

Red Tape and Roadblocks: How Work Requirements Deny Medicaid Access

Medicaid work requirements create significant and unnecessary barriers to care, harming the very people the program is meant to help. While work requirements are purported to reduce “fraud, waste, and abuse,” the vast majority of people who get their health insurance through Medicaid already work or would likely fall under an exemption. Implementing burdensome administrative reporting requirements will unnecessarily jeopardize their health insurance coverage and access to vital health care.

Background

- ◇ Medicaid work requirements can vary from state to state but generally necessitate monthly reporting of [80 hours of work or qualifying activity per month](#).
- ◇ Qualifying activities can include being in school, volunteering, and participating in job searching, job training, or resume building.
- ◇ States may also allow for exemptions to work requirements that can include caring for an elderly or ill family member, having a mental or physical disability, or participating in substance use disorder (SUD) treatment.

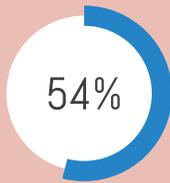
Reporting & Administration Barriers

- ◇ [Reporting work and/or exemptions is consistently a burden for enrollees](#). People report difficulty navigating the websites where they’re supposed to report work and/or exemptions, citing consistent glitches and downtime, as well as long wait times to restore access to the portal.

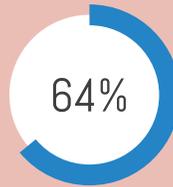
From June 2018 to April 2019, Arkansas implemented work requirements for their Medicaid program through ARWorks.

- ◇ Although about [95% of people](#) subject to work requirements through ARWorks met the standards through work or exemptions, one quarter of individuals — 18,000 people — were still terminated from coverage.
- ◇ Before ARWorks was implemented, Arkansas [ranked 25th for insurance coverage](#) among states, and the [unemployment rate was 3.7%](#) — below the national average.
- ◇ Despite investments in education campaigns to raise awareness about ARWorks, [70.8% of Arkansans](#) were unsure if the work requirements policy was even in effect.
- ◇ Moreover, those who were aware of the policy faced enormous difficulty in reporting their qualifying work hours, especially those in rural areas of the state as Arkansas is ranked [47th in internet access](#) nationwide.

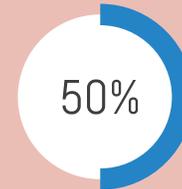
◇ [Among Arkansans who lost Medicaid coverage due to the work requirements policy:](#)



reported delaying medical care because of the cost



reported delaying taking medications



reported serious challenges with paying off medical debt

◇ While ARWorks did allow exemptions to work requirements for those participating in SUD treatment, the [exemption was extremely rigid](#). Individuals had to prove every two months that their condition still qualified, and this exemption could be discontinued if adjudicators felt it did not meet the standard.

I have to have my medication...If I don't take it, I can't work...I had to be stable and if I was not stable I was going to lose my job.

- [ARWorks enrollee](#)

I have a part-time job, but when they added on all this [work requirements]...it's a big hassle.

- [ARWorks enrollee](#)

I went to pick up my prescription and they said I couldn't get it...It was a big shock. At first, I was upset and then I was worried because I ended my medicine. I shouldn't find out the day I need my medicine.

- [ARWorks enrollee](#)

Georgia's Pathways to Coverage program, which began in July 2023, is the only Medicaid program currently operating with a work requirement.

- ◇ [16% of working age Georgians do not have health insurance](#) — one of the worst rates in the country.
- ◇ Since its inception, [less than 3%](#) of Georgians eligible for Medicaid through Pathways have successfully enrolled.
- ◇ There is a [backlog of 16,000 applications](#) waiting to be processed, and more than 40% of Georgians who started applications [gave up because of difficulties navigating the website](#).
- ◇ Pathways [only allows for short-term exemptions](#), leaving people who are unable to work long-term due to disability, caring for a family member, engaging in SUD treatment, etc., completely without coverage.
- ◇ Georgia's program has cost [\\$86.9 million](#), but [only 35%](#) of spending has gone towards medical care; the majority went to implementation and administrative costs.
- ◇ While Georgia initially estimated the program would cost \$2,490 per person, it has [actually cost about \\$13,360 per person](#).
- ◇ In comparison, the Affordable Care Act's (ACA) Medicaid expansion's estimated cost in Georgia is \$496 per person.

It's a nightmare...The system will be down for maintenance...just about every weekend. There's some times that I can go in and, BAM, it's done. And other times you go in and do the exact same thing, I hit upload and it'll just spin and spin...and after a while you just give up.

- [Paul Mikell, Georgia Pathways enrollee](#)

How WRs Harm Justice-Involved Individuals

- ◇ Justice-involved individuals face pervasive discrimination based on their conviction record, including in employment, and many reenter the community without identification or access to basic needs — not to mention education or work experience.
- ◇ These barriers lead to [27% of formerly incarcerated people](#) being unemployed, compared to the national rate of 4%.
- ◇ For those who do successfully obtain employment, they are often limited to [low-wage jobs with few hours and unstable schedules](#), making it very challenging to report and comply with work requirements.
- ◇ Formerly incarcerated individuals also often suffer higher rates of chronic illness compared to the general public, making their need for health coverage even greater. Predicating their access to care based on their ability to obtain gainful employment only compounds the many barriers they already face while doing nothing to support their successful reentry.

How WRs Harm People with SUDs

- ◇ While some states may allow exemptions to work requirements for those participating in [SUD treatment](#), the parameters can be extremely rigid (as they were in Arkansas), requiring frequent and tedious reporting and allowing adjudicators to abruptly rescind exemptions, leading to devastating interruptions and/or terminations in access to care.
- ◇ In states without any exemptions to work requirements (such as Georgia), people are forced to juggle working full-time with maintaining attendance in their SUD treatment program while keeping up with reporting requirements and other necessities of life.
- ◇ In states that implemented Medicaid expansion through the Affordable Care Act (ACA), great progress has been made in increasing access to SUD treatment for many low-income adults. For example, in Kentucky, one of the states hardest hit by the opioid overdose epidemic, the number of people accessing SUD treatment through Medicaid [increased by 700%](#) following the state's expansion of Medicaid eligibility. Work requirements [will jeopardize](#) these promising gains amid the ongoing overdose crisis that is still claiming 300 lives every day.



Without a doubt, I know that if I hadn't had Medicaid, I never would have been able to get sober. Medicaid paid for me to go to rehab, where I learned how to rebuild my life and become a productive member of society. It gave me the resources I needed to recover and be there for my daughter.

- [Brittney Walsh, KY Medicaid recipient](#)