Washington State Health Care Authority

H.R.1 webinar frequently asked questions (FAQ)

All the information presented in this FAQ is preliminary and subject to change. The Centers for Medicare and Medicaid Services (CMS) is the federal agency that provides rules and guidance to implement changes to Washington Apple Health (Medicaid) programs. Formal and final guidance will be released when CMS issues the Interim Final Rule, expected by June 2026.

Work requirements

Is there an exemption to work requirements for people with disabilities?

Yes. Both veterans with 100% total disability and individuals who are medically frail are exempt. See slide 14 of the February 26, 2026 webinar for the full list of work requirement exemptions.

Does the Foundational Community Supports (FCS) employment program meet the qualification of a work program?

Yes. More details will be provided as we receive guidance from CMS.

Does self-employment income, such as driving for DoorDash, meet work requirements?

All income types are countable for work requirements, including self-employment. The Health Care Authority (HCA) is waiting for CMS guidance regarding how we should calculate and verify work requirement hours for self-employed individuals, specifically those who report monthly income less than $580.

Does the $580 monthly income include social security income such as Social Security Disability Insurance (SSDI) or Old-Age, Survivors, and Disability Insurance (OASDI)?

Yes. All Modified Adjusted Gross Income (MAGI) income types apply toward the $580 monthly amount. Those receiving disability are likely on an Apple Health Classic Medicaid program and are already exempt from work requirements.

Will income from interest or retirement money payments meet work requirements?

Yes. Interest and retirement income such as Social Security will count as meeting work requirements when the monthly income is at least $580 per month.

Is there a period after substance use disorder (SUD) treatment during which individuals will continue to receive Apple Health coverage before work requirements begin?

If treatment ends, individuals may continue to meet an exemption. The exemption for medically frail includes substance use disorder.

Does HCA plan to apply for a waiver to delay the implementation of work requirements?

HCA is awaiting CMS guidance on good-faith waivers, which may delay implementation of work requirements.

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How will work requirements impact individuals with intellectual disabilities who receive Apple Health?

Individuals on Apple Health for Adults with intellectual disabilities may meet the medically frail work requirements exemption. Work requirements do not apply to individuals who receive Developmental Disability services through the Department of Social and Health Services (DSHS).

How does this impact clients on workers' compensation (L&I) or unemployment?

We are awaiting more guidance from CMS on Labor and Industries (L&I) workers compensation. All countable MAGI income, including unemployment income, counts toward the monthly income minimum of $580 per month.

If a client is on Aged Blind Disabled (ABD) coverage, are they considered disabled for purposes of avoiding work requirements?

Work requirements do not apply to individuals receiving ABD medical coverage. Individuals receiving Apple Health for Adults and ABD cash may meet a work requirement exemption.

Do Supplemental Nutrition Assistance Program (SNAP) recipients need to meet work requirements?

No. SNAP recipients do not have to meet separate health care coverage work requirements to maintain their food assistance.

Do clients applying for Apple Health Emergency Medical (AEM) services need to meet work requirements?

No. Individuals applying for AEM are not subject to work requirements.

Will AEM coverage for ongoing cancer and dialysis treatment end in January 2027?

No. Ongoing AEM coverage for cancer and dialysis will not end in January 2027.

How will patients provide proof that they meet work requirements?

If self-attestation or an exemption cannot be verified through data sources, patients may receive a request for information letter. They will have 30 days to submit documentation to their Washington Healthplanfinder application through available methods, including email, mail, and in-person. Additional time may be available upon request.

Do medically frail individuals need to renew every 6 months?

Yes. All individuals receiving Apple Health for Adults will need to renew their coverage every six months unless they are American Indian/Alaska Native (AI/AN), who will continue to receive 12 months of coverage.

Will there be increased emphasis on supportive employment services to help people transition to the work/volunteer requirements?

HCA is developing communications and resources, including a detailed webpage with options for meeting the work requirements.

What is a "short-term hardship" work requirement exemption?

Short-term hardships include:

- A recent stay in a facility such as a hospital or nursing home for part or all of a month.
- Living in a county with a high unemployment rate.
- Living in a county where a disaster has been declared by the president.
- Having to travel outside their community for health care.

What if someone can't find a job and has no income? Do job search efforts count toward work requirements?

Income is not the only way to meet the work requirements. Other ways include:

- Volunteering or completing at least 80 hours of community service.
- Participating in a work program for at least 80 hours per month.
- Enrolling in an education program at least half-time.
- Completing a combination of these activities totaling 80 hours per month.

How will community service or educational programs be verified?

Individuals will report their circumstances through Washington Healthplanfinder. If not verified through data sources, documentation may be required within 30 days.

HCA is awaiting CMS guidance on acceptable forms of verification for community service and educational programs.

Does working with Division of Vocational Rehabilitation (DVR) to seek employment count toward the work requirement?

Yes. Work programs through DVR meet work requirements.

What ages are exempt from work requirements?

Individuals are exempt from Apple Health for Adults work requirements when they are:

- Under 19
- 65 and older

Do AI/AN individuals need to be enrolled with a federally recognized Tribe to be exempt from work requirements?

No. Enrollment in a federally recognized Tribe is not required. HCA accepts self-attestation of AI/AN status, and this will not change for work requirements.

Individuals can attest to AI/AN in Washington Healthplanfinder in two ways:

1. By selecting race.
2. By answering the AI/AN question later in the application.

The Medicaid definition for AI/AN is:

- Enrolled in a federally recognized Tribe
- Descendent
- Disenrolled
- Non-enrolled
- Members of Organized Indian Groups

The language for the work requirements does not refer to federally recognized Tribes. A member may also refer to other organized groups of Indians including tribes, bands, or groups terminated since 1940, recognized now or in the future by the state in which they reside.

Income and verification

What is the income limit for Apple Health?

The income limit for Apple Health for Adults is 138% of the federal poverty level. View the Apple Health Income and Resource Standards for monthly income limits.

Is income verified or self-attested?

Income is self-attested and then verified by a cross match of systems. If it cannot be verified, the individual needs to provide proof of the self-attested income.

Are Apple Health benefits terminated retroactively?
No. If review finds the individual is ineligible, Apple Health coverage ends with advance notice provided to the individual. Historical coverage is not retroactively terminated.

Does Apple Health coverage continue during the 30-day information request period?
Coverage is maintained during the 30-day period after a request for information is sent. Coverage may end if proof is not provided after a full redetermination. Advance notice is provided with hearing rights.

Does the 6-month renewal apply to Apple Health for Kids with premiums (CHIP)?
No. Six-month redeterminations only apply to Apple Health for Adults; it does not apply to other programs such as the Children's Health Insurance Program (CHIP).

What if someone is paid in cash, has no pay stubs, or is paid under the table?
"Under the table" pay is considered self-employment. For self-employed individuals who have not filed their taxes, or whose tax return is not an accurate reflection of earnings, then a current profit and loss statement is acceptable proof of self-employment income.

What if someone does not file taxes?
Tax returns are not the only acceptable proof of income. Other verification may include employer statements, wage stubs, or profit and loss statements. For more information about acceptable income documentation, visit HCA's chart of acceptable documents webpage.

Immigration and noncitizen eligibility

For non-U.S. citizens, what is the difference between "lawfully present" and "non-lawfully present"?
For detailed information on the difference between immigration statuses, view HCA's citizenship and immigration status guide.

How does H.R.1 affect trafficking survivors who have an Office on Trafficking in Persons (OTIP) letter or a T Nonimmigrant Status (T-Visa)?
H.R. 1 eliminates Apple Health eligibility for trafficking survivors regardless of their Health and Human Services (HHS) certification or T-Visa status, unless the individual becomes a lawful permanent resident, becomes pregnant, or is a child under age 19.

Are unaccompanied refugee minors (URM) still eligible to receive Apple Health?
Yes. URM youth with alumni foster care are eligible to continue receiving Apple Health even if their pathway is through an OTIP letter.

Will individuals be eligible for benefits if they are not a lawful permanent resident? For example, someone with a temporary status/permit or asylum.
H.R.1 limits Apple Health eligibility to lawful permanent residents, Cubans, Haitians, and Compact of Free Association (COFA). Children and pregnant individuals continue to be eligible regardless of immigration status.

Are there changes to the exemptions to the 5-year bar?

H.R.1 limits the exemption to the 5-year bar to Cuban/Haitian and COFA. However, individuals who currently have an immigration status that is exempt from the 5-year bar such as refugee or asylee will continue to be eligible for Apple Health if they adjust to permanent resident status.

Renewals and notices

When do 6-month renewals begin?

Six-month renewals are effective January 1, 2027, and will take place at the client's next renewal period. The change will not affect the client until their coverage is renewed in 2027.

Will Apple Health clients be notified about the H.R.1 changes?

Yes. HCA is developing a robust communication, outreach, and education plan with the goal of keeping members informed ahead of changes that impact their eligibility.

How many letters will clients receive?

Individuals enrolled in Apple Health for Adults will receive:

- An informational letter about upcoming work requirements.
- Required renewal notices.

Do incarcerated individuals need to do 6-month redeterminations?

Yes. Everyone ages 19 to 64 on Apple Health for Adults needs to complete the 6-month redeterminations, unless they are AI/AN. This includes individuals who have their coverage suspended while incarcerated.

Do individuals in nursing facilities need to do 6-month redeterminations starting at the same time as everyone else?

Yes. Clients enrolled in Apple Health for Adults will have the same redetermination timeline effective January 1, 2027, unless they are AI/AN.

Do individuals on long term services and supports need to apply for Apple Health every 6 months or every 12 months?

Effective January 1, 2027, individuals receiving long term services and supports (LTSS) who are on Apple Health for Adults must complete a renewal every 6 months, unless they are AI/AN.

Will ProviderOne show that clients are due for renewal?

Yes. For more information on ProviderOne, visit HCA's ProviderOne Billing and Resource Guide webpage.

What about post-eligibility review?

ProviderOne does not display information about post-eligibility reviews. Requests for information are found in the client's Washington Healthplanfinder message center.

Has HCA decided on a look-back period: 30 or 90 days?

There are two different look-back periods:

- **Application:** the client must meet the work requirements in the month prior to application.
- **Renewal:** the client will only need to meet the work requirements or an exemption in one of the months from their last 6-month certification period.

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Special populations: ABD, disability, SUD

Are individuals in mental health treatment or with Serious Mental Illness (SMI) exempt from work requirements?

Yes, they are exempt. A disabling mental disorder is included in the definition of medically frail.

Are clients who receive Social Security Income (SSI) subject to work requirements?

No.

Does End Stage Renal Disease (ESRD) requiring kidney dialysis qualify as medically frail?

HCA is working to determine the full list of conditions that meet the definition of medically frail.

Does opioid use disorder (OUD) qualify as medically frail?

Yes, OUD is included in the definition of medically frail.

When and how will we be notified once there is clarification on the definition of medically frail?

Any updates regarding Apple Health programs will be shared. Sign up for Apple Health general eligibility updates to get the latest information on work requirements, exemptions, and outreach efforts.

Is there a distinction between different types of SUD treatment eligible for exemption from the work requirements, such as inpatient or outpatient?

HCA is awaiting CMS guidance for acceptable settings for SUD treatment and rehabilitation programs.

Do individuals with documented disabilities who are not currently receiving ABD, SSI, or SSDI qualify as medically frail?

Self-attestation of medically frail will be accepted and verification will be attempted by using data sources. If data sources cannot confirm an individual's self-attestation, they may be required to provide proof.

Do individuals in assisted living need to meet work requirements?

No. Individuals in assisted living receive Apple Health through Long Term Services and Supports (LTSS). They are exempt from work requirements and likely considered medically frail.

Are caregivers of individuals with disabilities exempt from work requirements?

Yes. Parents and caregivers of a person with disabilities are exempt from work requirements, regardless of family household size.

Are there changes coming to the HCA Volunteer Assister Program?

No changes are being made to the HCA Volunteer Assister program. To learn more about the program or become a volunteer community assister, visit Community-based training.

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Programs and systems

Are retroactive coverage periods changing?

Yes. Effective January 2027, the retroactive period is reduced to:

- One month for Apple Health for Adults
- Two months for all other Apple Health programs

Are COFA individuals still eligible for Apple Health?

Compact of Free Association (COFA) islanders remain eligible for all Apple Health programs. Medicaid eligibility for COFA islanders was restored in December 2020.

How does Apple Health relate to Medicaid?

In Washington state, Medicaid is called Apple Health.

Other questions

Are special enrollment periods available when an individual loses Apple Health?

Yes. The Health Benefits Exchange (HBE) offers special enrollment periods for individuals who are no longer eligible for Apple Health. To avoid a gap in coverage, the individual must select a new health plan though Washington Healthplanfinder within 60 days of losing Apple Health coverage. Learn more about special enrollment periods at Washington Healthplanfinder.

Employer health insurance

Individuals whose employer offers health insurance should contact their employer to determine whether they qualify for a special enrollment period to enroll in an employer-sponsored plan.

Not meeting work requirements

Individuals whose Apple Health coverage ends because they do not meet work requirements are not eligible for advance premium tax credits (APTC).

View Getting Enrolled with a Special Enrollment Period for more information.

How will postpartum and infant coverage be affected under H.R.1?

- Apple Health for Newborns is not changing. Babies whose birthing parent is receiving Apple Health at the time of birth receive 12 months of Apple Health coverage. See Apple Health for Kids, with and without premiums for more information.
- Individuals receiving After-Pregnancy Coverage (APC) are not impacted by these changes except for the retroactive period which will be reduced to two months. See After-Pregnancy Coverage for more information.

Can individuals reapply if their Apple Health coverage ends?

Individuals may reapply at any time. Retroactive coverage may be provided when there are gaps in coverage and unpaid medical bills.

Is there an eligibility appeals process?

Yes. View more information about filing an appeal.

Will this impact 1619b or Apple Health for Workers with Disabilities (HWD)?

Yes. The retroactive coverage periods change impacts HWD. Effective January 1, 2027, the retroactive period for HWD will be reduced to two months.