# Medicaid and SNAP Work Requirements: What People with Disabilities and Caregivers Need to Know

**November 18, 2026**

# What we will cover today

- Medicaid Work Requirements
  - ✓ Who they apply to
  - ✓ Who is exempt
  - ✓ When they go into effect
  - ✓ What to report and how
- How do these align with SNAP changes?
  - ✓ SNAP exemptions for those with health conditions and their caregivers
  - ✓ How to claim an exemption
  - ✓ Other paperwork changes for SNAP
- Resources for application & appeal help



# Terminology

- Medicaid = Medical Assistance = MA
- MA Work Requirements = Community Engagement Requirements
- Exemptions are sometimes called Exclusions or Exceptions
- DHS – Pennsylvania Department of Human Services
- CAO – County Assistance Office (part of DHS)

# Medicaid Work Requirements

# Why are we talking about Medicaid (MA) work requirements?



Starting January 2027, for the first time, some adults will have work requirements to get or keep Medicaid

Only **adults age 19-64** who get MA in the **Medicaid Expansion** category are subject to work requirements – and many of those individuals will be exempt

# What is “Medicaid Expansion”?

Category of Medicaid added by the Affordable Care Act (ACA)

Before Medicaid Expansion, Medicaid for adults was limited to pregnant people, people with disabilities, older adults (age 65+) and very low-income parents/caregivers

ACA expanded Medicaid to childless adults and more parents/caregivers (age 19 to 64)

PA’s Medicaid expansion began in 2015

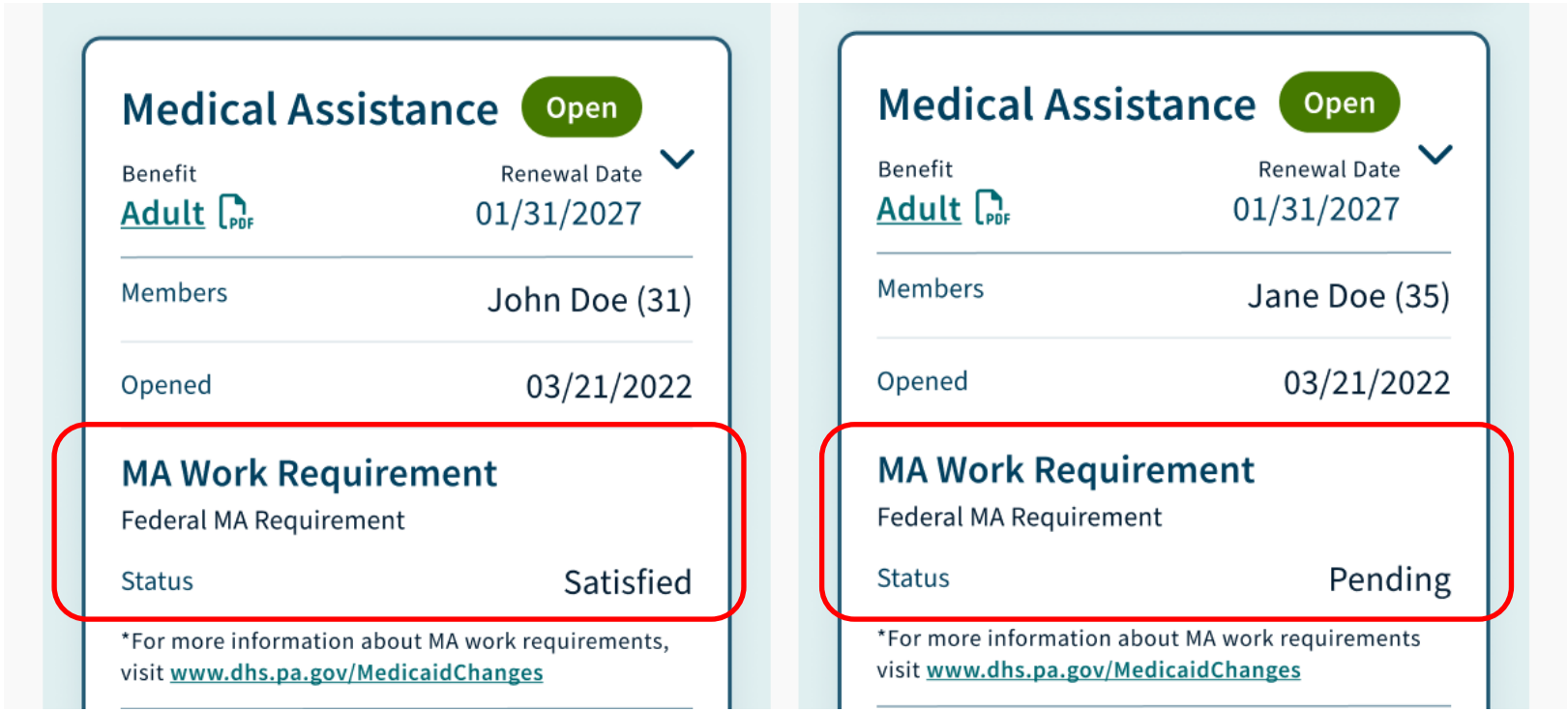
Some people with disabilities are in the Medicaid Expansion category – many are not

# How do recipients know if they are in the Medicaid Expansion category?

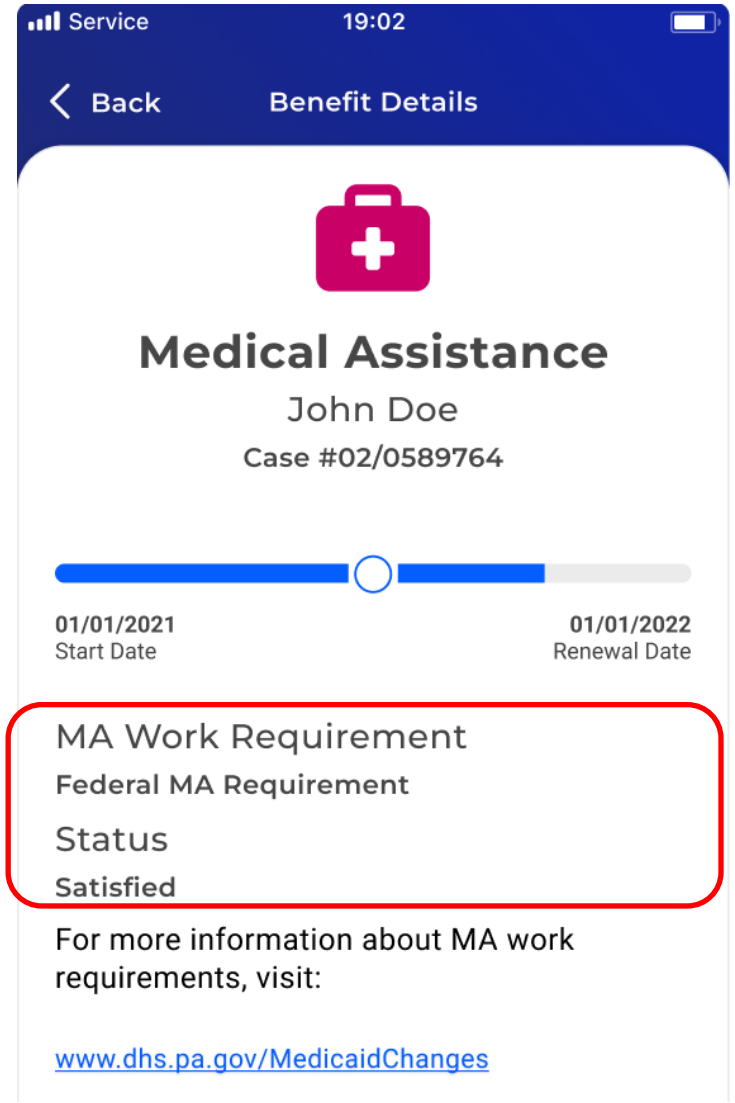


- In September, DHS sent letters, texts and robo calls about work requirements to everyone in the Medicaid Expansion category
- Providers can look up patients in PROMISe to verify eligibility – only eligibility codes MG 90 and MG 91 are assigned to the Medicaid Expansion category
- Recipients can call the DHS Customer Service Center: 877-395-8930 (statewide) or 215-560-7226 (Philadelphia)
- MCOs *should* be able to tell people if they are in the Medicaid Expansion
- In COMPASS, people in the Medicaid Expansion will have an indicator about work requirements

# COMPASS display of work requirement




Desktop COMPASS site




MyCOMPASS mobile app

# Many people are not even subject to MA work requirements!

## NO Work Requirement Because NOT in the Medicaid Expansion

- Age 18 or younger
- Age 65+
- **SSI recipients**
- **People eligible for Medicare**
- **Community HealthChoices (CHC) enrollees** (all)
- **Nursing facility residents**
- **CHC, Consolidated, Community Living, PFDS, Adult Autism and OBRA Waiver recipients**
- **LIFE enrollees**

- **MAWD & Workers with Job Success recipients** (but must do some work to qualify)
- Parents/Caretakers of children under 18 with income at or below 33% of the federal poverty level
- **Breast & Cervical Cancer Prevention & Treatment Program enrollees**
- Former Foster Youth until Age 26
- Eligible in any other non-Medicaid expansion category

# Who is exempt from Medicaid work requirements?

# Exemptions overview

Many people who are in the Medicaid Expansion category, will not have to meet work requirements because they are **EXEMPT** from those requirements

*Other terminology: excluded, excused, exception, "specified excluded individuals"*

# MA work requirement exemptions for people with disabilities & their caregivers

- Parent, guardian, caretaker relative or caregiver of a person with a disability
- “Medically frail” or special medical needs
- Receive  Social Security Disability (SSDI)




- Participating in substance use treatment program
- Veteran rated with a total disability
- Traveled for own or dependent’s medical care
- Received inpatient or similar care

# MA work requirement exemptions for other populations

- Parent, guardian, caretaker relative or caregiver of a child under 14
- Pregnant or in Medicaid 12-month postpartum coverage period
- Certain SNAP recipients




- Former foster youth under age 26
- Incarcerated in one of the prior 4 months before application
- High unemployment in county
- Emergency declaration
- Meet TANF work requirement

# Exemption: Medical frailty (disability or serious/complex health condition)

Means meet one of the following:

1. Blind or disabled as used for Social Security Disability (SSD) determinations or on SSDI
2. Significant disability that impairs ability to do at least 1 activity of daily living
3. Significant mental health condition
4. Substance use disorder – active or in recovery less than 5 years
5. Serious or complex medical condition

# Changes to the Medical Frailty Definition

**HR 1**
July 4, 2025

Disability or Serious Health Condition

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**CMS Regulation**
June 3, 2026

Disability or Serious Health Condition

+

Significantly Impairs Ability to Comply with Work Requirements

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**Mass. v. Oz Decision**
Oct. 29. 2026

Disability or Serious Health Condition

+




→ **Appeal . . . ?**

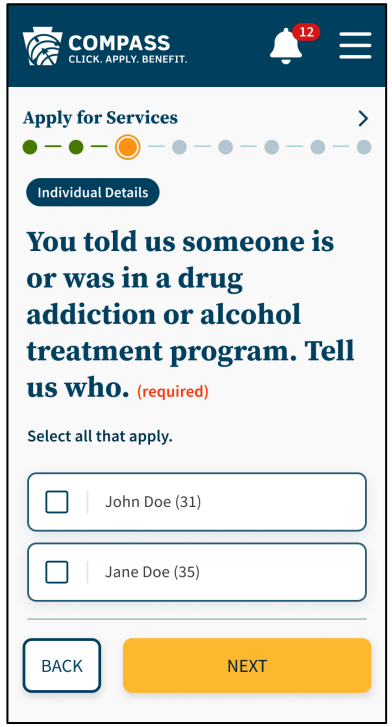
# Medical frailty – What's next?

- Because of the Mass. v. Oz decision, DHS should not deny MA just because someone's medical condition may not impair ability to work
- BUT the application, renewal, COMPASS and other forms still ask whether medical conditions make it significantly harder or impossible to work
- So what should people with a disabilities or a serious health condition do?
  - Answer every question on applications, renewals and work requirement forms
  - If you are denied or terminated from MA - **APPEAL**

# Exemption: Participating in a substance use treatment program

- Exemption currently aligns with SNAP exemption and covers:
  - Inpatient treatment
  - Outpatient treatment programs

- In 2027, DHS is allowing self-reporting of participation in a drug or alcohol treatment program



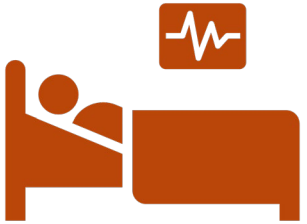



# Exemption: Travel for own or dependent's serious medical care



- Travel must be outside community for "extended" period. Not clear how far or for how long.
- Includes when the person seeking an exemption doesn't travel with their dependent, but is arranging or managing the travel / care

# Exemption: Hospitalization, facility care, or outpatient care similar to facility care



- Recent stay in a hospital, nursing facility, assisted living, personal care home, psychiatric facility, or facility for people with intellectual disabilities; or
- Outpatient care that is similar to what a person might get in a facility

# Exemption: Caring for someone with a disability

- What is a “person with a disability”?
  - Same definition as Americans with Disabilities Act (ADA)
  - Generally, a person with an impairment that substantially limits one or more major life activities
  - Can be any age
  - Does not need to be on Medicaid
- More than one person can be exempt from work requirements based on caring for the same person
- How exemption works depends on combination of:
  - Relationship to person being cared for
  - Whether live with the person

# Exemption: Caring for someone with a disability (cont'd)

- Caretaker relatives, parents or guardians are exempt **regardless of whether they live with the person with a disability**
  - Parent (including non-custodial and adoptive) who provides some level of care
  - Guardian who is the court-appointed guardian of the person
  - Caretaker Relative who provides some level of care – includes blood relatives, stepparents, stepchildren, etc., and spouses of those relatives

# Exemption: Caring for someone with a disability (cont'd)

- For unrelated caregivers of a person with a disability, the exemption depends on **whether the non-relative caregiver is living with the person being cared** for
  - **If living with** the person with a disability → Exempt.
    No minimum hours of care, but provide regular assistance
  - **If not living with** the person with a disability → Exempt only if provide at least 80 hours care per month

# Complying with the MA Work Requirement

# Complying with the MA work requirement

If not exempt, an individual can show compliance with the MA work requirement in the following ways:

1. **Activities**:

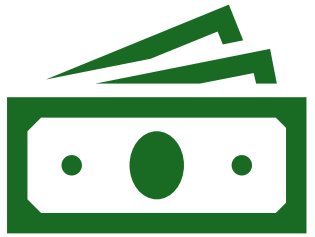
   - 80 hours of community engagement activities per month
     - Work (paid, unpaid, in-kind)
     - Community service
     - Work programs
   - At least half-time education

   ↑ Combining the above activities to reach 80-hour requirement,

OR

2. **Income**: Monthly household income of $580 or more

# Household income of $580 or more



- Households with countable income of $580 or more in a month will be compliant with the MA work requirement
  - Both earned and unearned income count
  - All members of MA household will be compliant – even if it's not their income
- Seasonal workers are compliant if average income over the prior 6 months is $580 or more
- What type of income counts towards the $580?
  - Taxable income Social Security, tax-exempt interest
- What income does NOT count towards the $580?
  - SSI, workers compensation, child support, veterans' disability benefits, difficulty of care payments, and a few others

# Examples: Compliance due to $580 in income

**Mark and Taylor** are married. Neither works. Mark receives $1,800 per month in long-term disability from his former employer. BOTH Mark and Taylor are compliant with work requirements.

**Tori** earns $15 per hour and works 10 hours per week. Tori is compliant with work requirements because she earns at least $580 per month.

# When must MA work requirements or exemptions be met?

# New applicants → January 1, 2027

Starting January 1, 2027, **new applicants** for Medicaid will be checked for compliance with or exemption from new work requirements if subject to them

# Current MA recipients → at renewal

People receiving Medicaid before January 1, 2027 will not be checked for compliance or an exemption until their first renewal due in 2027 starting with renewals due in February



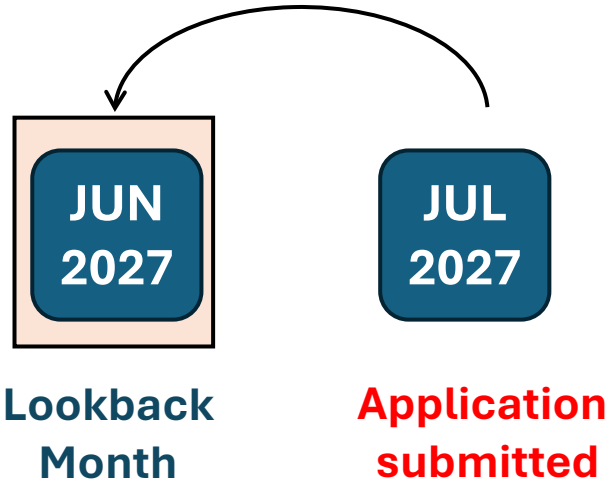
# NEW state option to delay denials related to MA work requirements

- As of this week, states have a new option to request a work requirements hold harmless period
  - States that seek this hold harmless period cannot deny or terminate MA based on work requirements
  - States still have to determine compliance with or exemption from work requirements– but no negative action if not
  - Lasts up to 6 months (through June 30, 2027)
- Will PA take up the option?
  - Unknown
  - Regardless of whether it does, always answer all application and renewal questions and respond to information requests

# Compliance and exemption timing for New Applicants

- **Compliance** must be shown in the month before the month of application (lookback month)
- **Exemption** must be shown:
  - At time of application

    or
  - In the month before the month of application (lookback month)



# Application examples

**Maria** applies for MA in July 2027. She earned $1,200 in June 2027. She is compliant with the work requirement.

**Layla** is 50 and has no income. She had been providing care to her brother who has a disability until he moved to Maine at the end of August 2027. In September, Layla applies for MA and is found eligible because she was a caregiver to a person with a disability in the prior month even though she is no longer.

**Felix** lost his job in July and hasn't found new work. In October he is diagnosed with colon cancer and applies for MA. Felix is determined to meet the medical frailty exemption from MA work requirements.

# Compliance and exemption timing for Current Recipients

- **First renewal in 2027**
  - Current recipients must show compliance or that they met an exemption for any ONE month since their LAST renewal
  - This means a 12-month lookback period

12-month lookback period – only need to show **one month** of compliance/exemption

**Renewal due**

| AUG 2026 | SEP 2026 | OCT 2026 | NOV 2026 | DEC 2026 | JAN 2027 | FEB 2027 | MAR 2027 | APR 2027 | MAY 2027 | JUN 2027 | JUL 2027 |
|---|---|---|---|---|---|---|---|---|---|---|---|

# Compliance and exemption timing when 6-month renewals start

- Beginning in 2027, people in the Medicaid Expansion will be on a 6-month renewal schedule. Six-month renewals start for most after their first application or renewal in 2027.
- Will have to show compliance or that they met an exemption for any ONE month since the LAST renewal. This means a 6-month lookback period.

6-month lookback period – only need to show **one month** of compliance/exemption



# Renewal Examples

**Denise** is on MA expansion. Her last renewal was in April 2027. She was earning $1200 per month until June 2027 when she quit her job. At her October 2027 renewal she is found compliant with work requirements because she had $580 or more in income in at least one month since the April renewal.

**Eric** is on MA expansion. His last renewal was in May 2027. He was recently diagnosed with a schizoaffective disorder and has an application in for SSDI. At his November 2027 renewal he is found exempt from work requirements due to medical frailty.

# Renewal Examples (cont’d)

**Theo** is on MA expansion.  His last renewal was in July 2026.  He cared for his mom who has dementia until September 2026. In July 2027, Theo has his MA renewal. Because he was a caregiver for someone with a disability during at least one month since his last renewal, Theo is found eligible.

# How individuals can stay covered

# What verification of  MA work requirement compliance or exemption is needed?

- DHS will try to use information it has on file or from other sources to decide if an MA recipient is still eligible for Medicaid, including whether they are compliant or meet an exemption
- In 2027, giving information on a signed application, renewal, or other form that shows compliance or an exemption is sufficient verification – this is called **self-attestation**
  - Exception – Income documentation is always required
- In 2028 and beyond
  - Self attestation will be limited to the medical frailty exemption  and will only be available for applicants or one time for someone already on Medicaid

# Tips to getting and keeping MA



- ✓ Answer all questions on the MA application, renewal and any forms that are sent.  You may get a work requirements “assessment” form.
- ✓ Submit all required and requested documents to the CAO or upload them to COMPASS
- ✓ Open all mail from DHS
- ✓ Respond to all DHS notices and requests
- ✓ If you are denied or terminated from MA, **appeal right away**. If you have MA and get a termination letter, you can keep MA if you appeal within 15 days from the date on the notice.
- ✓ Work with the CAO to resolve appeal before the hearing date by submitting missing information

# How do the new MA rules differ from the SNAP work rules that went into effect last year?

# What health conditions are exempt from SNAP & MA work rules?

| | 🍎 **SNAP** | ⚕ **Medicaid** |
|---|---|---|
| You receive SSI or SSDI | ✅ Yes | ✅ Yes |
| You receive VA disability | ✅ Yes, any rating | ✅ Yes, if 100% rating |
| You are pregnant | ✅ Yes | ✅ Yes |
| You are receiving substance abuse treatment | ✅ Yes | ✅ Yes |

# What health conditions are exempt from SNAP & MA work rules?

| | 🍎 **SNAP** | ⚕ **Medicaid** |
|---|---|---|
| You have a condition, temporary or permanent, that interferes with your ability to work (mental or physical) | ✅ Yes **requires verification, you can use this form**. | **MAYBE**: if "Medically frail" |
| You are considered “medically frail” (you have a physical, behavioral health or developmental disability, or a serious or complex medical condition) | **MAYBE** if it interferes with your ability to work | ✅ Yes |

# What health conditions are exempt from SNAP & MA work rules?

| | 🍎 **SNAP** | ⚕ **Medicaid** |
|---|---|---|
| You receive worker's compensation or short-term disability | ✅ Yes | ❌ No |
| You had care in a hospital, nursing facility, psychiatric facility, or other facility, or received similar care at home in the last month (if applying) or since your last renewal | ❌ No | ✅ Yes |
| You had to travel for your or your dependent's treatment in the last month (if applying) or since your last renewal | ❌ No | ✅ Yes |

# Which caregivers are exempt from SNAP & MA work rules?

| | 🍎 **SNAP** | ⚕ **Medicaid** |
|---|---|---|
| There is a child under 14 in your household | ✅ Yes | ✅ Yes, if the person seeking the exemption is providing some level of care to the child. |
| You are the caretaker of a child 14 or older or under 18 in your home | ❌ No | ✅ Yes – This is not an exemption, but these parents / caregivers don't have to complete MA work activities because they're compliant due to $580 in income or they are very low income. |
| Care for someone who is ill or incapacitated. This does not have to be someone you live with. | ✅ Yes | ✅ Yes, but only f the person you care for has a disability and either lives with you or is related to you |

# What income exempts individuals from SNAP & MA work rules?

| | 🍎 **SNAP** | ⚕ **Medicaid** |
|---|---|---|
| Current Income | If you work 30 or more hours a week <u>OR</u> earn more than 217.50 a week ($870 a month), you are exempt.<br><br>**This exemption only applies to the working adult, not other members of the household.** | You are **<u>COMPLIANT</u>** with work rules If you are in a household with income at or above $580 in a month. Includes taxable income and Social Security.<br><br>**All adults in the Medicaid household are compliant, regardless of who receives the income**. |

# How to claim exemptions or comply if not exempt for SNAP

# Most exemptions do not require additional verification:

**SNAP:**

- **1 page medical exemption form** for those claiming a condition, who do not receive a disability benefit
- Can report all other exemptions during the SNAP interview at application and renewal, or use the questionnaire.

**MA:**

- Answer all the questions on the application and renewal packet and any forms DHS sends. No additional documentation is needed in 2027 (except to verify income amount).

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**SNAP:**

- **1 page medical exemption form** for those claiming a condition, who do not receive a disability benefit
- Can report all other exemptions during the SNAP interview at application and renewal, or use the questionnaire.

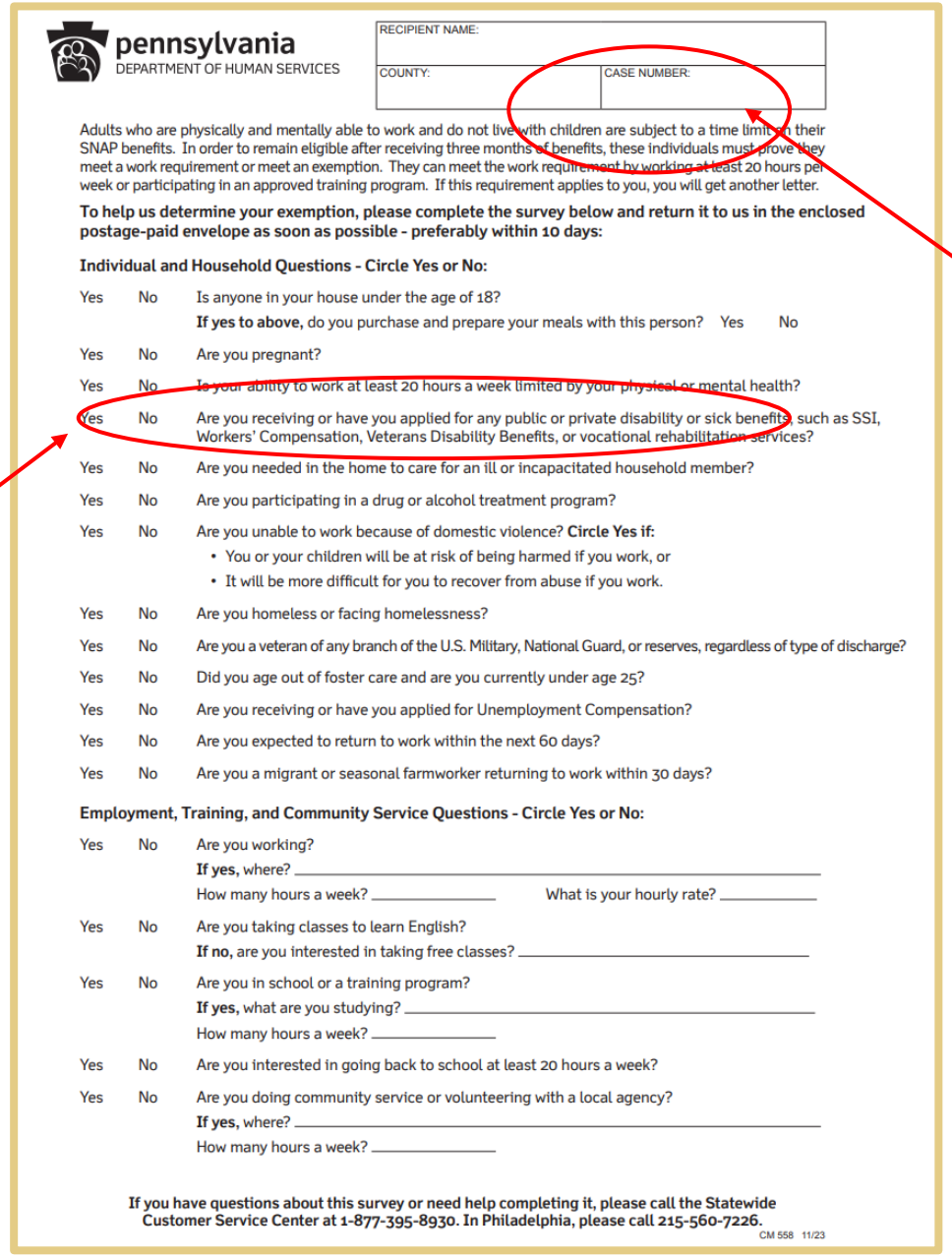
**MA:**

- Answer all the questions on the application and renewal packet and any forms DHS sends. No additional documentation is needed in 2027 (except to verify income amount).

# Claiming an exemption: SNAP

Complete the questionnaire checklist

If someone's ability to work is limited by physical or mental health, they will need a Medical Exemption Form.



pennsylvania
DEPARTMENT OF HUMAN SERVICES

RECIPIENT NAME:

COUNTY: | CASE NUMBER:

Adults who are physically and mentally able to work and do not live with children are subject to a time limit on their SNAP benefits. In order to remain eligible after receiving three months of benefits, these individuals must prove they meet a work requirement or meet an exemption. They can meet the work requirement by working at least 20 hours per week or participating in an approved training program. If this requirement applies to you, you will get another letter.

**To help us determine your exemption, please complete the survey below and return it to us in the enclosed postage-paid envelope as soon as possible - preferably within 10 days:**

**Individual and Household Questions - Circle Yes or No:**

Yes No Is anyone in your house under the age of 18?
**If yes to above,** do you purchase and prepare your meals with this person? Yes No

Yes No Are you pregnant?

Yes No Is your ability to work at least 20 hours a week limited by your physical or mental health?

Yes No Are you receiving or have you applied for any public or private disability or sick benefits, such as SSI, Workers' Compensation, Veterans Disability Benefits, or vocational rehabilitation services?

Yes No Are you needed in the home to care for an ill or incapacitated household member?

Yes No Are you participating in a drug or alcohol treatment program?

Yes No Are you unable to work because of domestic violence? **Circle Yes if:**
- You or your children will be at risk of being harmed if you work, or
- It will be more difficult for you to recover from abuse if you work.

Yes No Are you homeless or facing homelessness?

Yes No Are you a veteran of any branch of the U.S. Military, National Guard, or reserves, regardless of type of discharge?

Yes No Did you age out of foster care and are you currently under age 25?

Yes No Are you receiving or have you applied for Unemployment Compensation?

Yes No Are you expected to return to work within the next 60 days?

Yes No Are you a migrant or seasonal farmworker returning to work within 30 days?

**Employment, Training, and Community Service Questions - Circle Yes or No:**

Yes No Are you working?
**If yes,** where? _____
How many hours a week? _____ What is your hourly rate? _____

Yes No Are you taking classes to learn English?
**If no,** are you interested in taking free classes? _____

Yes No Are you in school or a training program?
**If yes,** what are you studying? _____
How many hours a week? _____

Yes No Are you interested in going back to school at least 20 hours a week?

Yes No Are you doing community service or volunteering with a local agency?
**If yes,** where? _____
How many hours a week? _____

**If you have questions about this survey or need help completing it, please call the Statewide Customer Service Center at 1-877-395-8930. In Philadelphia, please call 215-560-7226.**

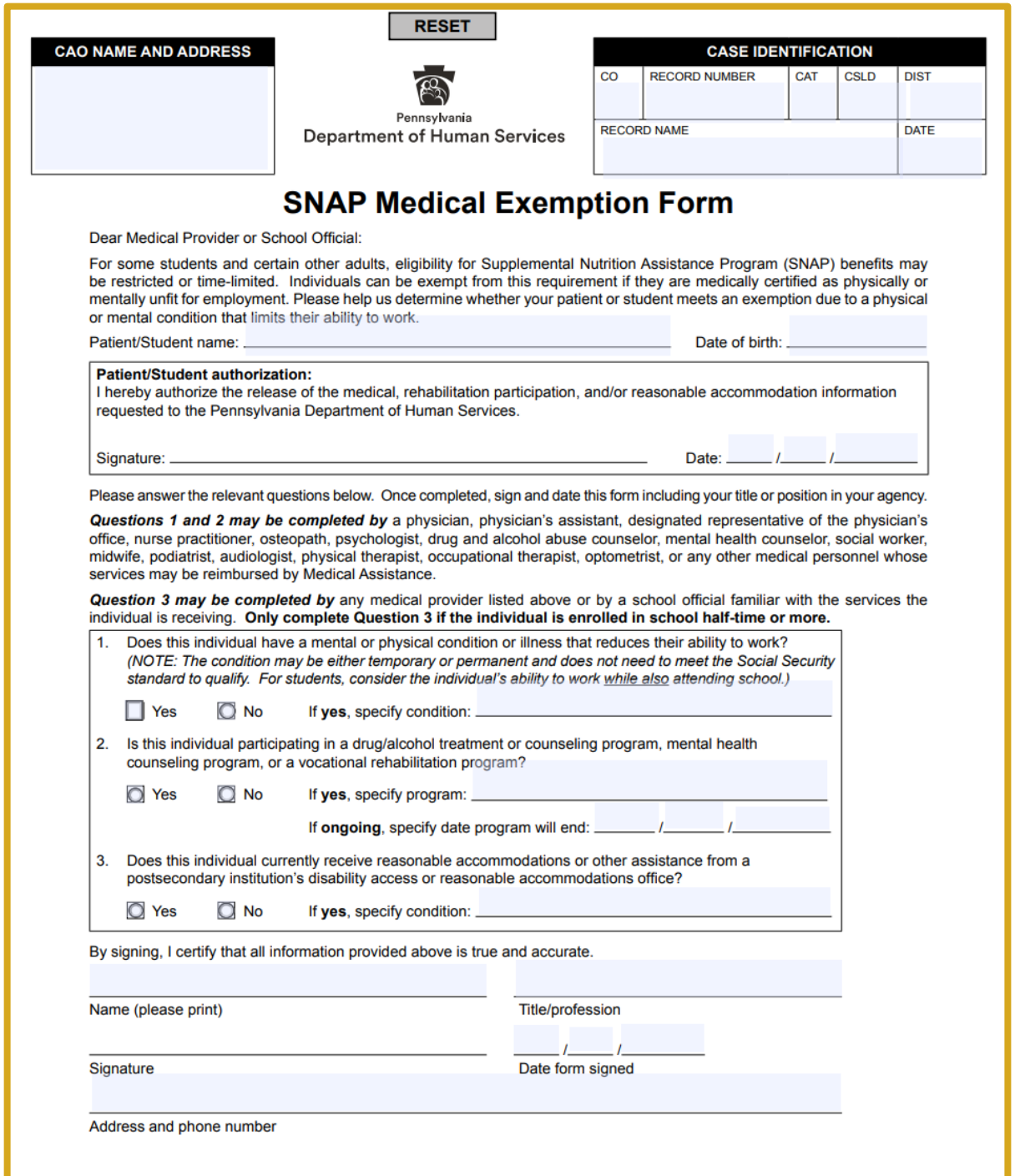
CM 558 11/23

If someone cannot find their case number, include Social Security number.

# Claiming an exemption: SNAP

If necessary, complete the medical exemption form.

Can be completed by many providers including: physician, physician's staff, nurse practitioner, psychologist, counselor, social worker, *or* any provider who accepts Medicaid.



RESET

CAO NAME AND ADDRESS

Pennsylvania
Department of Human Services

CASE IDENTIFICATION

| CO | RECORD NUMBER | CAT | CSLD | DIST |
|---|---|---|---|---|
| | | | | |

RECORD NAME | DATE

## SNAP Medical Exemption Form

Dear Medical Provider or School Official:

For some students and certain other adults, eligibility for Supplemental Nutrition Assistance Program (SNAP) benefits may be restricted or time-limited. Individuals can be exempt from this requirement if they are medically certified as physically or mentally unfit for employment. Please help us determine whether your patient or student meets an exemption due to a physical or mental condition that limits their ability to work.

Patient/Student name: _____ Date of birth: _____

**Patient/Student authorization:**
I hereby authorize the release of the medical, rehabilitation participation, and/or reasonable accommodation information requested to the Pennsylvania Department of Human Services.

Signature: _____ Date: ____/____/____

Please answer the relevant questions below. Once completed, sign and date this form including your title or position in your agency.

***Questions 1 and 2 may be completed by*** a physician, physician's assistant, designated representative of the physician's office, nurse practitioner, osteopath, psychologist, drug and alcohol abuse counselor, mental health counselor, social worker, midwife, podiatrist, audiologist, physical therapist, occupational therapist, optometrist, or any other medical personnel whose services may be reimbursed by Medical Assistance.

***Question 3 may be completed by*** any medical provider listed above or by a school official familiar with the services the individual is receiving. **Only complete Question 3 if the individual is enrolled in school half-time or more.**

1. Does this individual have a mental or physical condition or illness that reduces their ability to work?
   *(NOTE: The condition may be either temporary or permanent and does not need to meet the Social Security standard to qualify. For students, consider the individual's ability to work while also attending school.)*
   ☐ Yes ☐ No If **yes**, specify condition: _____
2. Is this individual participating in a drug/alcohol treatment or counseling program, mental health counseling program, or a vocational rehabilitation program?
   ☐ Yes ☐ No If **yes**, specify program: _____
   If **ongoing**, specify date program will end: ____/____/____
3. Does this individual currently receive reasonable accommodations or other assistance from a postsecondary institution's disability access or reasonable accommodations office?
   ☐ Yes ☐ No If **yes**, specify condition: _____

By signing, I certify that all information provided above is true and accurate.

Name (please print) | Title/profession

Signature | Date form signed

Address and phone number

# Complying with Work Requirements

FOR SNAP: If you are not exempt, you must either:

- **work** (unpaid work counts) for 20 hours a week
- do **job training** for 20 hours a week
- A combination of work and training for 20 hours a week

OR

- You can **volunteer** to meet the work rules.

*You can receive SNAP without complying or being exempt for 3 months of three years.*

For Medical Assistance, you can do any combination of work, training, or volunteering for 80 hours in a month, or have $580 in household income

# Other paperwork changes for SNAP

**You must submit proof of your shelter costs whenever you move or whenever they change.**

**After the 6-month MA renewals start, you may get both a SNAP SAR due and a MA renewal packet due around the same time. You will have to complete both.**

# Recap & Resources

# Key takeaways

- MA Work requirements begin for NEW APPLICANTS on January 1, 2027.
- SNAP work requirement "three years" resets January 1, 2027 – if you lost SNAP, reapply!
- MA Work requirements begin for CURRENT recipients at the first renewal in 2027 starting in February.
- In 2027, DHS will use answers on applications and other forms to verify exemptions or compliance. Proof of income still needed.
- Many people will be safe from work requirements because they are exempt or have enough income.

# Key Takeaways to Stay Covered:

- Make sure your address is correct with both DHS and USPS.
- Check your mail and read anything from DHS right away.
- If you have a smart phone or access to the internet, use COMPASS to report changes, complete Renewals and Semi Annual Reports (SARs), and upload documents.
- Answer all questions on applications, renewals, semiannual reporting forms, and questionnaires.  Submit all requested documents to the CAO.
- Claim SNAP exemptions by using the exemption screening form or during your interview. If claiming a medical condition, have the medical exemption form completed as well.
- If you receive a SNAP SAR and an MA recertifications at the same time, complete both.
- If your benefits are stopped, **appeal**!

# Where to go for help

## Legal Advice & Help with Appeals

**Pennsylvania Health Law Project (PHLP)**
Medicaid only (statewide)
Call: 800-274-3258
Email: Staff@phlp.org
Mon & Wed starting at 8am

**Community Legal Services**
(Philadelphia only)
Call: 215-981-3700
Mon & Wed 9am-12pm
Walk In: 1410 W. Erie Ave
Tue & Thu 9am-12pm

**Pennsylvania Legal Aid Network (PLAN)**
Connects to local legal aid
Offers Online intake
Statewide legal Aid office phone numbers

## Application & Renewal Help

**Just Harvest**
(Allegheny County)
Call 412-431-8960 option 3

**Pennsylvania Health Access Network (PHAN)**
Call or text: 877-570-3642
Online intake

**BenePhilly**
(Philadelphia only)
Call: 800-994-5537

# For more information

Sign up for the **Benefits Access Coalition** webinar series

- Upcoming Webinar: 12/9/26 - Medicaid Work Requirements: Action Steps to Stay Covered in 2027

View past webinars (recordings and slides) on PHAN's website:

- What You Need to Know About Immigrant Access to Medicaid
- Best Practices for Assisting with Public Benefits Applications
- More Than One Way to Qualify: Medicaid Eligibility Beyond the New Requirements
- Overview of Federal Changes to SNAP and Lessons Learned
- Stay Covered: How to Navigate Medicaid Work Requirements
- What You Need to Know About Federal Changes to Pennie

# Questions?

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