

**Congress is considering adding work requirements (“community engagement”) as a condition for Medicaid eligibility.**

**This shortsighted proposal will hurt people with mental illness and substance use disorders.**

**Myth: Most people on Medicaid don't work.**

**Reality: More than 90% of adults with Medicaid coverage are either already working, caregivers, students, or unable to work due to illness. <sup>[1]</sup>**

- 64% are working full or part time
- 29% are not working due to caregiving/disability/illness or in school
- 8% are not working due to retirement, inability to find work, or another reason

**Myth: Exemptions will protect people with mental illness and substance use disorders.**

**Reality: Exemptions mean more paperwork and people with mental illness will inevitably fall through the cracks.**

- The need for exemptions at all reinforces the reality that work reporting requirements are not appropriate for many people, yet proving you have a “disabling mental disorder” will be time-consuming, complex, and will vary by state.
- Some people with a mental illness who are not able to navigate the exemption process will fall through the cracks.
- Young people with early episode psychosis, for example, may not meet exemption requirements – yet access to mental health care and early intervention may keep them from ever needing to be on disability.

**Myth: Work requirements will help people on Medicaid get jobs.**

**Reality: Work requirements don't result in increased employment.**

- Employment actually declined in Arkansas when they implemented work requirements in 2018. <sup>[2]</sup>
- There are proven strategies to increase employment, like supported employment programs, that help people get and stay employed.

**Myth: Work requirements will save states and the federal government money.**

**Reality: Implementing work requirements costs tens of millions of taxpayer dollars. <sup>[3]</sup>**

- When people lose access to mental health services, costs may increase as people with mental illness are pushed into costly emergency rooms, hospitals, and jails, leading to unfunded care that burdens our local communities.

**NAMI believes in the dignity of work, but the only “work” that work requirements create is more paperwork.**

**NAMI urges policymakers to reject policies that take Medicaid away from people who don't meet a work requirement.**