



U.S. Department of Health and Human Services FACT SHEET

FACT SHEET: Medicaid Work Requirements Would Jeopardize Health Coverage and Access to Care for More Than 2 Million New Yorkers

Prior research shows that work reporting requirements reduce enrollment in health coverage, limit access to care, and do not increase employment.

Work requirements would add substantial bureaucratic red tape to Medicaid, putting coverage – and health – at risk for millions of Americans. Only one state has ever fully implemented these policies, and nearly 1 in 4 adults subject to the policy lost their health coverage – including working people and people with serious health conditions—with no evidence of increased employment.¹ In fact, research shows that more than 95% of enrollees subject to the policy already met the requirements or should have qualified for an exemption – but many lost coverage because they couldn’t navigate the red tape.²

According to a recent HHS report analyzing 2021 Census data, the vast majority of working-age Medicaid enrollees are already employed, have a disability, and/or are parents.³ Previous research indicates that among enrollees who aren’t already working, nearly all have disabilities, serious health conditions, childcare or caretaking responsibilities, or are in school.^{4 5}

Nonetheless, the administrative burden for enrollees to report adherence to or exemption from Medicaid work requirements could put many Medicaid beneficiaries in this age group at risk of coverage loss. Administrative churning is a significant issue with Medicaid eligibility redeterminations, and new reporting requirements will compound this problem.⁶ Loss of Medicaid coverage can force patients to change providers, skip medications, or face financial difficulties, and coverage loss has been tied to worse quality of care and worse health.⁷

The table below illustrates the estimated number of people in each New York county whose coverage would be at risk under the general work requirements approach proposed recently by House leadership.⁸ The table presents enrollment statistics from the Centers for Medicare & Medicare Services (CMS) as of December 2022 on the number of adults ages 19 to 55 in Medicaid who are *not* enrolled via disability, parent/caretaker, or pregnancy-related eligibility pathways.

It is important to note that, while individuals enrolled through a disability pathway would be excluded from the new requirements, many people with disabilities enroll in Medicaid via the expansion group pathway, and their coverage could be at risk. In addition, our estimates do include parents who enroll through the expansion pathway; while some states may be able to automatically exempt these individuals based on parental status, this will depend on data availability and how states implement the policy.

Instead of making it harder for people to get health insurance, the Biden-Harris Administration is committed to working with states to test new innovative ways to deliver health care, lower costs for Americans, and expand coverage rather than pursue policies that take coverage away from millions of Americans.



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TABLE: Number of Medicaid Enrollees Potentially Subject to Work Reporting Requirements, New York

County	Total Population	<i>Potentially Subject to Work Reporting Requirements:</i> Medicaid Enrollees, Ages 19-55, not Enrolled via Disability, Pregnancy, or Parent Eligibility Pathways*
STATE TOTAL	20,114,745	2,347,906
Albany County	314,679	26,796
Allegany County	46,654	4,120
Bronx County	1,468,262	305,529
Broome County	198,591	20,055
Cattaraugus County	77,211	7,354
Cayuga County	76,644	6,650
Chautauqua County	128,042	13,453
Chemung County	84,456	8,565
Chenango County	47,407	4,585
Clinton County	80,095	6,545
Columbia County	61,587	5,368
Cortland County	46,984	4,338
Delaware County	44,644	3,493
Dutchess County	296,012	23,641
Erie County	949,715	91,830
Essex County	37,501	2,843
Franklin County	47,996	4,666
Fulton County	53,588	4,852
Genesee County	58,387	4,723
Greene County	48,026	4,343
Hamilton County	5,068	294
Herkimer County	60,596	5,811
Jefferson County	117,634	9,626
Kings County	2,712,360	446,085
Lewis County	26,681	1,795
Livingston County	62,253	4,023
Madison County	68,466	5,855
Monroe County	757,332	74,968
Montgomery County	49,539	5,922
Nassau County	1,391,678	105,628
New York County	1,669,127	181,488
Niagara County	212,808	20,107
Oneida County	232,034	22,893
Onondaga County	474,621	45,793
Ontario County	112,060	8,542
Orange County	398,277	35,870
Orleans County	40,588	3,786
Oswego County	118,019	11,503
Otsego County	58,952	4,645



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Putnam County	97,960	6,674
Queens County	2,393,104	371,600
Rensselaer County	161,125	12,478
Richmond County	493,194	58,641
Rockland County	336,485	32,158
St. Lawrence County	108,836	9,213
Saratoga County	235,010	14,628
Schenectady County	157,515	17,086
Schoharie County	29,936	2,456
Schuyler County	17,920	1,353
Seneca County	33,900	2,575
Steuben County	94,153	8,891
Suffolk County	1,522,998	122,352
Sullivan County	78,230	8,186
Tioga County	48,567	3,957
Tompkins County	105,638	7,262
Ulster County	181,862	18,377
Warren County	65,692	5,939
Washington County	61,504	5,694
Wayne County	91,332	7,492
Westchester County	999,723	77,951
Wyoming County	40,679	2,756
Yates County	24,808	1,804

Sources:

Total state population is from 2021 ACS 5-Year Estimates, Accessed at:

[https://data.census.gov/table?t=Population+Total&g=010XX00US\\$0500000&tid=ACSDT5Y2021.B01003](https://data.census.gov/table?t=Population+Total&g=010XX00US$0500000&tid=ACSDT5Y2021.B01003)

The total Medicaid and CHIP population counts are from the Medicaid and CHIP Eligibility and Enrollment Performance Indicator Data as of April 21, 2023. The counts of adult Medicaid enrollees are from the T-MSIS Analytic File (TAF) Beneficiary Summary File v.7 for December 2022. Information regarding the quality and usability of data for this analysis available at www.medicaid.gov/dq-atlas under Total Medicaid and CHIP Enrollment and Eligibility Group Code topics.

Notes:

* The results include Medicaid enrollees receiving Medicaid and CHIP benefits for the population of adults aged 19-55 excluding those who are eligible for Medicaid due to disability, parent/caretaker, or pregnancy. The sample in this analysis was for adults 19-55 with full-scope / comprehensive benefits enrolled for at least one day during December 2022. Totals exclude enrollees with missing or invalid county codes due to state-submitted data quality issues and may not equal state total on National Fact Sheet.



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REFERENCES

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- ³ Lee A, Ruhter J, Peters C, De Lew N, Sommers BD. Medicaid Enrollees Who are Employed: Implications for Unwinding the Medicaid Continuous Enrollment Provision (Issue Brief No. HP-2023-11). Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. April 2023. <https://www.aspe.hhs.gov/reports/employed-medicaid-enrollees>
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- ⁵ Garfield R, Rudowitz R, Guth M, Orgera K, Hinton E. Work Among Medicaid Adults: Implications of Economic Downturn and Work Requirements. Kaiser Family Foundation. February 11, 2021. Accessed at: <https://www.kff.org/reportsection/work-among-medicaid-adults-implications-of-economic-downturn-and-work-requirements-issue-brief/>
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- ⁸ Limit, Save, Grow Act of 2023. Speakers Office. Accessed at: https://www.speaker.gov/wp-content/uploads/2023/04/LSGA_xml.pdf