

January 4, 2019

ABOUT

Speak Out Against Virginia's Costly Work Documentation Program Proposal

More than 200,000 newly eligible adults have gained access to quality and affordable health insurance on January 1 through Virginia's expanded Medicaid coverage. Despite this early success of expansion, there is a separate threat to the Medicaid program in the form of a work documentation requirement and the imposition of monthly premiums that would kick roughly 26,800 people off of coverage. A waiver to impose these new requirements is currently under consideration by the Centers for Medicare and Medicaid Services, and the public has until this Sunday to submit comments.



The Commonwealth Institute for Fiscal Analysis provides credible, independent and accessible

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Virginia's work requirement and monthly premium proposal, known as COMPASS, is currently in a 30-day federal comment period ending January 6, 2019 at 11 pm.

You can submit a public comment at TellCMS.com

Submit a fully customizable comment in a few minutes with [the easy-to-use portal](#).

The waiver would create the COMPASS program, which will cost an estimated \$38.4 million to administer and will require certain Medicaid enrollees to meet and report monthly work activities. The program is by no means a done deal for Virginia and must undergo federal approval. And, if approved, the program is likely to face litigation.

The program is seeking to enforce a rule that the overwhelming majority of adults covered by Medicaid are already abiding by or are exempt from. Medicaid enrollees are working, disabled, ill, caretakers, pregnant women, students, retired, or looking for work. Only around 1 percent of non-elderly enrollees don't fit into one of those categories, according to national data.

Arkansas is currently the only state to fully implement work requirements for Medicaid and the program has been plagued with administrative and technological issues resulting in difficulty reporting work hours, inefficient outreach to enrollees,

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and other challenges. Nearly 17,000 Arkansans have been kicked off of coverage within the first 6 months of the program – nearly 22 percent of all enrollees that have been subjected to the work requirement. Stories have made national news of individuals who are working sufficient hours yet have been kicked off of coverage due to issues navigating the online portal or the complicated details of the program.

Arkansas's program has seen very limited success in actually promoting secure and steady employment – just a half percent of all individuals subject to the state's work requirements have obtained new employment, with no clear indication that these gains are due to the program. The majority of Medicaid enrollees in Arkansas, like the rest of the nation, are already working or exempt. This experience suggests the program will ultimately just create new hurdles for people who are already working and fail to help others find meaningful work.

Instead of spending \$38.4 million to essentially kick 26,800 people off of health coverage, Virginia could invest the funds in other, more productive ways – providing comprehensive dental benefits to adults in Medicaid, improving the state's behavioral health services, or even standing up a more comprehensive work and training program for everyone in Virginia, regardless of Medicaid eligibility. The proposed work documentation program is a bad deal for the state and the people who it is supposed to help.

– *Freddy Mejia, Policy Analyst*

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