

MEDICAID WORK REQUIREMENTS

MEDICAL FRAILTY

January 14th, 2026

Enacted H.R. 1. Legislation: Section 71119. Requirement for states to establish Medicaid community engagement requirements for certain individuals.

Categorical Exemptions

Ages <19 or >64
Pregnant / Postpartum
Foster youth & former foster youth under age 26
Parents, guardians, caretakers of dependent child <14 or disabled individual
Blind, disabled, medically frail*
Medicare Part A or Part B
Non-exempt & compliant with TANF/SNAP work requirements
Participant in drug/alcohol treatment center
Short-term hardship events (LTC, IP, national emergency, ...)
Recent release from incarceration w/in 90 days
Members of a Tribe
Veteran with disability

Work Requirement Criteria

Monthly income at least minimum wage x80 hours
≥80 hours work
≥80 hours community service
≥80 hours work program
Enrolled in educational program (at least half-time)
Any combo. of activities above for ≥80 hours

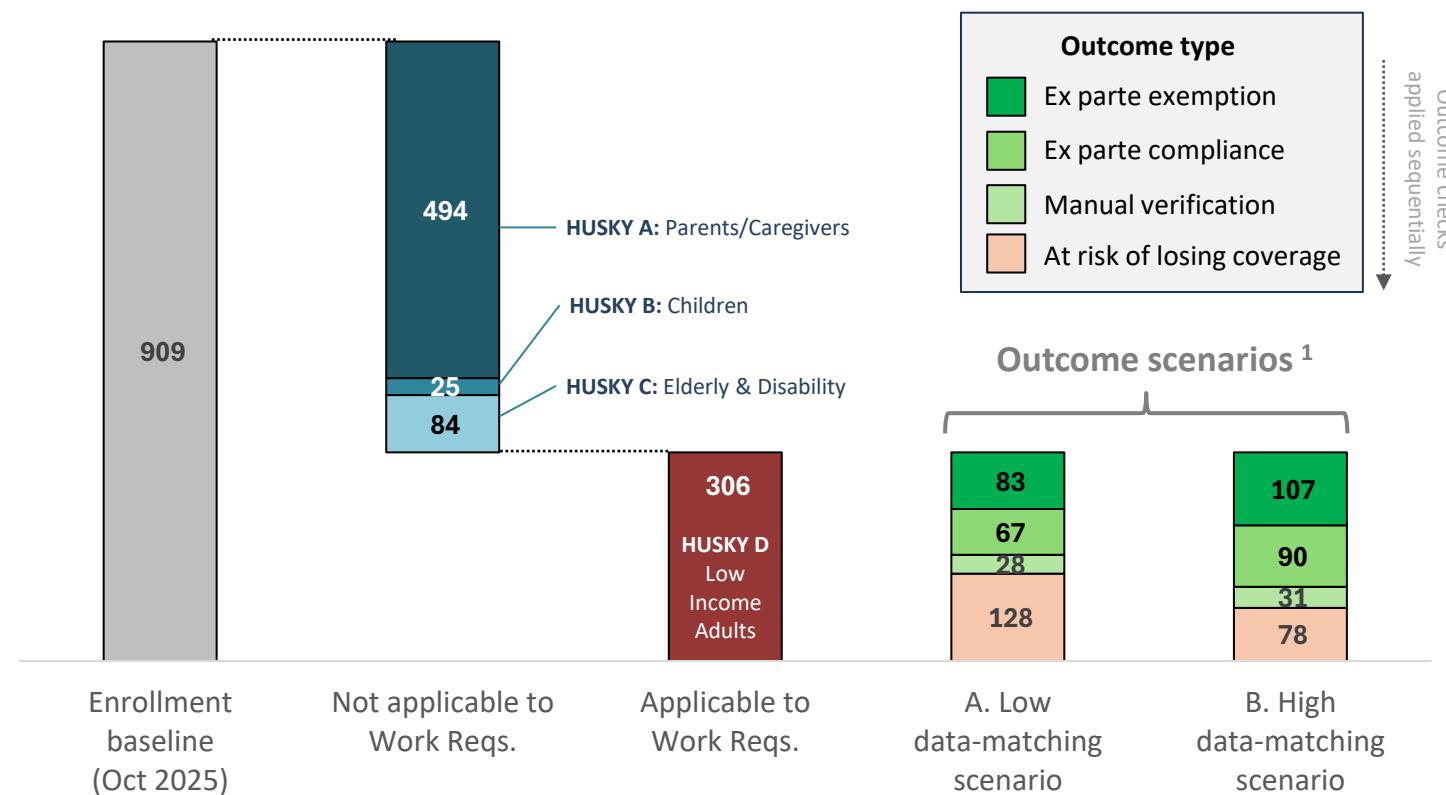
* Includes substance use disorder, disabling mental disorder, at least 1 activity of daily living (ADL) limitation, and complex medical conditions.

9-14% of Connecticut Medicaid members may be at risk of losing coverage

- Oct '25 HUSKY Health enrollment from [CT.gov Medical Benefit Plan dashboard](https://CT.gov/MedicalBenefitPlan)
- Per CMS guidance, work requirements are only applicable to the Medicaid expansion group (HUSKY D)
- Outcome scenario assumptions are tracked in detail on the next slide
 - **“Low” Data-matching:** Assumes 42% of HUSKY D members lose coverage
 - **“High” Data-matching:** Assumes 25% of HUSKY D members lose coverage

Estimated impact of Medicaid work requirements in Connecticut

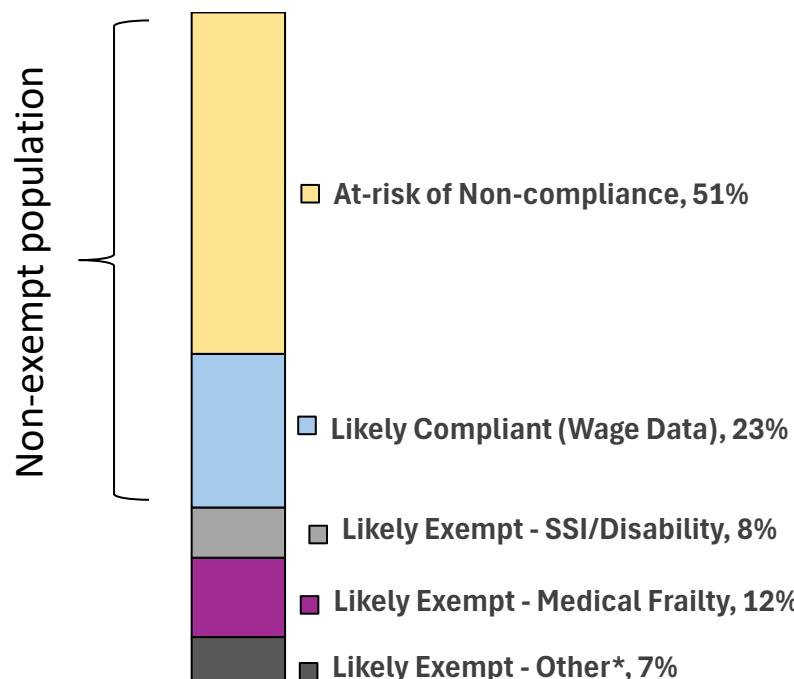
thousands



Per CMS, enacted H.R.1 legislation only impacts Medicaid expansion adults (HUSKY D).

Applicable Population: Low Income Adults

Based on HUSKY D (X02) membership in July 2025 (n=318k)



Low Income Adults X02: HUSKY D	Count July 2025	Percentage
Likely Exempt: SSI/Disability	24 k	8%
Likely Exempt: Medical Frailty	38 k	12%
Likely Exempt: Other ¹	22 k	7%
Likely Compliant: Wage Data	73 k	23%
At-risk of Non-compliance	162 k	51%
Total	318 k	100%

Notes

- Ex parte verifications via SNAP are not currently included in the sizing above due to evolving SNAP Work Requirement policies.

¹ Other exemption criteria include age (not 19-64), Medicare participation, cash assistance (e.g., SAGA), and non-Medicaid expansion. Other exclusion criteria for future consideration include drug/alcohol treatment center, recent release from incarceration, Tribe members, veteran with rated disability, and parent/caretaker of individual with disability.

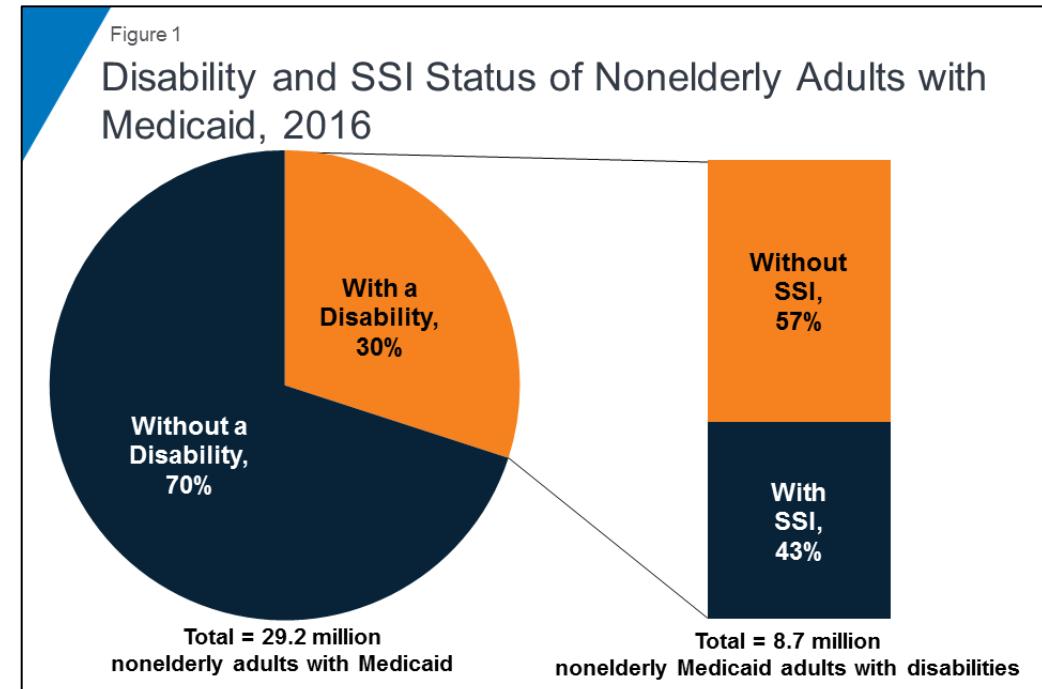
Medical Frailty

Defined in 42 CFR §440.315(f) as having any of the following...

- Substance use disorder
- Disabling mental disorder
- Physical, intellectual, or developmental disability that significantly impairs 1 or more activities of daily living
- Serious or complex medical condition
- Blind or disabled (per SSA §1614)

Initially defined in 2006 with the introduction of “alternative benefit plans” (ABPs).

Currently, 12 states must determine medical frailty as part of their ABP offerings.



NOTES: Includes non-institutionalized nonelderly adults ages 19-64. Disability includes difficulty with hearing, vision, cognitive functioning, mobility, self-care, or independent living.

SOURCE: Kaiser Family Foundation analysis of the 2016 American Community Survey, 1-Year Estimates.

KFF
HENRY J. KAISER
FAMILY FOUNDATION

Per KFF, “**over half** of nonelderly Medicaid adults with disabilities do not receive federal Supplemental Security Income (SSI) benefits, despite reporting serious difficulty in at least one ACS [American Community Survey] functional area.”¹

¹ Musumeci BM, Chidambaram P, O’Malley Watts M. “Key State Policy Choices About Medical Frailty Determinations for Medicaid Expansion Adults.” KFF. June 26, 2019. [Link](#).

Medical Frailty

Verifying the exemption could rely on multiple data sources:

- ❖ **Initial enrollment**
 - Self-attestation
 - Provider verification

- ❖ **Re-enrollment**
 - Self-attestation
 - Provider verification
 - Claims analysis

Plan to receive additional guidance from CMS in June 2026

According to KFF, only 2 states (Michigan & Indiana) have used claims data for medical frailty checks.¹

“Medical Frailty” Check	HUSKY D Members Approx. 1-year (Sep 2024-Sep 2025)
Claims <i>Michigan diagnosis codes (n=461); Sep 2024 – Sep 2025</i>	51.6 k
Self-attested <i>Health Risk Questionnaire (HRQ);² May 2024 – Sep 2025</i>	1.1 k
Total members <i>0.3k overlap (claims & self-attested)</i>	52.4 k

Medical Frailty Category	Diagnosis Codes <i>ICD-10 codes</i>
Disabling mental disorder	51
Physical, intellectual, or developmental disability	191
Serious or complex medical condition	83
Chronic substance-use disorder	136
Blind or disabled (per SSA §1614)	<i>Part of “Physical, intellectual, or developmental disability”</i>
Grand Total of ICD-10 codes	461

¹ Musumeci BM, Chidambaram P, O’Malley Watts M. “Key State Policy Choices About Medical Frailty Determinations for Medicaid Expansion Adults.” KFF. June 26, 2019. [Link](#).

² Health Risk Questionnaire (HRQ) available through CHNCT outreach includes self-attested status for ... deaf; blind; and/or difficulty with walking, dressing, or errands.

Medical Frailty

Claims analysis continues to evolve, including...

- ❖ **Clinical review of additional diagnosis codes**
 - 18 additional codes appear to identify >30k additional HUSKY D members (see table)
- ❖ **Complex medical condition definitions**
 - Potentially use existing CHNCT systems for identifying complex, high-risk members for care management programs
- ❖ **Pharmacy & procedure codes**
 - Pharmacy claims for FDA-approved meds for opioid use disorder or alcohol-use disorder
 - Procedure codes for medication assisted treatment; durable medical equipment (e.g., wheelchairs); home health aides; etc.

Color Legend	Disabling mental disorder
Relevant medical frailty category	Physical, intellectual, or developmental disability
	Chronic substance-use disorder

Dx Code n = 18	Additional Diagnosis to Consider <i>Not in Michigan diagnosis set</i>	Newly IDed Members* Thousands
F1120	Opioid dependence, uncomplicated	9.8
F32A	Depression, unspecified	7.1
F4310	Post-traumatic stress disorder, unspecified	6.4
F1020	Alcohol dependence, uncomplicated	4.5
F329	Major depressive disorder, single episode, unspecified	2.7
F1420	Cocaine dependence, uncomplicated	2.4
F319	Bipolar disorder, unspecified	2.3
Z79891	Long term (current) use of opiate analgesic	2.2
F330	Major depressive disorder, recurrent, mild	2.0
F1220	Cannabis dependence, uncomplicated	1.8
Z743	Need for continuous supervision	1.6
F1920	Other psychoactive substance dependence, uncomplicated	1.5
F1121	Opioid dependence, in remission	1.4
F1021	Alcohol dependence, in remission	1.4
F1190	Opioid use, unspecified, uncomplicated	1.2
F39	Unspecified mood [affective] disorder	1.2
F3181	Bipolar II disorder	1.2
F339	Major depressive disorder, recurrent, unspecified	1.2
Total	Distinct members	33.2

* Number of members not previously identified using Michigan diagnosis codes.