

State Activity as it Relates to Submitting an 1115 Waiver Application Including Medicaid Work Requirements

State	Waiver
Alabama	<p>On 2/27/2018, the Alabama Medicaid Agency submitted an 1115 demonstration application entitled the “Medicaid Workforce Initiative. The 30-day comment window is currently open, the agency will take into consideration comments submitted on or before 4/2/18. If approved, the workforce initiative would apply to eligible, able-bodied Parent or Caretaker Relative (POCR) beneficiaries. Mirrored after the State’s TANF JOBS Program, beneficiaries will be required to participate in 35 hours of qualifying employment-related activities. Parents and caretaker relatives with children under the age of 6 will be required to perform 20 hours, as opposed to 35 hours, per week. The State has included exemptions for populations consistent with those included by States with approved waivers. The State provides a 90-day grace period for beneficiaries entering the program, and a 30-day period for current beneficiaries, to prove program compliance; upon the conclusion of a grace period, beneficiaries who fail to prove compliance will be terminated from the program --the extent of the lock-out period has not been defined by the State.</p>
Alaska	<p>Senators Kelly, Hughes, Wilson, Micciche, and Giessel introduced SB 193 2/19/18 to the Alaska legislature, the proposed legislation was amended 3/28/2018-renamed CSSB 193(HSS). The act requires the Department of Health and Social Services to apply for an 1115 waiver to establish work requirements for certain eligible Medicaid adults. Eligible beneficiaries will be required to participate, and document, 20 hours of qualifying work activities per week; work engagement requirements will not apply to exempt populations. The proposal will “ensure” work requirements do not prevent recipients with a substance abuse disorder from obtaining appropriate treatment. Beneficiaries will be notified of the requirement no later than 90-days after waiver approval. Medical assistance coverage will be terminated for recipients who become ineligible as a result of work requirement noncompliance--the extent of the lock-out period has not been defined by the State.</p> <p>The companion legislation to SB 193, HB356, is sponsored by Representatives Kopp and Reinbold, and has been referred to Health and Social Services Committee as of 3/14/18.</p>
California	<p>A state senator has introduced a bill that would prohibit work requirements in the Medicaid program. It is scheduled to have a hearing on April 4th.</p>
Colorado	<p>On 3/19/2018, SB18-214 was introduced to the state legislature. The bill directs the Department of Health Care Policy and Finance to submit an 1115 waiver in which the state requests authority to implement work requirements as a condition of Medicaid eligibility. If approved, able-bodied beneficiaries will be required to participate in a minimum of 20 hours per week of approved work activities, exempt populations are excluded from this requirement. The waiver will additionally include a five-year lifetime Medicaid limit, copayments for use of NEMT and nonemergency ED use, and enrollment prohibition for false statements made in regard to family income and work requirement compliance. If signed into law, the State Department of Health Care Policy and Finance will prepare and submit the waiver to CMS no later than March 30, 2019.</p>
Connecticut	<p>State legislators have proposed a bill that would impose a 20 hour/week work requirement for Medicaid beneficiaries. Additionally, the legislation would impose a suspension of Medicaid benefits for beneficiaries noncompliant with work requirements for two consecutive months. If approved, the legislation dictates no later than 12/31/18 shall the Commissioner report on the status of the waiver application. Conversely, Governor Malloy stated in January that he would not allow work requirement to be imposed on Medicaid.</p>
Delaware	<p>No relevant legislation at this time</p>

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Florida	HB 517 , filed on 11/20/2017, died in the committee on Children, Families, and Elder Affairs on 3/10/2018. The bill included language on penalties that would be applied to Medicaid recipients who fail to meet work requirements. Florida officials have doubted the success of a Medicaid work mandate in their state.
Georgia	No relevant legislation at this time
Hawaii	No relevant legislation at this time
Idaho	H.B. 464 , introduced 1/30/18 has been motioned to return to the Health and Welfare Committee, as of 3/21/18. The legislation would amend existing law to authorize the Department of Health and Welfare to establish certain premiums and work requirements. The Department intends to seek a waiver and upon approval, work requirements will apply to all able-bodied adult Medicaid participants. Requirements will be consistent with the work requirements established in Idaho SNAP and TANF programs.
Illinois	No relevant legislation at this time. However, Governor Rauner's office and the State's Department of Healthcare and Family Services have indicated that the new Medicaid work requirement policy and subsequent implications are "under review".
Iowa	Iowa Senate Bill 2158 , introduced 02/1/18, is sponsored by Senator Thomas Greene. The State Department of Human Services will submit a waiver to CMS, seeking authority to implement work requirements as a condition of Medicaid eligibility for all able-bodied adults. The state will require beneficiaries to engage in 20 hours of approved work activities per work. Additionally, the individual is subject to the completion of a drug screening assessment. Based upon the results of the screening assessment, an individual reasonably suspected of using illegal drugs, shall agree to participate in testing for illegal drugs.
Louisiana	<p>On March 2, 2018, the Louisiana House passed HB3, 69-29; the bill has been sent to the Senate and was referred to the Health and Welfare Committee. The original language of HB3 sought to impose a lockout period for Medicaid beneficiaries who failed to comply with work requirements. After amendments, the legislation no longer includes language that would impose a lockout period for beneficiaries who fail to complete the required work engagement hours. Specifically, the proposed law stipulates that, "nothing in the proposed law shall cause access to health care to become temporarily or permanently prohibitive or excluded to the citizenry of LA."</p> <p>Upon approval of the House and Senate committees on health and welfare, the Louisiana Department of Health will submit an 1115 waiver application. In cooperating the workforce development program, the legislation identifies potential to align the program with SNAP. The minimum hours required per week/month and participation standards will be established by the Louisiana Department of Health. Exemptions to the requirement are made for specific populations.</p>
Maryland	No relevant legislation at this time
Massachusetts	No relevant legislation at this time
Michigan	State Senator Mike Shirkey, R-Clark Lake, introduced bill to have MI HHS seek a waiver for allow for Medicaid work requirements. Language is still being edited, however, legislation currently indicates work requirements would be aligned with those of SNAP. Beneficiaries would be expected to participate in 30 hours of approved activities per week. Additionally, the legislation would include a one year lock-out period for failure to report family income changes accurately. Under the current bill draft, the Michigan Department of Health and Human Services must apply for the waiver no later than 7/1/18.

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Minnesota	<p>Amended 3/28/18, HF 3722 proposes no later than 10/1/18 the commissioner of Human Services shall apply for a section 1115 waiver to establish work and community engagement requirements. The waiver proposal shall be consistent with SNAP work requirements and will be applicable to eligible able-bodied adults. Qualified individuals will encompass parents and caretakers, adults without children, children ages 19 and 20, and persons eligible for medical assistance under provisions of the Minnesota Medicaid statute. The legislation includes exemptions of specific populations consistent with those of other approved States. Specific employment and community engagement activities are not yet defined; however, after an initial 3-month grace period, participants will be expected to complete a minimum of 80 hours per month of qualifying activities. Failure to satisfy work and community engagement requirements will result in a suspension of medical benefits; benefits will be reinstated once the individual satisfies the requirements for a 30-day period. Additionally, the commissioner of Human Services may modify or temporarily suspend community engagement requirements in order to respond to the local employment market.</p> <p>The legislation has been referred to Health and Human Services Finance Committee and is sponsored by Representatives Fenton, Daudt, Peppin, Pugh, Heintzeman, Bennet, and Poston</p>
Missouri	<p>On 1/23/18, Senator David Sater introduced Senate Bill 948. The bill would require the Department of Social Services to apply for an 1115 waiver to implement work and community engagement requirements by January 1, 2019. The bill does not define approved activities or the number of hours beneficiaries will be required to complete in a month. The bill passed the Seniors, Families, and Children Committee 2/28/18. A calendar date has not yet been set for a final Senate vote on SB 948. Neither the Senate legislation, nor a companion, has been introduced in the house.</p>
Montana	<p>No relevant legislation at this time, however, due to the passage of SB 405 in 2015, the State Department of Labor and Industry implemented HELP-Link . Launched in 2016, the HELP-Link is a voluntary workforce program for Medicaid individuals participating in the Montana HELP Plan (Medicaid expansion population-eligible adults with incomes up to 138%). The program provides individualized career planning and employment services training assistance, with the goal of improving beneficiary wage earnings. Additionally, participation helps participants qualify for the disenrollment exemption, which allows them to retain health coverage if payment of premiums or copays are overdue.</p>
Nebraska	<p>No relevant legislation at this time</p>
Nevada	<p>No relevant legislation at this time</p>
New Jersey	<p>No relevant legislation at this time</p>
New Mexico	<p>No relevant legislation at this time</p>
New York	<p>No relevant legislation at this time</p>
North Carolina	<p>“H.B. 662-Carolina Cares” was introduced 4/6/17 by Representatives Lambeth, Murphy, Dobson, and White. The bill was referred to the Committee On Health Care Reform and was last amended 4/17/17. Submitted 11/20/17, the State’s 1115 waiver amendment includes the language of the proposed “HB 662- Carolina Cares” legislation. If the legislation is enacted, the waiver would require Carolina Cares enrollees to participate in qualifying employment activities (no specific activities defined in the waiver or HB 662). Under the proposed legislation, the population covered by the Carolina Cares program includes residents not eligible for Medicaid under the current Medicaid program criteria, individuals with a modified gross adjusted income not</p>

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	<p>exceeding 133% FPL, residents not entitled to Medicare Parts A or B, and residents between the ages of 19 and 64. Participants will additionally pay an annual premium, billed monthly, that is set at 2% of the individual’s household income. Furthermore, beneficiaries will also be responsible for the payment of co-payments, expected to be “comparable” with co-payments applied under the N.C. Medicaid State Plan. Failure to complete premium contributions within 60 days of the due date will result in termination from the program, absent of proof of any accepted exemptions.</p> <p>The legislation mandated no later than January 1, 2018, the Department of Health and Human Services submit to the Joint Legislative Oversight Committee on Medicaid and HC Health Choice a report with a design proposal for the Carolina Cares Program. No report has been made available to the public.</p>
North Dakota	No relevant legislation at this time
Ohio	<p>The Ohio General Assembly enacted HB 49 in 2017; the legislation requires the Ohio Department of Medicaid to submit an 1115 waiver requesting authority to implement work requirements, as a condition of eligibility, for the adult expansion Medicaid population. The draft 1115 Demonstration Waiver aims to align, as close as possible, the demonstration program with the existing SNAP and the Able-Bodied Adults without Dependents (ABAWD) program. Applicable to the adult Medicaid expansion population, not otherwise exempt, the waiver requires the completion of 20 hours per week, 80 hours averaged monthly. Non-exempt beneficiaries who fail to meet the work and community engagement requirements will have their Medicaid coverage suspended-length of suspension is not defined. The comment period initiated 2/16/18 and remained open until 3/18/18. An updated waiver that includes public comments can be expected in the near future.</p>
Oklahoma	<p>Governor Fallin issued an Executive Order on 3/5/18. The Oklahoma Health Care Authority is required to file any and all waiver and state plan amendments necessary to incorporate work requirements into the Medicaid program. The Oklahoma Health Care Authority will submit above documents within six months to the Governor and Legislature.</p>
Oregon	No relevant legislation at this time
Pennsylvania	<p>Governor Wolf vetoed Pennsylvania H.B. 59 10/24/17. The legislation would have required the submission of an 1115 waiver to implement work requirements for nondisabled, non-pregnant, and nonelderly Medicaid eligible adults. The legislation would have additionally implemented limits on nonessential benefits. Acting Human Services Secretary Teresa Miller has shown opposition to the work requirements, yet she notes that, “the agency is studying a number of proposals.”</p>
Rhode Island	No legislation at this time
South Carolina	<p>1/11/18 Governor McMaster directed the South Carolina Medicaid agency to seek a waiver to attain CMS permission to include work requirements on Medicaid beneficiaries. There is no clear direction on when and how the state would impose the requirement.</p>
South Dakota	<p>No relevant legislation at this time, however, in Governor Dugaard’s State of the State address, he explicitly proposed seeking authority from CMS to implement work requirements. House majority leader Lee Qulam (R-Platte) expressed admiration for Dugaard’s request, stating “if you’re able-bodied and you can work, you should be working.” According to local reports, the State is expected to convene a panel of stakeholders in order to determine what will need to be included in the State’s waiver application.</p>

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Tennessee	H.B. 1551, introduced 1/11/18 and S.B. 1728, introduced 1/22/18 directs the Commissioner of finance and administration to submit waiver to include work requirements upon able-bodied, working age, adult enrollees without dependent children under the age of 6. The State seeks approval from HHS to utilize funds from TANF program under the Families First Act for eligible expenditures related to the waiver. Implementation of the waiver is contingent upon TANF available funds or other federal appropriations. HB 1551 passed on first consideration 72-23, 3/22/18. The vote on SB 1728 was re-referred to the Senate Commerce and Labor Committee on 3/22/18; a vote is expected in the coming days.
Texas	No relevant legislation at this time
Vermont	No relevant legislation at this time
Virginia	HB 695 , introduced 1/10/18, passed the Virginia House of Delegates. The legislation would require all able-bodied adult recipients of Medicaid to participate in work requirement activities, at least 20 hours per week. The Secretary of Health and Human Resources is expected to report to the Governor and the General assembly on the status of the waiver application by December 1, 2018.
Washington	No relevant legislation at this time
West Virginia	No relevant legislation at this time. However, the state is considering adding Medicaid work requirements through waiver authority. West Virginia's DHHR plans to submit a waiver to CMS before the conclusion of FY 2018. DHHR has highlighted their intention to align Medicaid with food stamp and unemployment programs. This decision follows the State's recent legislative approval to require all SNAP beneficiaries to participate in work requirements. A final application or implementation roadmap has not been released.
Wyoming	Senate File 97 , sponsored by Senators Hick, Driskill, Peterson and Scott, and Representatives Burkhart, Clem, Gary, Laursen, and Lindholm, n was introduced on 2/17/18 and passed the Senate 3/1/18. SF 97 will now go to the house for debate. The legislation would require Medicaid beneficiaries perform 20 hours of approved work activities per week. Additionally, the bill would implement a lock out for individuals who fail to meet the required hours from receiving Medicaid benefits for 12 months, following the date of the determination. All acquired Medicaid work engagement activity hours will run concurrently with any hour requirements under TANF or SNAP, compliance will be assessed bi-yearly. The bill defines exemptions, consistent with exemptions provided by other states. The legislation is expected to go into effect January 1, 2019 if enacted.