



Prohibition on Medi-Cal Work Requirements

Protect Medi-Cal Expansion

Problem:

Having failed to repeal the Affordable Care Act through Congress, the Trump Administration seeks to roll back the Medicaid expansion administratively through the state waiver process.

To aid in this goal, the federal Medicaid agency has recently approved state Medicaid waivers in 3 states that allow those states to impose new requirements on many adults receiving Medicaid such as work requirements to keep Medicaid and lock-out periods for people who lose Medicaid. More such waivers are pending, with additional requirements such as time limits on receipt of benefits or enrollment caps for the state's Medicaid program.

Background:

Federal Medicaid law does not allow work requirements, lock out periods, time limits, or enrollment caps. In order to impose these new restrictions, a state must ask that the current law be waived. Medicaid waivers are allowed to test new ways to administer the program, such as providing services through managed care, but the federal administration is currently using waivers as a way to limit enrollment.

California fully embraced the Affordable Care Act through the expansion of our own Medicaid program, Medi-Cal. The expansion of Medi-Cal allowed millions of low-income Californians to access health care, some for the first time in their lives.

Imposing work requirements and other limits to the Medi-Cal program would harm many lowincome Californians by creating unnecessary hurdles to keep coverage. 84% of the Medi-Cal adults who are not elderly or disabled are in working families. Those who do not work, cannot work due to chronic illness, a family member that requires care, full-time school attendance, or they are looking for work.

Imposing new barriers to maintaining Medi-Cal means that eligible recipients lose their coverage. When California implemented the Affordable Care Act, it also aimed to reduce barriers to eligibility. For example, California increased the amount of time that someone could have their Medi-Cal reinstated without starting a new application if they were cut off for failing to renew. These recent state waivers would move California in the opposite direction and make it harder for those on Medi-Cal to keep their coverage due to bureaucratic hurdles.

This bill would:

Prohibit DHCS from imposing as a condition of Medi-Cal eligibility:

- Work requirements;
- Waiting periods, time limits or coverage lockouts; or,
- Any other condition not authorized by state law or federal statute or regulation.

This would prevent California from changing the Medi-Cal eligibility rules without legislative oversight.

Additionally, the Trump Administration could not impose new conditions of eligibility onto an existing waiver application without the Legislature's consent.