



Medicaid Work Requirements FAQ

On June 1, 2026, the Centers for Medicare & Medicaid Services (CMS) issued an [Interim Final Rule \(IFR\)](#) implementing new Medicaid work requirements, also known as "community engagement requirements."

The Medicaid work and community engagement IFR is extremely long and complicated. The IFR that CMS released on June 1 also does not go into effect until January 1, 2027. Because of this, AAPD will, over the next six months, provide many tools and resources to help the disability community **prepare for the changes coming on January 1, 2027.**

AAPD will provide multiple explainers, each focused on different parts of the IFR, to make them easier to understand. This first resource from AAPD addresses some of the most urgent and common questions, misconceptions, and fears we are hearing from the disability community about this policy change. Information about how to make sure you get all of AAPD's resources and analysis is at the bottom of this document.

Frequently Asked Questions

Is it now required that some people who receive Medicaid must be enrolled in some form of employment, education, training, or volunteering, beginning January 1, 2027?

Yes. Last July, Congress passed H.R. 1, which created "community engagement requirements" or "work requirements," requiring some people to complete at least 80 hours of work, volunteering, school, or training per month to maintain their Medicaid eligibility.

Can I meet the requirements through a combination of education, work, and volunteering?

Yes. The IFR allows Medicaid recipients to meet the work requirements through a combination of education, work, and volunteering.

For example, if you are taking a class on how to use MS Office or some other professional skill, working part-time, and volunteering, you may combine those activities to satisfy the work requirements, as long as it adds up to 80 hours of activity per month.

Will people with disabilities be automatically exempt from the work and



community engagement requirements that start on January 1, 2027?

No, not all disabled people will be automatically exempt. The rule includes exemptions for many people with disabilities, but not all. People without disabilities also qualify for certain exemptions.

Here is a full list of who is covered by exemptions:

- Are under age 19 or over age 64
- Have a serious or complex medical condition
- Receive Supplemental Security Income (SSI)
- Receive Social Security Disability Insurance (SSDI)
- Are entitled to or enrolled in Medicare
- Are receiving Supplemental Nutrition Assistance Program benefits and are NOT exempt from the SNAP work requirements
- Already meet the work requirements in the Temporary Assistance for Needy Families (TANF) program
- Have a Substance Use Disorder
- Are in a Substance Use Disorder treatment program
- Are blind
- Are pregnant or receiving postpartum Medicaid coverage
- Provide caregiving for children under 14 or for other disabled people
- Are veterans with a total disability rating from the Department of Veterans Affairs
- Are former foster youth under the age of 26
- Have been recently incarcerated within the last three months
- Have physical, intellectual, or developmental disabilities that significantly impair their ability to perform one or more activities of daily living
- Have what CMS calls “disabling mental disorders” – this likely means disabling mental health disorders, but you will need to check how your state defines this exemption
- Are Indigenous people, Native Americans, Alaska Natives, members of federally-recognized tribes, or individuals who qualify for healthcare through Indian Health Service (the IFR refers to individuals in all of these groups as “American Indians”)

Does this rule only apply to the Medicaid expansion population?

Yes. “Medicaid expansion population” refers to adults aged 18-64 in the 41 states that expanded Medicaid under the Affordable Care Act (ACA). Many people with disabilities are insured through Medicaid expansion.

States that expanded Medicaid through the ACA will be required to implement work requirements for adult Medicaid recipients who don’t qualify through any other Medicaid program. The requirements will apply everywhere except in Alabama, Florida, Kansas, Mississippi, South Carolina, Texas, and Wyoming. The work requirement also does not apply to



Alaska Natives, Native Americans, or those residing in the US territories.

Can the IFR be changed?

Maybe. While the IFR is final, there is a 60-day public comment period. CMS will accept comments on the IFR until July 31, 2026. If enough individuals, organizations, and state Medicaid directors submit comments opposing the rules due to the barriers people will face in qualifying for an exemption or meeting the work requirements, it is possible that CMS could revise the IFR accordingly.

AAPD will draft comments and send an action alert to those who have signed up for our emails, including an easy-to-use template for submitting comments in early July.

What is the point of commenting on the rule if the rule is already final?

Good question. While there is no guarantee that public comments will lead to changes in the IFR, public comments do become part of government records and inform regulators of challenges faced in complying with federal regulations.

Comments left on this regulation may inform future rulemaking processes. Future administrations may use comments to justify changes to this rule, or learn from the comments how they can avoid similar problems in their regulatory processes.

Will every state implement and enforce the requirements in the same way?

No. The CMS rule on work requirements includes several areas where states will have discretion to set their requirements as broad or narrow as they wish, including which conditions or diagnoses they accept as a “serious and complex medical condition.” Make sure you keep an eye out for any letters, emails, phone calls, or other communications from your state Medicaid agency in the coming weeks.

Is there any way I can influence how my state implements these requirements?

Yes. State Medicaid agencies will begin designing and planning their implementation of Medicaid work requirements very soon, if they have not already. Between now and the fall, you can contact your state Medicaid agency and provide information for them to consider when designing and planning how they will implement the work requirements.

AAPD will provide an opportunity for community members to write to their state Medicaid directors via our action alerts in the near future. AAPD will also send our own letter to state Medicaid directors, reminding them of the importance of engaging Medicaid recipients,



particularly those with disabilities, while they prepare for implementation.

Outreach to state Medicaid directors should happen as soon as possible: Federal law and CMS regulations mandate that states engage in direct outreach to Medicaid recipients to notify them of the work requirements at least three months prior to implementation, which means states are preparing now to conduct outreach soon.

Can people lose Medicaid even if they qualify for an exemption?

Yes. Under the Medicaid work and community engagement IFR, each state must determine whether individuals meet work requirements or qualify for an exemption.

Work requirements place overwhelming administrative burdens on states and enrollees. This means that work requirements require states and people who receive Medicaid alike to stay on top of many different kinds of paperwork, forms, and communications. This administrative burden may cause people to lose coverage even when they should remain eligible.

For example, state Medicaid agencies may not have the staff to handle the enormous task of reviewing who is eligible for an exemption. Many disabled Medicaid recipients who are not automatically exempted will have to provide proof of identification, medical history, and daily activities.

Issues like being unable to find a specific piece of paperwork or missing a piece of mail while out of town can be the difference between keeping and losing Medicaid.

Does the Medicaid work and community engagement requirement IFR require each state to check whether people meet work requirements?

Yes. States must check compliance with work requirements whenever someone applies for or renews Medicaid. States may also conduct additional compliance checks more often than just during application and renewal. If a state can't verify compliance or grant an exemption, it can initiate a process that may lead to denial or termination of coverage. **As a result, eligibility and coverage may differ across states.**

What will it mean for states to assess and determine whether people meet the work and community engagement requirements?

It will depend from state to state, but here is a general outline: States will use existing wage data, Medicaid claim data, Social Security Administration data, and more to try to verify compliance with the work requirements or to exempt those who fall under one of the exemption categories.



If the state Medicaid agency does not have enough information to determine whether you are in compliance with the work requirements or are eligible for an exemption, they will reach out to you to request more information.

Some individuals may need to provide documentation to their state Medicaid agencies to prove that they meet the requirements for an exemption, such as medical records, proof that they are a caregiver for a child under the age of 14 or an individual with a disability, have a substance use disorder, or other documentation of their eligibility for exemption.

If you do not qualify for an exemption, your state Medicaid agency will send you information on how to submit proof of compliance with work requirements each month.

Does enrollment in school at least half-time meet these requirements?

Yes. People enrolled in school at least half-time (as is defined by the school) meet the requirement and do not have to perform any additional work or volunteering. **People enrolled in school less than half-time can still meet the new requirements through a combination of school, work, and volunteering.**

Will caregivers of people with disabilities qualify for an exemption?

Some will. The IFR includes exemptions for certain parents, guardians, caretaker relatives, and family caregivers of people with disabilities. This can include caring for relatives, people you live with, or people you aren't related to and don't live with, if you provide 80 hours of caregiving activities per month. Hours of unpaid caregiving work can also count as "work" hours for meeting the work requirement.

If I meet the requirements for an exemption once, do I need to prove my eligibility again in the future?

Yes. If you are a Medicaid recipient, you will generally need to prove that you meet the criteria for an exemption from the work requirements when you apply for Medicaid, and at least annually at your renewal. States will use existing data to automatically exempt qualified individuals whenever possible. If they do not have enough information, they will contact you to request information.

Do Indigenous people and Native Americans have to meet the requirement?

No. Indigenous people and Native Americans – referred to in the IFR as "American Indians" – including members of federally recognized tribes, Alaska Natives, and anyone who receives



health care from the Indian Health Service, do not have to meet the requirement.

I receive Supplemental Security Income or Social Security Disability Income. Do I have to fulfill any work requirements?

No. Those who receive Supplemental Security Income (SSI) or Social Security Disability Income (SSDI) are exempt from the work requirements. However, automatic exemption will depend on how your state implements the requirement and whether you encounter any administrative hurdles, such as needing to provide your state Medicaid agency documentation of your disability diagnosis, verification of your SSI or SSDI benefits, educational enrollment, earnings, veteran status, or other proof. The state may also ask your health care providers to certify whether you are significantly impaired from performing work, volunteering, or attending school.

I am disabled, but not on SSI or SSDI. Do I qualify for an exemption?

Maybe. You can still qualify for an exemption, but you may need to submit additional documentation to be eligible.

Other exemption categories beyond receiving SSI or SSDI include

- People with physical, intellectual, and developmental disabilities
- People with what the IFR calls “disabling mental disorders”
- People with serious or complex medical conditions
- People with Substance Use Disorders or currently in Substance Use Disorder treatment
- Certain caregivers
- Pregnant and postpartum individuals
- Disabled veterans with a 100% disability rating from the VA
- Former foster youth age 18 to 26
- Recently incarcerated persons
- Anyone who already meets the work requirement for Temporary Assistance for Needy Families (TANF)
- Anyone who receives Supplemental Nutrition Assistance Program (SNAP) and isn’t exempt from SNAP’s work requirement

If I lose my Medicaid coverage because I did not comply with the work requirements or qualify for an exemption, can I get it back?

Yes. If you believe you met the work requirements, qualify for an exemption, or received a notice of disenrollment in error, you can file an appeal with your state Medicaid agency.

If you lose your Medicaid coverage, and then your health status changes, your income drops, or



you meet the work requirements through enrollment in an educational program, paid work, or volunteering, you can reapply for Medicaid at any time.

When will these requirements go into effect?

January 1, 2027, for most states, but not all. The deadline for most states to implement these requirements is January 1, 2027. Nebraska, Montana, and Iowa have chosen to do so earlier. CMS has already instructed states to begin informing Medicaid beneficiaries about the kinds of changes they should expect as early as this month.

Learn more from AAPD

AAPD will continue to share resources, action alerts, and webinars in the coming weeks and months to explain the new Medicaid work requirements more fully, what they mean for you, and how to find help navigating these new requirements in your state.

Stay in touch with AAPD by [signing up for our emails](#) and [following us on social media](#). Make sure to visit aapd.com/Medicaid regularly for updates and new resources.