Here’s What You Need to Know About Medicaid Work Requirements

Medicaid work requirements are coming because of HR.1, and will cut medication access for many people with HIV.

June 18, 2026 By PWN-USA

---

by Kelly Flannery; Policy Director

H.R. 1 is a federal law that slashes funding for healthcare and other basic needs programs while increasing funding for Trump’s massive deportation project. It also requires most states to add work requirements to their Medicaid programs. These new rules for assistance are coming: On June 1, the Centers for Medicare and Medicaid Services (CMS) issued an “Interim Final Rule” (IFR) about those work requirements, adding barriers that will threaten access to care for people living with HIV.

Here’s What Will Happen and Why

Under H.R. 1, many Medicaid recipients will be kicked off of the program if they cannot document that they are either exempt from the requirement or have completed 80 hours of work-related activities per month. This is why work requirements are really about *reporting,* not work. They are also a proven failure. Arkansas Medicaid work requirements, for example, were quickly reversed after 18,000 people lost coverage mere months after implementation.

Work requirements have racist roots and are a ploy to kick up to 10 million people off of Medicaid. Healthcare is a human right, and no one’s healthcare coverage should be conditioned on their ability to prove they have worked. This is why many people are trying to ensure people living with HIV and other serious health conditions are categorically exempt from the Medicaid work reporting requirement – *so they don’t risk losing healthcare coverage*. **This rule will make those efforts harder if not impossible.**

The rule is dangerously restrictive in defining who is exempt from work requirements because it adds an *additional* requirement that people *prove* they cannot work because of their health condition. What counts as being “significantly impaired” by a health condition is a subjective call that invites inconsistent and biased assessments of who is “able” to work. The rule is invasive and leaves people living with HIV and other serious medical conditions at risk of losing life-saving coverage because of paperwork and bureaucratic barriers.

We can still fight this dangerous rule by demanding that CMS make it easier, not harder, for people to maintain Medicaid coverage.

Here are two immediate actions you can take to push back against these harmful work requirements:

- Join PWN members and allies across the country for a PHONE ZAP on Thursday, June 25 from 2-3PM ET/1-2pm CT. We're going to flood their offices with calls and demand they protect access to HIV care, treatment, and Medicaid. Register here.
- Use the AIDS United Action Alert to call Congress to demand that CMS immediately delay and redraft the Medicaid work reporting requirement Interim Final Rule.
