They Harvest the Nation's Food, but a New Rule May Strip Them of Health Insurance

Starting next year, many adults enrolled in Medicaid will have to prove they work, volunteer or are in school at least 80 hours a month.

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Seasonal work. Inconsistent hours. Frequent moves. Cash payments and informal jobs. For farmworkers who rely on Medicaid, these common employment patterns could put their health coverage at risk.

It's a heightened concern for the estimated million-plus farmworkers who are U.S. citizens or legal permanent residents, as new work requirements kick in for the federal-state healthcare program that serves low-income and disabled Americans.

Starting next year in most states, many adults enrolled in Medicaid will have to prove they work, are enrolled in college or vocational courses, volunteer, or do unpaid work for at least 80 hours a month.

Advocates say this could pose a significant challenge to Medicaid-eligible farmworkers, who frequently work more than 80 hours a month during harvest season but less in other months. What's more, outside the harvest season, many workers take on informal jobs in construction, landscaping, or home repair for which they don't receive formal paychecks that would prove their continuing Medicaid eligibility. Still, they can establish eligibility if they prove their average monthly income over six months is equivalent to at least 80 hours of work at the federal minimum wage.

"Having a work requirement — having to create more paperwork and more proof — is certainly extremely challenging for farmworkers and others who are low-income and who may especially have seasonal jobs, not year-round, and do have periods" when there is no work available, said Alexis Guild, vice president of strategy and programs at Farmworker Justice.

New Requirements, Additional Hurdles

Agriculture is a trillion-dollar industry, and Americans depend on an estimated 2.9 million

farmworkers to put food on their tables. Nearly 60% of those workers are U.S. citizens or green-card holders, according to the U.S. Department of Agriculture. The remaining 40% lack legal status or are otherwise ineligible for Medicaid.

Even among farmworkers with citizenship or legal status, the uninsured rate is three times that of the general population, and most farmworkers with insurance are Medicaid beneficiaries, although participation rates vary by state. According to a new analysis, 71% to 79% of eligible farmworker households report participation in Medicaid.

The new Medicaid work requirements were a key provision of the One Big Beautiful Bill Act signed last July by President Donald Trump. Under the federal law, 43 states and the District of Columbia must implement the requirements by January 1. A few states have moved to implement the work rule early.

The 80-hour rule applies in states that expanded Medicaid, a process that began in 2014 and was tied to the Affordable Care Act. Following the initial expansions, agricultural workers with legal documentation became 24% more likely to have health insurance, according to a 2021 article in the American Journal of Agricultural Economics.

Immigration Anxieties

The work requirements are the latest in a long list of obstacles placed between workers and the healthcare they're legally entitled to, Guild said. "Medicaid certainly helps because it alleviates the cost issue," she said. "But there are still other barriers, such as transportation, taking sick leave, and finding time to visit a health center. All these factors can prevent them from actually receiving medical care."

For farmworkers with green cards and naturalized U.S. citizens, there is another source of stress: the fear that signing up for Medicaid could put personal information in the hands of immigration authorities.

That's what worries Luis, a 45-year-old green-card holder and Medicaid recipient who dreams of becoming a U.S. citizen. Luis — who asked to be identified by only his middle name — lives with his wife and daughter in North Carolina, where he has worked in agriculture for nearly a decade.

Speaking in Spanish, he said that when he learned about the work requirements, he knew it would be challenging for him to prove that he works 80 hours a month. "I only work on farms for six or seven months; the rest of the year I work in whatever I can find," he said.

Republicans in Congress argue that work requirements will reduce federal healthcare spending, encourage nondisabled adults to enter the workforce, and preserve safety net resources for the most vulnerable populations.

Among Hispanic adults enrolled in Medicaid, 67% are already working, according to a 2025 KFF report.

The Centers for Medicare & Medicaid Services did not respond to requests for comment for this article. But in June, when CMS announced its “nationwide framework” to implement the Medicaid work requirements, Administrator Mehmet Oz said it would help beneficiaries “build skills and independence through work, education, job training, or community service, creating new opportunities for themselves and their families.” Federal officials say the new requirements “could reduce poverty by as much as 2.9 million people.”

Chronic Illness

Agricultural work is one of the nation’s most dangerous occupations, and it is associated with long-term health impacts and high rates of chronic illness, including respiratory conditions. A 2021-2022 California survey found that 37% of male farmworkers and 47% of female farmworkers in the state had at least one chronic health condition. The new work requirements present one more barrier for those seeking care, advocates said.

“People skip checkups and screenings, and conditions that could be caught early and treated cost-effectively” aren’t, said Adriana Cadena, executive director of Protecting Immigrant Families.

Emergency rooms often become the “natural” place to go for healthcare, Cadena added. “This drives up waiting times and costs for all of us. … And when people are sick enough that they miss work, it starts a vicious cycle of lost productivity and family economic instability that again threatens all of us.”

A Loss for Families and Children

The new federal rules also require beneficiaries to verify their eligibility at least twice a year, twice as often as previously, creating another potential obstacle.

“Letters can easily be missed, and forms may go unfilled. If people get caught up in the paperwork, they could lose coverage,” said Akeiisa Coleman, an assistant vice president at The Commonwealth Fund, a nonprofit that promotes an equitable healthcare system.

For farmworkers who travel from state to state, the process can be especially difficult.

“You have to find the time to transfer your coverage and probably find a person or organization that can help you — and that can be really hard when you’re constantly moving,” Cadena said.

The situation highlights the difficulties of navigating a complex system for individuals and families already struggling to make ends meet.

“The result,” Cadena said, “could be the loss of coverage not only for workers, but also for their families and children.”

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