Changes to Medicaid

In July 2025, Congress passed a new law that changes some Medicaid rules. The following changes will start on January 1, 2027. They may affect some people who apply for or receive Medicaid.



Three Important Changes

1. **Medicaid Renewals Every Six Months**
   Some adults ages 19-64 will need to have their Medicaid eligibility checked every six months to make sure they still qualify.
2. **Work and Community Engagement**
   Some adults ages 19-64 who do not have a child under age 14 living with them must show that they meet Medicaid work requirements. These requirements will be checked:
   - When applying for Medicaid
   - When renewing Medicaid
   - When there are changes to a person's Medicaid eligibility between renewals
3. **Changes to Retroactive Medicaid** Retroactive Medicaid helps pay for medical bills from before a person applies for Medicaid. Starting in 2027, the amount of retroactive coverage available will be reduced. Currently, Medicaid may cover medical expenses from up to three months before the application month.



Who Does Not Have to Meet the Work Requirement?

Some people may be excused from the work requirement. You may qualify for an exemption if you:

- Care for a child under age 14.
- Care for a person with a disability.
- Are pregnant or receiving postpartum Medicaid coverage.
- Are a member of American Indian or Alaska Native tribe.
- Are a veteran with VA-approved total disability.
- Are receiving treatment for alcohol or substance use disorder.
- Were in prison or jail within the last 4 months.
- Were in foster care and are under the age of 26.
- Already meet Temporary Assistance for Needy Families (TANF) work requirements.
- Receive Supplemental Nutrition Assistance Program (SNAP) and must meet SNAP work requirements.
- Have serious physical, developmental, intellectual, or mental health conditions that make it difficult to work or complete daily activities.



Temporary Hardship Exemptions

You may also qualify for a temporary exemption if you:

- Recently stayed in a hospital, nursing facility, assisted living facility, personal care home, psychiatric, or another residential care setting.
- Need to travel for treatment of a serious health condition for yourself or a dependent family member.

What are the Medicaid Work Requirements?

To meet the work requirement, you must complete at least 80 hours each month of one or more of the following activities:

- Working
- Volunteering or performing community service
- Take part in a job training program
- Attending school at least part-time

You may also meet the requirement if your household earns at least $580 per month. Seasonal workers may qualify based on their average monthly income.

How Do I Report My Work Activity or Exemption?

Starting in 2027, applicants and Medicaid members may need to report their work activity or exemption when they apply and when they renew coverage.

The Pennsylvania Department of Human Services (DHS) will try to verify information using records already available. If more information is needed, DHS will send a letter. You will have 30 days to respond to the letter.

You can provide information in these ways:

- Call PA DHS to report at 877-395-8930 (or 215-560-7226 in Philadelphia).
- Upload documents through the COMPASS website or the myCOMPASS PA mobile app.
- Mail or bring documents to your local County Assistance Office.

How Can I Prepare?

1. **Keep your address up to date:** Log in to COMPASS at www.compass.dhs.pa.gov or use the myCOMPASS app to make sure your address and contact information are correct.
2. **Update your address with USPS:** If you move, update your address with the U.S. Postal Service. This helps make sure you receive important mail from DHS. You can update your address at USPS.com/move.
3. **Sign up for DHS text and email alerts:** Visit dhs.pa.gov/text to sign up for text messages and emails about your benefits.

Learn More: For more information, visit the PA DHS Medicaid Changes FAQ page: https://www.pa.gov/agencies/dhs/resources/medicaid/faq-medicaid-changes