (MACPAC 2020b).



²⁰ *Young v. Azar* 1:19-cv-03526 (D.D.C. 2020)

²¹ Indiana’s case was pending in the same court. However, court proceedings were paused in April 2020, as the Secretary and plaintiffs agreed to a hiatus in light of the COVID-19 pandemic and Indiana’s prior decision to voluntarily suspend enforcement of the requirements.

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Appendix: Details of Approved and Proposed Work Requirements

TABLE A1. Populations Subject to Work and Community Engagement Requirements by State

State	Populations covered	Exemptions
Alabama	<ul style="list-style-type: none"> parents and caretakers 	<ul style="list-style-type: none"> medically frail individuals beneficiaries receiving SSDI, SSI, or Medicare beneficiaries receiving post-partum care pregnant women beneficiaries over age 60 caregivers of a disabled child or adult beneficiaries participating in intensive, authorized medical treatment program for alcohol or substance use or addiction beneficiaries enrolled in and compliant with TANF JOBS program beneficiaries exempt from TANF JOBS program single custodial parents for a child under the age of 6 for whom childcare is not available
Arizona (approved but implementation postponed indefinitely)	<ul style="list-style-type: none"> new adult group age 19–49 	<ul style="list-style-type: none"> pregnant women and women up to 60 days post-partum former foster care youth up to age 26 beneficiaries determined to have an SMI beneficiaries receiving temporary or permanent long-term disability benefits or workers compensation benefits from a private insurer or the state or federal government medically frail individuals beneficiaries in active treatment with respect to substance use disorder full time high school, trade school, college, or graduate students victims of domestic violence homeless designated caretakers of a child under age 18, or of a child age 18 who is a full-time high school or trade school student and is expected to graduate before he or she turns 19 (one caregiver per child) caregivers of an individual with a disability beneficiaries prevented from complying with requirements due to an acute medical condition disabled beneficiaries, as defined by federal disabilities rights laws, and unable to comply with requirements due to a disability members of federally recognized tribes beneficiaries participating in other Arizona Health Care Cost Containment System approved work programs beneficiaries receiving SNAP, cash assistance, or unemployment insurance income benefits

State	Populations covered	Exemptions
Arkansas (approval vacated)	<ul style="list-style-type: none"> new adult group age 19–49 	<ul style="list-style-type: none"> beneficiaries identified as medically frail beneficiaries who are pregnant or 60 days post-partum full-time students beneficiaries exempt from SNAP work requirements beneficiaries receiving cash assistance through TANF or exempt from the state work requirements for TANF beneficiaries who are incapacitated in the short term or medically certified as physically or mentally unfit for employment, or have an acute medical condition that would prevent them from complying with the requirements beneficiaries caring for an incapacitated person beneficiaries who live in a home with a minor dependent child age 17 or younger beneficiaries receiving unemployment benefits beneficiaries participating in a treatment program for alcoholism or drug addiction
Idaho	<ul style="list-style-type: none"> new adult group 	<ul style="list-style-type: none"> beneficiaries under age 19 or over age 59 beneficiaries who are physically or intellectually unable to work pregnant women parents and caretakers providing for a dependent under age 18 or with a serious mental condition beneficiaries who are applying for or receiving unemployment compensation and complying with related work requirements beneficiaries who are applying for Social Security Disability benefits beneficiaries who are participating in a drug addiction or alcohol treatment and rehabilitation program beneficiaries who are American Indian or Alaska Natives eligible for services through the Indian Health Service or tribal health program
Indiana (approved but enforcement suspended indefinitely)	<ul style="list-style-type: none"> new adult group parents and caretakers TMA beneficiaries 	<ul style="list-style-type: none"> students (full- and part-time) pregnant women primary caregivers of a dependent child below the compulsory education age or a disabled dependent beneficiaries identified as medically frail beneficiaries with a temporary illness or incapacity documented by a third party beneficiaries in active SUD treatment beneficiaries over age 59 beneficiaries who are homeless beneficiaries who were incarcerated within the last six months beneficiaries who meet the requirements of TANF employment initiatives or who are exempt from having to meet those requirements beneficiaries enrolled in the state’s Medicaid employer premium assistance program persons determined eligible for a good cause exemption

State	Populations covered	Exemptions
Kentucky (approved but will not be implemented)	<ul style="list-style-type: none"> new adult group parents and caretakers TMA beneficiaries 	<ul style="list-style-type: none"> former foster care youth pregnant women primary caregivers of a dependent minor child or disabled adult (limited to one caregiver per household) beneficiaries identified as medically frail beneficiaries diagnosed with an acute medical condition that would prevent them from complying with the requirements full-time students as determined by the state beneficiaries under age 19 or over 64
Maine (approved but will not be implemented)	<ul style="list-style-type: none"> parents and caretakers TMA beneficiaries former foster care children individuals eligible for family planning services medically needy individuals age 18–20 medically needy parents and caretaker relatives individuals receiving services through the state’s HIV waiver 	<ul style="list-style-type: none"> residing in an institutional residential facility residing in a residential substance use treatment and rehabilitation program caring for a dependent child under age six providing caregiver services for an incapacitated adult being pregnant being physically or mentally unable to work 20 hours or more per week receiving temporary or permanent disability benefits good cause exemptions determined when a member has failed to meet work requirements
Michigan (approval vacated)	<ul style="list-style-type: none"> new adult group 	<ul style="list-style-type: none"> medically frail beneficiaries caretaker of a family member under 6 years of age (only one parent at a time can claim this exemption) beneficiaries 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 caretaker of an incapacitated individual even if the incapacitated individual is not a dependent of the caretaker beneficiaries with a medical condition resulting in a work limitation according to a licensed medical professional order beneficiaries who have been incarcerated within the last 6 months beneficiaries currently receiving unemployment benefits from the state of Michigan beneficiaries under 21 years of age who had previously been in foster care placement in this state beneficiaries with a disability who are unable to meet the requirement due to the disability good cause exemptions, if reported up to 10 days prior to disenrollment

State	Populations covered	Exemptions
Mississippi	<ul style="list-style-type: none"> • parents and caretakers • TMA beneficiaries 	<ul style="list-style-type: none"> • members who have a diagnosed mental illness. • members receiving SSDI or SSI • primary caregivers of a person who cannot care for himself or herself • members who are physically or mentally unable to work • members who are receiving or has applied for unemployment insurance • members taking part in an alcohol or other drug abuse treatment program • members enrolled in an institution of higher learning at least half-time • high school students age 19 or older, attending high school at least half-time • members receiving treatment for cancer, including those receiving treatment through the breast and cervical cancer program
Montana	<ul style="list-style-type: none"> • new adult group age 19–55 	<ul style="list-style-type: none"> • beneficiaries who are medically frail as defined in 42 CFR 440.315 • beneficiaries who are blind or disabled • beneficiaries who are pregnant • beneficiaries who are experiencing an acute medical condition requiring immediate medical treatment • beneficiaries who are mentally or physically unable to work • primary caregivers for a person unable to provide self-care • foster parents • full-time students enrolled in secondary school • beneficiaries who are enrolled in the equivalent of six or more credits in a postsecondary or vocational institution • beneficiaries who are participating in or exempt from work requirements of TANF OR SNAP • beneficiaries who are under supervision of the department of corrections, a county jail, or another entity as a directed by a court • beneficiaries experiencing chronic homelessness • beneficiaries who are victims of domestic violence as defined by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193) • beneficiaries living in an area with a high-poverty designation • beneficiaries who are members of an entity subject to the state’s taxpayer integrity fees • beneficiaries whose income exceeds an amount equal to the average of 80 hours per month multiplied by the minimum wage • beneficiaries otherwise exempt under federal law

State	Populations covered	Exemptions
Nebraska	<ul style="list-style-type: none"> new adult group age 20–60 	<ul style="list-style-type: none"> beneficiaries determined to be medically frail beneficiaries with SMI or chronic SUD beneficiaries participating in an SUD or mental health treatment program beneficiaries receiving unemployment compensation or who have applied for unemployment compensation and are fulfilling weekly work search requirements American Indian and Alaska Native beneficiaries enrolled in a federally recognized tribe beneficiaries experiencing chronic homelessness beneficiaries who are pregnant or in their post-partum period high school students of any age attending at least half time beneficiaries residing in an area that has been granted a federal ABAWD waiver due to insufficient jobs to provide employment beneficiaries who are survivors of domestic violence, when participation would make it harder to escape, penalize the individual, or put them at further risk of domestic violence
New Hampshire (approval vacated)	<ul style="list-style-type: none"> new adult group 	<ul style="list-style-type: none"> beneficiaries who are temporarily unable to participate due to illness or incapacity as documented by a licensed provider beneficiaries participating in a state-certified drug court program parents or caretakers of a dependent child under age six, child of any age with a disability, or a dependent individual whose care is considered necessary by a licensed provider beneficiaries who are pregnant or 60 days or fewer post-partum beneficiaries identified as medically frail beneficiaries with a disability or residing with an immediate family member with a disability as defined by ADA Section 504 or 1557 who are unable to comply with the requirement due to reasons related to that disability beneficiaries who experience a hospitalization or serious illness, or are residing with an immediate family member who experiences a hospitalization or serious illness, beneficiaries exempt from SNAP or TANF employment requirements beneficiaries enrolled in New Hampshire's voluntary Health Insurance Premium Payment Program

State	Populations covered	Exemptions
Ohio (approved)	<ul style="list-style-type: none"> new adult group 	<ul style="list-style-type: none"> pregnant women and women during the 60-day postpartum period beneficiaries age 50 or older beneficiaries residing in a county approved for a waiver of SNAP time limits by the U.S. Department of Agriculture beneficiaries exempt from SNAP or TANF work requirements beneficiaries who have applied for or are receiving unemployment compensation or SSI eligible incarcerated individuals beneficiaries who are physically or mentally unfit to participate in qualifying activities participants in the Ohio Specialized Recovery Services program beneficiaries caring for a disabled or incapacitated household member parents, caretakers, or beneficiaries residing in the same household with a child under age 19 beneficiaries enrolled in school or GED programs at least half time beneficiaries participating in substance use disorder treatment beneficiaries identified as medically frail
Oklahoma	<ul style="list-style-type: none"> parents and caretakers age 19–50 	<ul style="list-style-type: none"> beneficiaries age 18 or younger and age 51 or older pregnant women individuals who are medically certified as physically or mentally unfit for employment parent or caretaker responsible for the care of a dependent child under age 6 parent or caretaker personally responsible for the care of an incapacitated person beneficiaries subject to and complying with SNAP or TANF work requirements individuals participating in drug addiction or alcohol treatment and rehabilitation students enrolled at least part time at any recognized school, training program, or institution of higher education beneficiaries subject to and complying with a work registration requirement under Title IV of the Social Security Act (42 U.S.C. 602, as amended) or federal-state unemployment compensation system beneficiaries who are self-employed and working a minimum of 30 hours a week or receiving weekly earnings equal to federal minimum wage multiplied by 30 hours individuals with a disability under the definitions of the Americans with Disabilities Act and Section 504 of the Rehabilitation Act, or Section 1557 of the Patient Protection and Affordable Care Act members enrolled in the Oklahoma Health Care Authority family planning program under the state plan beneficiaries in the Oklahoma Health Care Authority Breast and Cervical Cancer Program foster care parents and former foster care members American Indians and Alaska Natives

State	Populations covered	Exemptions
South Carolina (approved)	<ul style="list-style-type: none"> • parents and caretakers • TMA beneficiaries • targeted adults 	<ul style="list-style-type: none"> • beneficiaries receiving SSI or SSDI • beneficiaries who are qualified as working disabled • primary caregivers of a child up to age 8 or a disabled adult • beneficiaries identified as medically frail • members of federally recognized tribe • beneficiaries who have been diagnosed with an acute medical condition that prevents them from complying with the requirement (as verified by a medical professional) • beneficiaries participating in and exempt from SNAP or TANF employment requirements • beneficiaries participating in a Medicaid-covered treatment program for alcohol or substance abuse addiction • beneficiaries who are pregnant or 365 days or fewer postpartum • beneficiaries residing in regional areas experiencing an unemployment rate of 8 percent or greater or when the statewide unemployment rate is 8 percent or greater
South Dakota	<ul style="list-style-type: none"> • parents and caretakers residing in Minnehaha or Pennington County 	<ul style="list-style-type: none"> • individuals who work 80 hours or more a month • beneficiaries age 18 or younger and age 60 or older • full-time students • pregnant women • beneficiaries whose eligibility has been determined on the basis of disability or who have been determined disabled by the Social Security Administration • medically frail individuals • beneficiaries already participating in a workforce participation program that the state has determined meets the objectives of the Career Connector program (e.g., SNAP, TANF or unemployment insurance) • non-parent caretaker relatives • parents of a dependent child age one or younger living in the parent's residence • the primary caretaker of an elderly or disabled individual living in the caretaker's residence
Tennessee	<ul style="list-style-type: none"> • parents and caretakers 	<ul style="list-style-type: none"> • individuals age 65 or older • individuals who are physically or mentally incapable of work (certified by a medical professional) • medically frail individuals • individuals with short- or long-term disability or acute medical condition that would prevent them from complying • individuals participating in inpatient or residential treatment or an intensive outpatient program for a substance use disorder • primary caregiver for a child under age six (one exemption per household) • an individual who is providing caregiver services for a household member with a disability, incapacitation, or medical frailty that prevents the caregiver from fulfilling the work requirement • individuals receiving unemployment benefits • individuals who have recently been directly impacted by a catastrophic event, such as a natural disaster

State	Populations covered	Exemptions
Utah (approved but enforcement suspended indefinitely)	<ul style="list-style-type: none"> new adult group 	<ul style="list-style-type: none"> individuals age 60 or older individuals who are physically or mentally unable to meet the requirements a parent or other member of household responsible for caring for a dependent child under age six an individual responsible for the care of a person with a disability a member of a federally recognized tribe an individual who has applied for or is receiving unemployment insurance benefits and has registered for work at the Utah Department of Workforce Services an individual who is participating regularly in an SUD treatment program an individual enrolled at least half time in any kind of school or educational program an individual participating in refugee employment services offered by the state an individual receiving State Family Employment Program services individuals in compliance with or exempt from SNAP or TANF work requirements individuals with income consistent with working 30 or more hours per week at the federal minimum wage
Wisconsin (approved)	<ul style="list-style-type: none"> childless, non-pregnant adults age 19–49 with income up to 100 percent FPL 	<ul style="list-style-type: none"> individuals unable to work or participate in the workforce training activities beneficiaries receiving temporary disability benefits beneficiaries mentally or physically unable to work beneficiaries verified as unable to work in a statement from a health care professional or a social worker beneficiaries experiencing chronic homelessness a primary caregiver for a person who cannot care for him or herself beneficiaries receiving (or have applied for) unemployment compensation and are complying with unemployment compensation work requirements beneficiaries exempt from SNAP work requirements beneficiaries participating in alcohol or other drug abuse treatment or rehabilitation program beneficiaries enrolled in institution of higher learning at least half time beneficiaries enrolled in high school at least half time

Notes: ABAWD is able bodied adult without dependents. ADA is the Americans with Disabilities Act (ADA, P.L. 101-336). CMS is Centers for Medicare & Medicaid Services. FPL is federal poverty level. HIV is human immunodeficiency virus. HCBS is home- and community-based services. MFP is Money Follows the Person. MSP is Medicare Savings Program. PACE is Program for All-Inclusive Care for the Elderly. SNAP is Supplemental Nutrition Assistance Program. SSDI is Social Security Disability Insurance. SSI is Supplemental Security Income. SUD is substance use disorder. TANF is Temporary Assistance for Needy Families program. TBI is traumatic brain injury. TMA is transitional medical assistance. South Carolina’s targeted adults group includes a capped number of individuals age 19–64 who are chronically homeless, involved in the criminal justice system and in need of substance use or mental health treatment, or have been diagnosed with SUD or serious mental illness. CMS has not approved state proposals unless otherwise indicated. Kansas and Virginia both requested waiver approval to implement work and community engagement requirements, but later asked CMS to defer consideration of this matter (DMAS 2018a, CMS 2017a).

Source: MACPAC 2020 analysis of CMS 2019a–e; 2018b–m; DHHS 2019; DHW 2019; DPHHS 2019; and TennCare 2018.

TABLE A2. Qualifying Work and Community Engagement Activities by State

State	Deemed to satisfy	Satisfy through completion of qualifying activities
Alabama	none	20 hours per week of: <ul style="list-style-type: none"> • employment • on-the-job training • job-search and readiness activities • attendance in high school, GED certification classes, or institution of higher education or vocational classes • volunteer work activities or community service • technical training
Arizona (approved but implementation postponed indefinitely)	none	80 hours per month of: <ul style="list-style-type: none"> • employment, including self-employment • participation in employment readiness activities—education (less than full time), job skills training, life skills training, health education classes • engaging in job search activities substantially equivalent to those required to receive unemployment benefits in Arizona • community service
Arkansas (approval vacated)	none	80 hours per month of: <ul style="list-style-type: none"> • employment including self-employment (or income consistent with working at least 80 hours per week at Arkansas minimum wage) • enrollment in an educational program including high school, higher education, or GED classes • participation in on-the-job or vocational training • community service • participation of up to 40 hours per month in job-search training or independent job-search activities • participation of up to 20 hours per year in a class on health insurance, using the health system, or healthy living • participation in activities or programs available through the Arkansas Department of Workforce Services • participation in and compliance with SNAP or TANF employment initiative programs
Idaho	<ul style="list-style-type: none"> • beneficiaries enrolled in post-secondary education programs and attending classes during normal class cycles at least half-time • beneficiaries in compliance with a workforce program for TANF or SNAP 	20 hours per week of: <ul style="list-style-type: none"> • work • participating in a work training program • volunteer work

State	Deemed to satisfy	Satisfy through completion of qualifying activities
Indiana (approved but enforcement suspended indefinitely)	none	<p>Required number of hours will phase in from 0 per week during the first 6 months of the program, increasing to 20 hours a week after 18 months. Members have four months of the year in which they are not required to meet an exemption or the required number of hours. Activities include:</p> <ul style="list-style-type: none"> • employment • participation in MCO employment initiatives • jobs skills training and job-search activities • education related to employment • general education (e.g., high school, GED, community college, college or graduate school) • accredited English as a second language education • vocational education and training • community work experience • participation in gateway to work • community service or public service • caregiving services for a non-dependent relative or other person with a chronic disabling health condition • accredited homeschooling • meeting the requirements of the SNAP employment initiative or being exempt from those requirements
Kentucky (approved but will not be implemented)	<ul style="list-style-type: none"> • beneficiaries meeting the requirements for or exempt from SNAP or TANF work requirements • beneficiaries enrolled in the state's Medicaid-funded employer-sponsored insurance premium assistance program and their spouses or dependents • beneficiaries employed at least 120 hours per calendar month 	<p>80 hours per month of:</p> <ul style="list-style-type: none"> • job skills training • job-search activities • education related to employment (e.g., management training) • general education (e.g., high school, GED, college or graduate education, English as a second language) if not a full-time student • vocational education and training • self-employment (if less than 120 hours per month) • subsidized or unsubsidized employment (if less than 120 hours per month) • community work experience • community or public service • caregiving services for a non-dependent relative or other person with a disabling medical condition • participation in SUD treatment

State	Deemed to satisfy	Satisfy through completion of qualifying activities
Maine (approved but will not be implemented)	beneficiaries meeting requirements for SNAP or TANF work requirements	80 hours per month of: <ul style="list-style-type: none"> • paid employment • self-employment (makes the greater of federal or state minimum wage per week, multiplied by 20 hours) • participating in and complying with the requirements of a department approved work program • workforce or volunteer community service (up to 24 hours per month) • individual or group job-search readiness assistance (up to 20 hours per week) • enrollment as a student at least half time • tribal work or community engagement programs • combination of education and employment • other community engagement activities, subject to state approval • receiving unemployment benefits
Michigan (approval vacated)	beneficiaries complying with the TANF or SNAP work requirements	80 hours per month of: <ul style="list-style-type: none"> • employment, self-employment, or income consistent with being employed or self-employed (at least minimum wage for an average of 80 hours per month) • education directly related to employment • job training • vocational training directly related to employment • unpaid workforce engagement directly related to employment (i.e., internship) • tribal employment programs • participation in SUD treatment (court ordered, prescribed by a licensed medical professional, or Medicaid-funded) • community service completed with a non-profit 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 activities
Mississippi	none	<ul style="list-style-type: none"> • employed at least 20 hours per week • participation with the Office of Employment Security • volunteering with approved agencies • participation in alcohol or other drug abuse treatment programs • compliance with SNAP and TANF work requirements
Montana	none	80 hours per week of: <ul style="list-style-type: none"> • employment • work readiness and workforce training activities • secondary, postsecondary, or vocational education • substance abuse education or SUD treatment • other work or community engagement activities that promote work or work readiness or advance the health purpose of the Medicaid program • community service or volunteer activities • any other activity required by CMS

State	Deemed to satisfy	Satisfy through completion of qualifying activities
Nebraska	<ul style="list-style-type: none"> students enrolled at least half time in any accredited college, university, trade school, post-secondary training program, refugee employment program parent, caretaker relative, guardian, or conservator of a dependent child or an elderly or disabled relative participation in SNAP or TANF employment and training programs or otherwise meeting work requirements 	80 hours per month of one or more of the following <ul style="list-style-type: none"> employment volunteer activities with a public charity education and training activities (If not enrolled at least half time) participation in SNAP or TANF recognized job search activity (up to 20 hours)
New Hampshire (approval vacated)	none	100 hours per month of one or more of the following: <ul style="list-style-type: none"> employment on-the-job training job skills training related to employment enrollment at an accredited community college, college, or university counted on a credit hour basis job-search and readiness assistance (e.g., activities required to receive unemployment benefits, services offered by the Department of Employment Security) vocational educational training (not to exceed 12 months for any individual) education directly related to employment (for individuals who have not graduated high school) attendance in secondary school or in a course of study leading to certificate of high school equivalency participation in SUD treatment community and public service caregiving services for a non-dependent relative or other person with a disabling health, mental health, or developmental condition participation in and compliance with SNAP or TANF employment requirements
Ohio (approved)	beneficiaries complying with the TANF or SNAP work requirements	Individuals must work or participate in a community engagement activity for a minimum of 20 hours per week (averaged 80 hours monthly). Community engagement activities include: <ul style="list-style-type: none"> work or employment in exchange for money or goods and services unpaid work (i.e., formal and informal volunteer or community service or public service activities) education and training activities formal or informal job search or job readiness programs (for no more than 30 days in a year)

State	Deemed to satisfy	Satisfy through completion of qualifying activities
Oklahoma	beneficiaries complying with the TANF or SNAP work requirements	<p>Individuals must engage in one or a combination of the following activities for an average of 20 hours per week:</p> <ul style="list-style-type: none"> • WIOA Program • Trade Adjustment Assistance Program • Employment and Training Program (E&T), but job-search or job-search training activities offered as components of E&T may only comprise less than half of the total time spent in E&T • education related to employment • GED program • Oklahoma Works • vocational education or training • paid, in-kind, unpaid, or volunteer work
South Carolina (approved)	none	<p>Required participation in 80 hours per month of some combination of the following:</p> <ul style="list-style-type: none"> • participation in and compliance with SNAP or TANF employment requirements; • participation in an adult secondary education program through a public school district or technical college, including GED programs; • at least half-time enrollment in a degree-or certificate-seeking program in accredited institution of higher education; • compliance with UI work-search requirements • subsidized or unsubsidized employment; • participation in a tribal work program; and • community or public service
South Dakota	none	<p>Individuals must work 80 hours a month or meet monthly milestones in their individualized plans. The individualized training plans may include, but are not limited to:</p> <ul style="list-style-type: none"> • health insurance literacy courses • financial literacy courses • English as a second language • disease management courses • 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 search

State	Deemed to satisfy	Satisfy through completion of qualifying activities
Tennessee	beneficiaries complying with the TANF or SNAP work requirements	Individuals must work or participate in a community engagement activity for a minimum of 20 hours per week (averaged 80 hours monthly). Community engagement activities include: <ul style="list-style-type: none"> • paid employment or self-employment • general education (e.g., high school or high school equivalency, English as a second language, etc.) • vocational education and training • participation in job-search or job skills training activities sponsored by the Tennessee Department of Labor and Workforce Development • accredited homeschooling • community service (volunteering) in approved settings
Utah (approved but enforcement suspended indefinitely)	Individuals meeting an exemption (including working over 30 hours per week or in compliance with SNAP and TANF requirements)	Non-exempt beneficiaries must complete all of the following activities once per 12-month benefit period <ul style="list-style-type: none"> • register for work through the state system • complete an assessment of training needs • apply for employment directly or through the state's automated application submission process with at least 48 potential employers • complete the job training modules as determined to be relevant to the individual through the training assessment
Wisconsin (approved)	none	Individuals must engage in one or a combination of the following activities at least 80 hours per month: <ul style="list-style-type: none"> • working in exchange for money, goods, or services • unpaid work, such as volunteer work or community service • self-employment at any wage • taking part in a work, job-training, or job-search program (e.g., FoodShare Employment and Training, Wisconsin Works (W-2), WIOA programs, Refugee Employment and Training, Trial Employment Math Program, Children First, programs under section 236 of the Trade Act, tribal work programs, and other state-approved workforce programs).

Notes: CMS is Centers for Medicare & Medicaid Services. FPL is federal poverty level. GED is General Education Diploma. ESL is English as a second language, MCO is managed care organization. SNAP is the Supplemental Nutrition Assistance Program. SUD is substance use disorder. TANF is the Temporary Assistance for Needy Families program. WIOA is Workforce Innovation and Opportunity Act. CMS has not yet approved state proposals unless otherwise indicated. Kansas and Virginia requested waiver approval to implement work and community engagement requirements, but later asked CMS to defer consideration of this matter (DMAS 2018, CMS 2017a).

Source: MACPAC 2020 analysis of CMS 2019a–e; 2018b–m; DHHS 2019; DHW 2019; DPHHS 2019; and TennCare 2018.

TABLE A3. Penalties for Non-Compliance with Work and Community Engagement Requirements by State

State	Penalties
Alabama	Members have 90 days to become compliant or provide proof they qualify for an exemption. After 90 days, if a member is non-compliant and non-exempt, that person is disenrolled.
Arizona (approved but implementation postponed indefinitely)	After a three-month grace period, members are suspended for two months. Eligibility is automatically reactivated at the end of the two-month suspension period.
Arkansas (approval vacated)	Members will be disenrolled if they fail to meet the work requirement for a cumulative three months during the coverage year and locked out of coverage until the beginning of the next coverage year (i.e., for up to nine months).
Idaho	For beneficiaries who fail to comply with requirements, eligibility is terminated for a period of two months. Beneficiaries can reapply for Medicaid after two months, or sooner if they meet requirements or an exemption.
Indiana (approved but enforcement suspended indefinitely)	Each member is allowed four months out of the calendar year during which they are not required to participate in the required number of hours. If a member does not comply for more than the allotted four months, enrollment will be suspended until the member reactivates it by complying with the work and community engagement requirements for one month and submitting documentation to the state, or becomes eligible for an exemption (e.g., becomes pregnant). The period that an individual is not enrolled or has an exemption does not count toward the four-month period.
Kentucky (approved but will not be implemented)	Enrollment will be suspended until the member complies with the work and community engagement requirements for one month.
Maine (approved but will not be implemented)	Members who are subject to work requirements and do not meet them are subject to a time limit on enrollment of 3 months of coverage within a 36-month period. If they exhaust their three-month period, they are disenrolled but can re-enroll when they demonstrate compliance.
Michigan (approval vacated)	Members are allowed 3 months of noncompliance within a 12-month calendar year. After three months of noncompliance, a beneficiary who remains noncompliant will not receive health care coverage for at least one month and will be required to come into compliance before coverage is reinstated.
Mississippi	Members would lose eligibility on the first day of the month following the identification of non-compliance but can be reinstated once they comply again.
Montana	Beneficiaries who fail to comply with requirements will have 180 days to come into compliance; otherwise, eligibility will be suspended. It can be reactivated 180 days after the date of suspension, or upon determination by the Department that the beneficiary has complied for 30 days, meets an exemption, or qualifies through a different eligibility pathway.
Nebraska	Non-exempt beneficiaries must meet requirements in order to receive the Prime benefit package (includes dental and vision services and over-the-counter medications). They must meet requirements in four out of the first six months of implementation in order to retain the Prime benefit package, otherwise they will receive the Basic benefit package. After the initial six months, beneficiaries must meet requirements in every month to retain Prime benefits. The benefit tier is reviewed every six months.
New Hampshire (approval vacated)	Eligibility is suspended until the member makes up the deficient participation hours or demonstrates exemption status.
Ohio (approved)	Beneficiaries are deemed non-compliant if they fail to report compliance or an exemption within 60 days of receiving notice to comply. Disenrollment will occur no sooner than the first day of the month following written notice of pending adverse action. Beneficiaries can reapply for Medicaid at any time.

State	Penalties
Oklahoma	After a three-month grace period, eligibility would be terminated. Members may reapply for benefits if they meet the required number of hours in a 30-day period, meet an exemption, qualify for TMA, or become pregnant.
South Carolina (approved)	Applicants must be exempt or compliant at the time of application; otherwise, their applications will be denied. Enrolled beneficiaries who do not comply within 90 days of notification of non-compliance will be suspended until they come into compliance or become eligible for an exemption.
South Dakota	After a first month or second month of non-compliance, members receive a notice of non-compliance and are required to contact an employment specialist within 30 days of notice to establish a corrective action plan. After a third month of non-compliance, members are disenrolled and have 30 days to take corrective action. Failure to reinstate coverage during this 30-day period would result in a 90-day lockout of coverage.
Tennessee	Beneficiaries must comply with requirements for at least four months out of each six-month reporting period. Otherwise, benefits are suspended until beneficiaries demonstrate compliance for one month. Tennessee also provides opportunities to regain coverage through state-defined activities (e.g., taking a health or financial literacy course).
Utah (approved but enforcement suspended indefinitely)	Beneficiaries who fail to comply within three months of receiving notification that they must comply are disenrolled.
Wisconsin (approved)	Beneficiaries who fail to meet the work requirements for 48 consecutive or non-consecutive months are disenrolled and locked out of coverage for a period of six months.

Notes: TMA is Transitional Medical Assistance. CMS has not yet approved state proposals unless otherwise indicated. Kansas and Virginia requested waiver approval to implement work and community engagement requirements, but later asked CMS to defer consideration of this matter (DMAS 2018, CMS 2017a).

Source: MACPAC 2020 analysis of CMS 2019a–e; 2018b–m; DHHS 2019; DHW 2019; DPHHS 2019; and TennCare 2018.