

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1800 Session of  
2023

INTRODUCED BY SCIALABBA, ROWE, KEPHART, HAMM, KAUFFMAN, IRVIN,  
WARNER, ZIMMERMAN, KEEFER, GILLEN AND GROVE, OCTOBER 30, 2023

REFERRED TO COMMITTEE ON HUMAN SERVICES, OCTOBER 30, 2023

AN ACT

1 Amending the act of June 13, 1967 (P.L.31, No.21), entitled "An  
2 act to consolidate, editorially revise, and codify the public  
3 welfare laws of the Commonwealth," in public assistance,  
4 providing for work requirements for Medicaid enrollees.

5 The General Assembly of the Commonwealth of Pennsylvania  
6 hereby enacts as follows:

7 Section 1. The act of June 13, 1967 (P.L.31, No.21), known  
8 as the Human Services Code, is amended by adding a section to  
9 read:

10 Section 441.10. Work Requirements for Medicaid Enrollees.--

11 (a) No later than March 1 of each year, the secretary shall  
12 apply to the Centers for Medicare and Medicaid Services of the  
13 Department of Health and Human Services for a waiver under 42  
14 U.S.C. § 1315 (relating to demonstration projects) for the  
15 following purposes:

16 (1) Instituting work requirements for a Medicaid enrollee  
17 who is eighteen years of age or older and physically and  
18 mentally capable of work. The work requirements shall comply  
19 with the following:

1 (i) In order to maintain enrollment in the Medicaid program,  
2 a Medicaid enrollee shall be gainfully employed or self-employed  
3 for at least twenty hours a week, complete twelve job training  
4 program-related activities a month or be actively seeking  
5 employment as verified by the department.

6 (ii) A Medicaid enrollee who complies with subparagraph (i)  
7 may receive Medicaid premiums or cost sharing reductions or  
8 other incentives beginning in year two of employment.

9 (iii) A Medicaid enrollee who has failed to comply with  
10 subparagraph (i) shall cease to be eligible for enrollment in  
11 the Medicaid program and to receive Medicaid benefits for the  
12 following periods:

13 (A) For a first violation, a period of three months.

14 (B) For a second violation, a period of six months.

15 (C) For a third violation, a period of one year.

16 (D) For a fourth violation, a period of two years or greater  
17 as determined necessary by the department for the purpose of  
18 this section.

19 (2) Requiring a Medicaid enrollee who is eighteen years of  
20 age or older and physically and mentally capable of work to  
21 verify on a biannual basis or by request of the department the  
22 Medicaid enrollee's family income or the Medicaid enrollee's pay  
23 stubs or equivalent documentation with the department for the  
24 purpose of ensuring compliance with paragraph (1).

25 (3) Except as provided under paragraph (4), prohibiting an  
26 individual from enrolling in the Medicaid program and receiving  
27 Medicaid benefits if the individual has failed to comply with  
28 paragraphs (1) and (2).

29 (4) Exempting a Medicaid enrollee from the requirements  
30 under paragraphs (1) and (2) under any of the following

1 conditions:

2 (i) The Medicaid enrollee is attending high school as a  
3 full-time student.

4 (ii) The Medicaid enrollee is currently receiving temporary  
5 or permanent long-term disability benefits.

6 (iii) The Medicaid enrollee is an individual sixty-five  
7 years of age or older.

8 (iv) The Medicaid enrollee is a pregnant woman.

9 (v) The Medicaid enrollee receives Supplemental Security  
10 Income (SSI) benefits.

11 (vi) The Medicaid enrollee permanently or temporarily  
12 resides in a mental health institution or correctional  
13 institution.

14 (vii) The Medicaid enrollee is experiencing a serious health  
15 condition that prevents the Medicaid enrollee from complying  
16 with paragraph (1).

17 (viii) The Medicaid enrollee is experiencing a temporary  
18 condition that prevents the Medicaid enrollee from complying  
19 with paragraph (1), including domestic violence or residential  
20 or inpatient substance abuse treatment.

21 (b) As used in this section, the following words and phrases  
22 shall have the meanings given to them in this subsection unless  
23 the context clearly indicates otherwise:

24 "Cost sharing" means out-of-pocket spending requirements for  
25 a Medicaid enrollee.

26 "Serious health condition" means as defined in 29 U.S.C. §  
27 2611(11) (relating to definitions).

28 Section 2. This act shall take effect in 60 days.