



# Updated: Who Could Be Affected by Kentucky's Medicaid Work Requirements, and What Do We Know about Them?

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**This brief revises our earlier analysis on who could be affected by Kentucky's Medicaid work requirements based on new information posted on Kentucky's website. We no longer include non-SSI dual Medicare and Medicaid enrollees in our main analysis and have revised all estimates in the text, tables, and appendix accordingly. We also discuss the waiver notices and information being conveyed to Kentucky's enrollees and update information on the other states that have received approval to implement work requirements in their Medicaid programs. The previous version of this brief is still available at [urban.org](http://urban.org).**

In January 2018, the Centers for Medicare & Medicaid Services approved Kentucky's Section 1115 Medicaid demonstration waiver, which allows the state to require some beneficiaries to participate in "community engagement" activities for at least 80 hours a month to retain their Medicaid coverage.<sup>1</sup> Qualifying activities are (among others) working, participating in community service, searching for jobs, attending school or vocational training programs, or receiving treatment for a substance use disorder.<sup>2</sup> This is an unprecedented step for Medicaid, but such requirements may become increasingly common given that other states have submitted waivers that would make coverage conditional on such activities (Hahn et al. 2017). An analysis of Kentucky's Medicaid enrollment projections following the waiver's implementation estimates a 15 percent drop in enrollment by its fifth year.<sup>3</sup> Since Kentucky's waiver was approved, Indiana and Arkansas have also received approval to implement work requirements in their Medicaid programs.<sup>4</sup>

Children under age 19, adults ages 65 and older, and enrollees who qualify for Medicaid because they receive disability benefits will not be subject to work requirements. Among the remaining

nonelderly adults (those ages 19–64) in Kentucky’s Medicaid program, the groups who will be exempt from the pending work requirements include pregnant women, full-time students, people who are “medically frail,” and primary caregivers of a dependent minor or a disabled adult. Kentucky is one of 32 states (including the District of Columbia) that opted to expand Medicaid eligibility to nondisabled, nonelderly low-income adults under the Affordable Care Act (ACA). Given the exemption for primary caregivers and pregnant women in Kentucky’s waiver, the work requirement provision would primarily apply to the “expansion” group of beneficiaries.

In early March 2018, Kentucky sent notices to enrollees to alert them to the upcoming changes in Medicaid<sup>5</sup> and posted information online about who would be affected by the community engagement provisions.<sup>6</sup> The notices were sent to households in which someone may be subject to Kentucky’s new waiver provisions, and stated the following:

You may have heard that Kentucky is changing the way that Medicaid works. Kentucky Health encourages and supports activities that lead to better health and wellbeing. Please visit [Kentuckyhealth.ky.gov](http://Kentuckyhealth.ky.gov) to see if you are eligible for this new program that starts in 2018. If you are eligible, you can customize your own path to better health and success.... You will get more information in the mail before anything changes.

On the website,<sup>7</sup> Kentucky identifies a number of groups that will be excluded from the waiver, including those qualifying as aged, blind, and disabled; participating in a home and community-based waiver; and having Qualified Medicare Beneficiary status. The state also indicates that participation in the community engagement component of the waiver (also called PATH: Partnering to Advance Training and Health) will be “optional” for some groups—such as Medicaid enrollees who are pregnant, medically frail, or the primary caretaker of a dependent—but does not indicate what participation would entail for enrollees in these optional categories.

National estimates from the Current Population Survey (Garfield et al. 2017) found that among nonelderly adult Medicaid enrollees without Supplemental Security Income (SSI), approximately 60 percent were working either part or full time. Among those who were not working, 36 percent cited illness or disability as a reason for not working; another 30 percent reported taking care of an ill or disabled family member. A separate national analysis by Leighton Ku and Erin Brantley used the National Health Interview Survey to examine nonelderly, nondisabled, nonpregnant adult Medicaid enrollees and found that 36 percent of this group was neither working nor looking for work. Despite excluding enrollees receiving SSI from their analysis, Ku and Brantley note that 46 percent of nonworking adult Medicaid enrollees reported serious health problems. Their analysis also found that the primary reasons enrollees were not working or looking for work were that they were caring for a family member (29 percent) or had a disability (33 percent).<sup>8</sup>

In this brief, we use the American Community Survey (ACS) to examine the size and composition of the groups who could be affected by work and community engagement requirements in Kentucky’s Medicaid program. We estimate the number of nonelderly adult Medicaid enrollees in Kentucky neither receiving SSI nor dually enrolled in Medicare and Medicaid because the information provided by the state indicates that enrollees with either of these conditions are excluded from Kentucky’s work

requirements. We present estimates statewide and by region for Medicaid enrollees in one of three groups:

- **Group 1:** Enrollees who fall into one of three categories that would be exempt from the waiver's work requirements: they are in school, a primary caregiver of a dependent child, or a primary caregiver of a household member who is receiving SSI (meaning they likely meet the prescribed criteria for being disabled)
- **Group 2:** Enrollees who do not fall into one of these three categories and are working
- **Group 3:** Enrollees who do not fall into one of these three categories but are not working

Kentucky will exempt other groups (such as people who are pregnant or medically frail) from the work requirements, but these classifications are not available in the ACS. This means that some in the second and third groups will qualify for an exemption. Considering the potential challenges associated with obtaining exemptions, especially for medical frailty, and the difficulties nonworking enrollees may face complying with the work requirements, we expect that people in the third group would be at highest risk of losing Medicaid coverage if work requirements were implemented in their state. However, all three enrollee groups will be affected by the new requirements, given the need to understand and document exemptions and compliance with work requirements and the difficulties working enrollees may have consistently complying with the requirements. We therefore assess the characteristics of Kentucky Medicaid enrollees in each group. We focus on several characteristics that may pose barriers to documenting exemptions, obtaining and maintaining employment, or monthly reporting of completed work or community engagement hours. These characteristics include low educational attainment, health limitations, and lack of access to a vehicle and the internet.

## Key Findings

- Approximately 653,000 nonelderly adults were enrolled in Kentucky's Medicaid program in 2016. We estimate that 156,000 (or 23.9 percent) of these enrollees receive SSI or are dually enrolled in Medicare and Medicaid and would be unaffected by the waiver. About 168,000 (or 25.6 percent) are in group 1 and therefore likely exempt from the waiver's work requirements. About 165,000 (or 25.3 percent) are in group 2. The remaining 165,000 (25.2 percent) are in group 3.
- **Medicaid enrollees likely to be exempt from work requirements:** Although 40 percent of enrollees who fall into group 1 (that is, those who are exempt because they are students or primary caregivers of a dependent child or household member receiving SSI) are already working, 41 percent are in deep poverty (that is, they have incomes below 50 percent of the federal poverty level). About 18 percent have at least one serious health limitation, 40 percent have at least one serious health limitation or are living with someone who does, and 63 percent are primary caregivers of a dependent child. Some in this group may face more difficulty securing and maintaining their exemption status given that 17 percent lack access to the

internet in their household, 9 percent lack access to a vehicle, and 15 percent do not have a high school degree.

- **Medicaid enrollees potentially subject to work requirements and already working:** Among the enrollees who are in group 2 (those who are not in group 1 and are working), enrollees averaged 36 hours of work a week during the weeks they had work, far surpassing the waiver's work requirements in months in which they had at least three weeks of work. However, only about 64 percent of this group worked both 50 weeks and 20 hours a week in the previous year. Thus, 36 percent of these enrollees would not meet the minimum threshold of year-round work required by the waiver (defined as at least 80 hours a month for each month of coverage) and would be at risk of experiencing coverage gaps. Despite their employment, about 41 percent of potentially nonexempt and working enrollees had incomes below the federal poverty level.
- **Medicaid enrollees potentially subject to work requirements and not working:** Group 3 enrollees (those who are not in group 1 and are not working) are predicted to be at the highest risk of losing coverage. Forty-four percent of these enrollees are older than 50. Thirty-eight percent report one or more serious health limitations, including 18 percent who report serious problems concentrating, remembering, or making decisions and 23 percent who report serious problems walking or climbing stairs. Fifty-nine percent have at least one serious health limitation or live with someone who does. Nearly one-quarter do not have a high school degree, 25 percent lack internet access, and 11 percent lack access to a vehicle. Altogether, 74 percent of the nonelderly adults in this group do not have access to a vehicle or the internet in their household, have not completed high school, or have a serious health limitation or live with someone who does, indicating that many in this group could face substantial barriers to complying with the work requirements.

## Data and Methods

We use data from the US Census Bureau's 2016 American Community Survey, which has the requisite statistical power to conduct state and regional analyses.<sup>9</sup> We restrict our analysis sample to nonelderly adults reporting Medicaid coverage and living in Kentucky.<sup>10</sup> In our main analysis, we exclude enrollees who report receiving SSI or are dual Medicare and Medicaid enrollees because this group will be excluded from the waiver. As a point of reference, table A.1 contains the sociodemographic, labor market, health, information access, and transportation access characteristics of Kentucky's nonelderly Medicaid enrollees receiving SSI or those dually enrolled in Medicare and Medicaid.

We have proxy information for three criteria that earn an exemption from community engagement requirements in Kentucky (attending school, being the primary caregiver of a child, or being the primary caregiver of a household member receiving SSI); people meeting any of those three criteria constitute group 1 in this brief.<sup>11</sup> For our analysis, we classify all nonelderly adult enrollees who do not satisfy at least one of these criteria as "nonexempt"; they therefore would be subject to the work requirements under the waiver. Using employment status, we further distinguish between nonexempt enrollees who are likely to meet Kentucky's community engagement requirements and those who are not (groups 2

and 3, respectively). Our estimates may understate the number of enrollees expected to comply with the state's work requirements because the ACS does not capture information about community service and other activities that will count as community engagement under the waiver.<sup>12</sup>

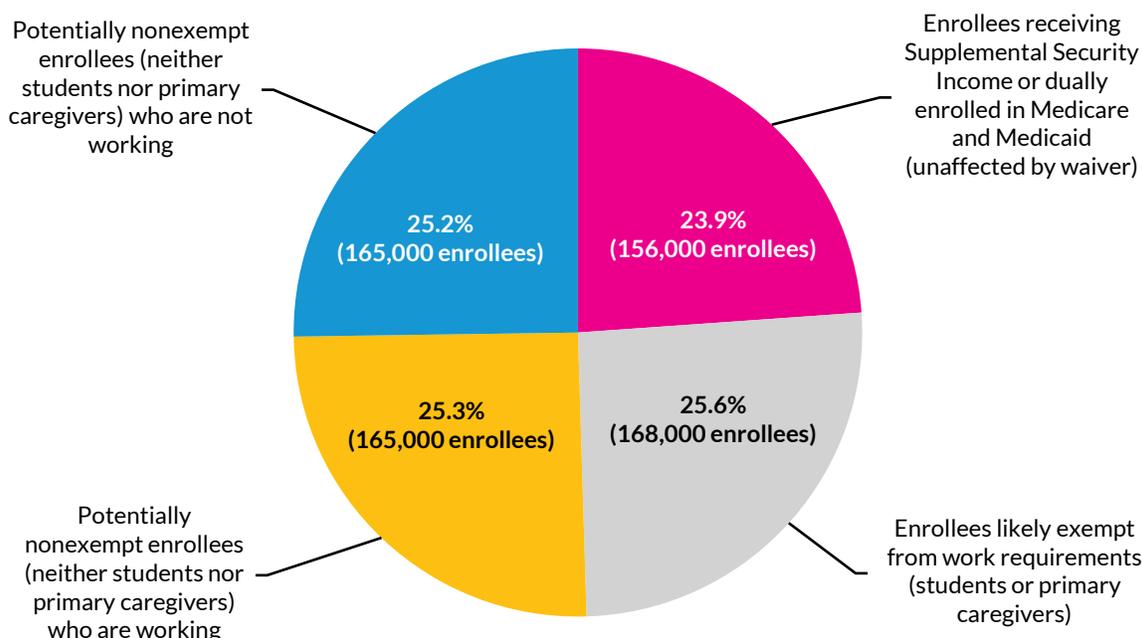
Our approach has several limitations. First, as highlighted by Burton and colleagues (forthcoming), the waiver's language defines exemptions ambiguously. For example, it is unclear which health limitations will define individuals as medically frail. Second, only full-time students are exempt from the work requirements in Kentucky, but we only observe school attendance rather than full-time status. We classify all school-attending adults as full-time students, likely leading to an overestimate for this exemption category. Third, pregnant women are exempt from the work requirements, but we cannot identify this group in the ACS. Fourth, according to the waiver's terms and conditions, someone will be deemed compliant if "the beneficiary meets the requirements of the Supplemental Nutrition Assistance Program (SNAP) and/or Temporary Assistance for Needy Families (TANF) employment initiatives or is exempt from having to meet those requirements."<sup>13</sup> We do not model how many enrollees could be deemed compliant with the waiver's work requirements under this provision because we do not have enough information on how it would be implemented.<sup>14</sup>

Fifth, we classify some enrollees as likely exempt from the work requirements because they appear to be a primary caregiver to another individual in the household who receives SSI, but we lack specific information on how the state will define primary caregivers and how it would apply the work requirements for caregivers and other optional groups who elect to participate. Sixth, we classify all nonelderly dual Medicare and Medicaid enrollees as excluded from the waiver, but there is likely measurement error in coverage reports and, as a consequence, we may be excluding some Medicaid enrollees who are not dually enrolled in Medicare and Medicaid and who would actually be affected by the waiver. We treat respondents reported to be receiving Social Security or retirement income but not reported to be receiving SSI or to be dually enrolled in Medicaid or Medicaid as potentially affected by the waiver when they may actually be excluded.<sup>15</sup> Finally, nonexempt individuals need to report 80 hours of work or community engagement activities each month to comply with the waiver's requirements. The ACS asks respondents how many hours they usually worked per week over the prior year, but it does not ask them how many hours they are working per week at the time of the survey. Estimates of the number of weeks worked per year and hours worked per week are based on employment in the past year. In addition to these issues, receipt of SSI, caregiver status, and employment may be measured with error if respondents do not accurately recall circumstances during the period of the survey or if they fail to understand survey questions. Because of these limitations, some Medicaid enrollees are likely misclassified across our groups.

# Findings

Figure 1 shows the composition of nonelderly adult Medicaid enrollees in Kentucky in 2016. Based on available survey data, we estimate that approximately 653,000 nonelderly adults in Kentucky were enrolled in Medicaid at some point in 2016. About 23.9 percent of this group, or 156,000 enrollees, were receiving SSI or dually enrolled in Medicare and Medicaid and therefore would not be affected by the new waiver. The remaining three categories of enrollees are nearly evenly split. About 25.6 percent (about 168,000) of nonelderly adult Medicaid enrollees in Kentucky are identified in the ACS as either students or primary caregivers (group 1). These enrollees will likely be exempt from the waiver’s work requirements. About 25.3 percent (165,000 enrollees) are neither students nor primary caregivers and were working at the time of the survey (group 2). The remaining 25.2 percent (about 165,000 enrollees) are neither students nor primary caregivers and were not working at the time of the survey (group 3). These individuals are likely most at risk of losing coverage.

**FIGURE 1**  
**Estimated Composition of Nonelderly Adult Medicaid Enrollees in Kentucky by Disability/Dual Enrollment in Medicare and Medicaid, Exemption, and Work Status, 2016**



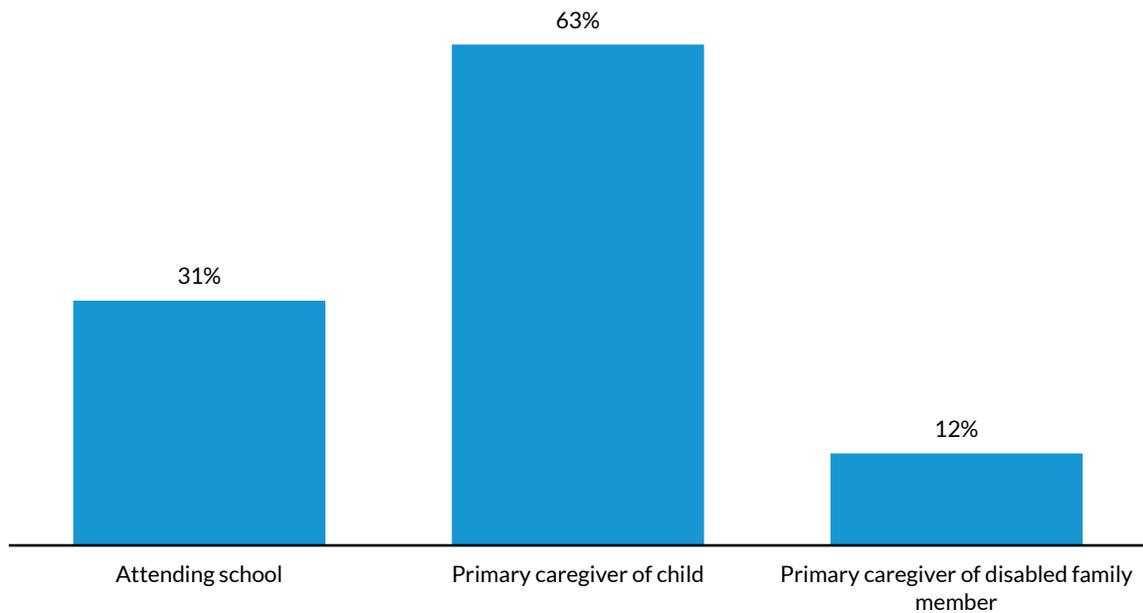
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**Source:** Urban Institute tabulations of the 2016 American Community Survey.

**Notes:** Sample limited to adults ages 19 to 64 with Medicaid coverage and residing in Kentucky. Enrollees are classified as qualifying for an exemption if they are attending school, are primary caregivers of children under 18, or are primary caregivers of disabled family members receiving Supplemental Security Income. Group population estimates are rounded to the nearest thousand. Estimates do not sum to the total estimated number of Medicaid enrollees in Kentucky because of rounding.

Enrollees in group 1, who are likely exempt from the waiver, comprise students, primary caregivers of children, and primary caregivers of family members who receive SSI. Figure 2 shows that among these, 31 percent are students, 63 percent are primary caretakers of children, and 12 percent are primary caretakers of a family member receiving SSI. The percentages do not sum to 100 because these categories are not mutually exclusive.

**FIGURE 2**  
**Exemption Category among Nonelderly Adult Kentucky Medicaid Enrollees Who Are Likely Exempt from Work Requirements (Group 1), 2016**



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**Source:** Urban Institute tabulations of the 2016 American Community Survey.

**Notes:** Sample limited to adults ages 19 to 64 who have Medicaid coverage, reside in Kentucky, do not receive Supplemental Security Income, are not dually enrolled in Medicare and Medicaid, and qualify for one of the three exemption criteria we can model. Percentages do not sum to 100 because the criteria are not mutually exclusive.

Table 1 shows the sociodemographic, labor market, health, and information and transportation access characteristics for the nonelderly adult Medicaid enrollees not receiving SSI or dually enrolled in Medicare and Medicaid in each of the three groups we define for this brief.

TABLE 1

**Selected Characteristics of Nonelderly Kentucky Medicaid Enrollees  
by Waiver Exemption and Work Status**

Enrollee characteristic	Likely exempt enrollees (group 1)	Potentially nonexempt, working enrollees (group 2)	Potentially nonexempt, nonworking enrollees (group 3)
<b>Age</b>			
Average (years)	33.21	37.41*	43.93*†
19–29	42%	34%*	23%*†
30–39	31%	25%*	15%*†
40–49	18%	20%	18%†
50–64	9%	21%*	44%*†
<b>Race and ethnicity</b>			
White, non-Hispanic	78%	84%*	87%*†
Black, non-Hispanic	15%	10%*	9%*
Hispanic	3%	2%	2%
Other race, non-Hispanic	5%	4%	1%*†
<b>Gender</b>			
Male	26%	53%*	49%*†
Female	74%	47%*	51%*†
<b>Marriage and family</b>			
Married	25%	43%*	32%*†
Divorced, separated, or widowed	27%	20%*	32%*†
Never married	48%	36%*	35%*
Childless <sup>a</sup>	30%	57%*	78%*†
Parents of children age 18 and under	70%	43%*	22%*†
Parents of children age 6 and under	37%	23%*	5%*†
<b>Income and education</b>			
Income <50% FPL	41%	13%*	42%†
Income ≥50% and <100% FPL	26%	28%	21%*†
Income ≥100% FPL	33%	59%*	36%*†
Less than high school education	15%	15%	24%*†
High school degree	37%	52%*	54%*
Greater than high school education	48%	33%*	22%*†
<b>Labor market</b>			
Employed at time of survey	40%	100%*	0%*†
Worked in prior year	57%	100%*	19%*†
Worked at least 50 weeks in prior year <sup>b</sup>	48%	68%*	7%*†
Worked at least 50 weeks and 20 hours a week in prior year <sup>b</sup>	44%	64%*	6%*†
Usual hours worked a week in prior year (if working) <sup>b</sup>	31.13	35.91*	32.38
Unemployed	11%	0%*	20%*†
Not in labor force	49%	0%*	80%*†
Looking for work	23%	21%	21%†

<b>Enrollee characteristic</b>	<b>Likely exempt enrollees (group 1)</b>	<b>Potentially nonexempt, working enrollees (group 2)</b>	<b>Potentially nonexempt, nonworking enrollees (group 3)</b>
At least one member of household is employed	75%	100%*	37%*†
<b>Health limitations</b>			
Serious difficulty concentrating, remembering, or making decisions	10%	6%*	18%*†
Serious difficulty walking or climbing stairs	9%	6%*	23%*†
Serious difficulty doing errands	6%	3%*	16%*†
Serious difficulty bathing or dressing	3%	1%*	8%*†
Blind or serious vision difficulty	3%	3%	8%*†
Deaf or serious hearing difficulty	4%	2%*	7%*†
Reports one or more serious health limitations	18%	14%*	38%*†
Reports two or more serious health limitations	10%	4%*	20%*†
Household member (including self) reports one or more serious health limitations	40%	39%	59%*†
<b>Internet and vehicle access</b>			
Household has no internet access	17%	14%	25%*†
Household has no broadband (cable/DSL/fiber-optic) internet access	37%	40%	47%*†
Household has no access to vehicle	9%	6%*	11%†
<b>Estimated number of enrollees</b>	<b>168,000</b>	<b>165,000</b>	<b>165,000</b>

**Source:** Urban Institute tabulations of the 2016 American Community Survey.

**Notes:** Sample limited to adults ages 19 to 64 who have Medicaid coverage, live in Kentucky, do not receive Supplemental Security Income, and are not dually enrolled in Medicare and Medicaid. Enrollees are classified as qualifying for an exemption if they are attending school, are primary caregivers of children under 18, or are primary caregivers of disabled family members receiving Supplemental Security Income. See the appendix for more detail on the definition of these variables. Population numbers have been rounded to the nearest thousand.

\* / † Estimate differs significantly ( $p < 0.05$ ) from exempt enrollees and potentially nonexempt working enrollees, respectively.

<sup>a</sup> Childless adults are not living with dependent children age 18 or under, but they may be noncustodial parents of children age 18 or under or parents of children age 19 and older.

<sup>b</sup> Estimates of work intensity are conditional on having worked in the prior year.

## **Group 1—Enrollees Likely Exempt from Work Requirements**

Among the group 1 Medicaid enrollees in Kentucky, the average age is 33. Seventy-three percent are under age 40. Seventy-eight percent are non-Hispanic white. Seventy-four percent are female. Twenty-five percent of these enrollees are married, while 27 percent are divorced, separated, or widowed. Seventy percent are parents of children ages 18 or younger.

More than two-thirds (67 percent) of group 1 enrollees are in poverty, and 41 percent are in deep poverty. Eighty-five percent of these enrollees have at least a high school degree. Despite their low incomes, about 40 percent of the group was employed at the time of the survey. Among those who worked in the previous year, the average number of hours worked a week was about 31 hours. About half of those working in the previous year did not work for the entire year; just 48 percent of these enrollees worked at least 50 weeks. About three-quarters (75 percent) of these enrollees are either employed or live with an employed household member.

About 1 in 10 group 1 enrollees have serious difficulty concentrating, remembering, or making decisions. Also, 9 percent have serious difficulty walking or climbing stairs. Nearly one in five report having at least one serious health limitation (18 percent), and 40 percent report that they or another household member has a serious health limitation. About 17 percent of group 1 enrollees have no internet access, and 37 percent are without broadband high-speed internet access. Nearly 1 in 10 (9 percent) do not have access to a vehicle.

## **Group 2—Potentially Nonexempt Enrollees Who Are Working**

Among group 2, the average age is 37. Relative to group 1, these enrollees are more likely to be non-Hispanic white (84 percent are) and less likely to be non-Hispanic black (10 percent are). Fifty-three percent are male, a stark difference from group 1. Forty-three percent are married, and 20 percent are divorced, separated, or widowed. In strong contrast with group 1 enrollees, about 57 percent of these adults do not have dependent children under age 18.

Although this group is less likely than those in group 1 to be in poverty, 13 percent of these enrollees are in deep poverty, and about 41 percent are in poverty. Eighty-five percent of group 2 enrollees have at least a high school degree.

Group 2 enrollees are, by definition, working at the time of the survey. We find that about 64 percent report working at least 50 weeks and 20 hours a week in the previous year. Consequently, more than one-third (36 percent) of this enrollee group does not appear to meet the minimum threshold of working 80 hours a month throughout the year and could therefore face interruptions in Medicaid coverage. In the weeks that group 2 enrollees did work, however, they worked nearly 36 hours a week, far exceeding the rate of work needed to satisfy the waiver's work requirements for months when they worked at least three weeks.

Group 2 enrollees have lower rates of serious health limitations relative to group 1 enrollees. Six percent of this group have difficulty concentrating, remembering, or making decisions, and 6 percent

have difficulty walking or climbing stairs. Fourteen percent of these enrollees report one or more serious health limitations (slightly less than the share of group 1 enrollees reporting such limitations), and only 4 percent report two or more limitations (less than half the share of group 1 enrollees). Fourteen percent of group 2 enrollees report having no access to the internet, and approximately 40 percent have no broadband internet access. Nonexempt working enrollees have better transportation access than group 1 enrollees; just 6 percent report having no access to a vehicle.

### **Group 3—Potentially Nonexempt Enrollees Who Are Not Working**

Relative to the other two groups, group 3 enrollees are substantially older. They average about 44 years old, and about 44 percent are older than age 50. Group 3 enrollees are more likely to be non-Hispanic white (87 percent are) than group 1 enrollees. Forty-nine percent of this group is male, reasonably similar to group 2. Group 3 enrollees are evenly distributed across the three marital categories: 32 percent are married; 32 percent are divorced, separated, or widowed; and 35 percent have never been married. At 78 percent, a very high proportion of group 3 enrollees is not living with dependent children age 18 or under, indicating that many likely gained Medicaid eligibility following Kentucky's Medicaid expansion under the ACA.

Forty-two percent of this group is in deep poverty, and 63 percent has incomes below 100 percent of the federal poverty level, which is closer to the income profile of group 1 than of group 2. Group 3 enrollees are relatively less educated than the two other groups, which may reflect their relatively older ages. Nearly a quarter have less than a high school education (24 percent), and just 22 percent have educational attainment beyond high school. Twenty percent are unemployed. Because no enrollee in group 3 is working, however, most (80 percent) identify as not being in the labor force. Accordingly, the share of group 3 enrollees who are looking for work (21 percent) is similar to the share who are unemployed. Just over one-third (37 percent) of these enrollees have at least one employed household member.

Although no enrollees in group 3 receive SSI or are dually enrolled in Medicare and Medicaid, they still report high rates of serious health limitations. Just under one-fifth (18 percent) report serious difficulty concentrating, remembering, or making decisions, and nearly a quarter (23 percent) report serious difficulty walking or climbing stairs. Thirty-eight percent of this group report that they have at least one serious health limitation, more than twice the rate of group 2 enrollees. Fifty-nine percent report that at least one person in the household has a serious health limitation.

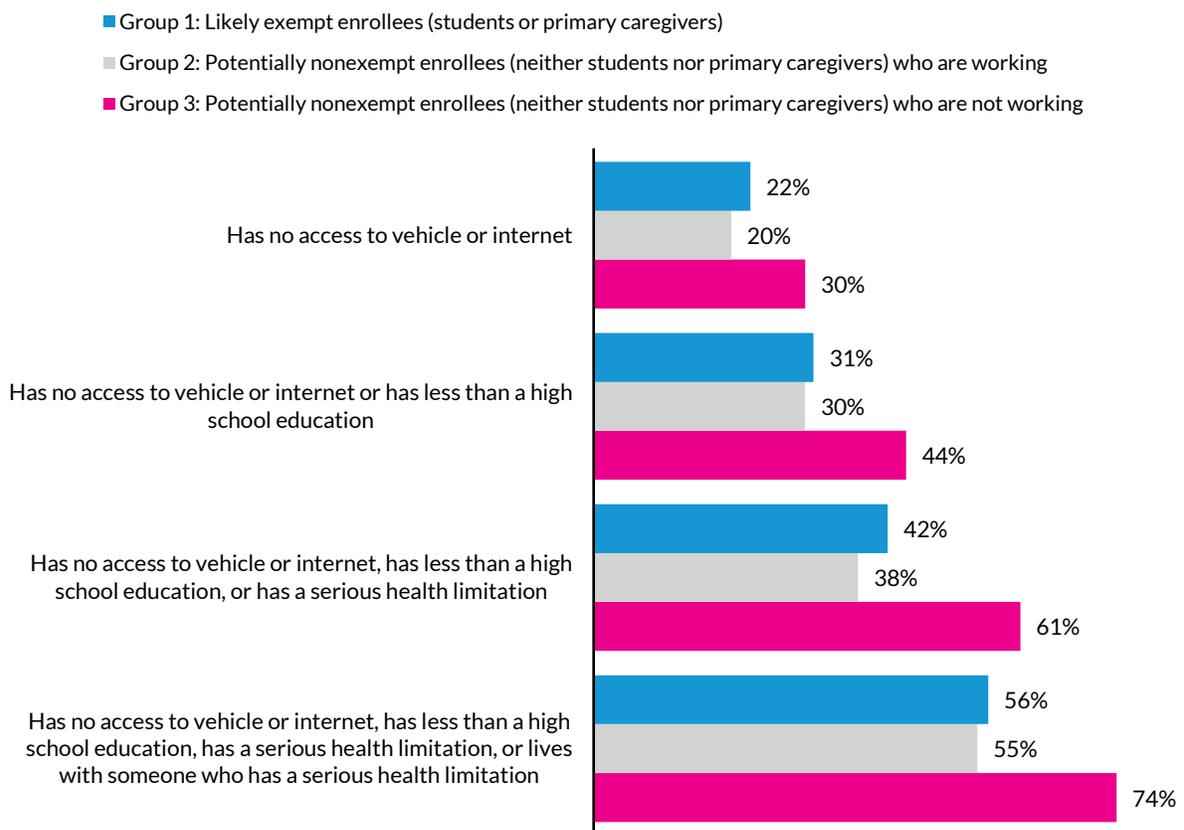
This enrollee group also faces relatively worse information and transportation access relative to the two other groups. An estimated one-quarter (25 percent) of group 3 enrollees have no internet access, and nearly one-half (47 percent) have no access to broadband internet. Eleven percent of these enrollees report having no access to a vehicle, a higher share than among the two other enrollee groups.

## Potential Barriers Facing the Three Medicaid Enrollee Groups

Table 1 identifies several characteristics, such as low educational attainment levels, serious health limitations, and limited internet and vehicular access, that may present challenges to complying with the waiver’s community engagement requirements that would be difficult for enrollees to overcome regardless of their exemption status. To maintain consistent Medicaid coverage under the pending waiver, many nonelderly adult Medicaid enrollees not receiving SSI or dually enrolled in Medicare and Medicaid would be required to either document their exemption status, obtain and retain work, or fulfill community engagement activities and report completed activity hours monthly if they are nonexempt. Figure 3 shows summary measures that combine information on vehicular and internet access, completion of high school, and presence of serious health limitations to identify some potential barriers these enrollee groups may face to complying with the waiver’s community engagement requirements.

**FIGURE 3**

### Potential Barriers Facing Nonelderly Adult Medicaid Enrollees in Kentucky



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**Source:** Urban Institute tabulations of the 2016 American Community Survey.

**Notes:** Sample limited to adults ages 19 to 64 who have Medicaid coverage, reside in Kentucky, and are not receiving Supplemental Security Income or dually enrolled in Medicare and Medicaid. Enrollees are classified as qualifying for an exemption if they are attending school, are primary caregivers of children under 18, or are primary caregivers of disabled family members receiving Supplemental Security Income.

Across all three groups, 22 to 30 percent report having no access to either a vehicle or the internet, and 31 to 44 percent report having no access to either a vehicle or the internet or have less than a high school degree. Overall, approximately three-quarters (74 percent) of the group 3 enrollees (those who do not fall into one of the three exemption categories and are not working) have no household access to either a vehicle or the internet, are less than high school educated, or have at least one serious health limitation in their household, suggesting that they may experience several challenges associated with meeting the new work requirements. Group 1 enrollees (those who are likely exempt) and group 2 enrollees (those who are likely nonexempt and are working) do not differ markedly from one another in the information and transportation barriers they face. Group 3 enrollees, however, are qualitatively worse off across all four measures relative to the other enrollee groups.

**TABLE 2**

**Nonelderly Adult Kentucky Medicaid Enrollees Exempt, Nonexempt and Working, and Nonexempt and Not Working, by Region**

Kentucky region	Likely exempt (group 1)		Potentially nonexempt, working (group 2)		Potentially nonexempt, not working (group 3)	
	Enrollees	Percent of region	Enrollees	Percent of region	Enrollees	Percent of region
Western Kentucky	22,000	31.7	27,000	38.3	21,000	29.9
Greater Louisville	13,000	29.8	18,000	42.4	12,000	27.8
Jefferson County (Louisville)	26,000	34.3	25,000	33.8	24,000	31.9
Northern Kentucky	12,000	32.4	12,000	32.4	13,000	35.2
Greater Lexington	22,000	43.5	14,000	28.8	14,000	27.7
Fayette County (Lexington)	14,000	46.1	10,000	32.4	7,000	21.5
Eastern Kentucky	39,000	30.2	37,000	28.8	53,000	41.0
South-Central Kentucky	21,000	31.8	22,000	33.5	22,000	34.7
<b>Total</b>	<b>168,000</b>	<b>33.7%</b>	<b>165,000</b>	<b>33.1%</b>	<b>165,000</b>	<b>33.2%</b>

**Source:** Urban Institute tabulations of the 2016 American Community Survey.

**Notes:** Sample limited to adults ages 19 to 64 who have Medicaid coverage, live in Kentucky, do not receive Supplemental Security Income, and are not dually enrolled in Medicare and Medicaid. Enrollees are classified as qualifying for an exemption if they are attending school, are primary caregivers of children under 18, or are primary caregivers of disabled family members receiving Supplemental Security Income. See the appendix for more detail on the definition of these variables, a reference map for each region, and the methodology for region construction. Population numbers have been rounded to the nearest thousand.

Table 2 shows the distribution of the three Medicaid enrollee groups across eight regions of the state. While the group compositions are fairly similar across regions, some differences stand out. Medicaid enrollees in Greater Lexington are less likely to be in group 2 than enrollees in the state as a whole (29 percent versus 33 percent), while enrollees in Western Kentucky and Greater Louisville are more likely to be in group 2 (at 38 percent and 42 percent, respectively). Eastern Kentucky, an area containing many persistent-poverty counties,<sup>16</sup> has the largest aggregate number of Medicaid enrollees; the distribution of enrollees across the three groups in this region is broadly similar to the distribution at the state level but with proportionately more in group 3 (41 percent vs. 33 percent, respectively). Regional differences may reflect differences in the composition of Medicaid enrollees in each region as well as differences in local labor market conditions.

## Discussion

This brief describes the demographic, income, education, labor market, and serious health limitations of nonelderly adult Medicaid enrollees in Kentucky who would be affected by the recently approved work requirements. The waiver is likely to have the greatest impact on group 3 Medicaid enrollees (i.e., those who are not students or primary caregivers of a dependent child or disabled individual and are not working). When comparing them to other groups of Medicaid enrollees, we find that this group is older and has lower incomes, less internet and vehicular access, and lower educational attainment levels. They also have a higher incidence of serious health limitations, which is notable given that our main analytic sample excludes enrollees receiving SSI and those who are dually enrolled in Medicare and Medicaid. Moreover, although the ACS captures several serious health limitations, other dimensions of enrollees' health (such as chronic illness, oral health issues, or mental health status) are not considered in this analysis, which means that we may be understating the potential job-limiting health problems that enrollees in Kentucky's Medicaid program are facing. Although some of these enrollees will likely be eligible for an exemption because of their poor health status (if they qualify as medically frail),<sup>17</sup> at this point, it is unclear how the state will determine whether enrollees qualify for an exemption based on their health status and what type of documentation will be required (Burton et al., forthcoming). In addition, at this point, it is unclear how enrollees who also receive SNAP would be deemed compliant with Medicaid's new work requirement. This could particularly affect Medicaid enrollees age 60 and older who are currently exempt from work requirements under SNAP.<sup>18</sup>

For enrollees in group 3 who will not qualify for an exemption, finding and retaining work may be challenging. An estimated 44 percent of these enrollees indicate they have no access to a vehicle, no access to the internet, or are less than high-school educated, which could limit their job prospects and make it more difficult for them to report on community engagement activities that they do fulfill. Moreover, 59 percent report either having a serious health limitation or living with someone who does, which may limit the scope of activities they can fulfill outside of the household. These considerations raise the risks that some enrollees will lose Medicaid despite qualifying for an exemption or satisfying the waiver's work requirements, which in turn could adversely affect their health and ability to work and participate in other activities.

We find that more than one-third of group 2 enrollees (those who are potentially nonexempt and working at the time of the survey) are not working at least 50 weeks a year and 20 hours a week, which would fulfill the waiver's work requirements year-round. However, these enrollees average high work output (36 hours) in the weeks that they do have work. The lack of consistent work hours may reflect high rates of turnover or a high prevalence of seasonal work among this population. Currently, the waiver indicates that if enrollees work more than 80 hours a month, the surplus hours cannot be applied to the following month. Although nonexempt enrollees can make up missed hours in the following month, complete a state-approved health- or financial-literacy course, or apply for a "good-cause" exemption, working enrollees who have problems finding consistent work throughout the year could be at risk of falling in and out of compliance with waiver's work requirements and of experiencing starts and stops in Medicaid coverage and attendant gaps in access to health care.

The approved waiver involves complex policy changes. Even if Kentucky communicates the requirements of the waiver to Medicaid enrollees as clearly as possible, the complexity of the policy and the need to document hours each month to maintain enrollment may create confusion and pose barriers that lead to enrollment reductions even among enrollees who could qualify for an exemption or who are not exempt but are in compliance. However, the information currently posted on Kentucky’s website lacks clarity in key areas, including what it will take to qualify for an exemption from the waiver (no specifics are given about how primary caregiver status and medical frailty will be defined or how exemptions will need to be documented) and what participation in the community engagement component of the waiver would entail for enrollees in groups that would have the option to participate. And the website does not clarify that the consequences of not qualifying for or obtaining an exemption could lead to a loss of eligibility and coverage. How the state operationalizes the waiver and how it communicates this to enrollees and providers—including decisions on exemptions; employment and training services, job search assistance, and related supports that will be available to enrollees; and documentation and reporting requirements and processes—will be critical to determining the impacts of these provisions on the health and well-being of low-income adults in Kentucky.

## Appendix

### Assessing Medicaid Coverage in the 2016 ACS

Estimates are derived from the 2016 ACS, an annual survey fielded by the US Census Bureau. This analysis is limited to noninstitutionalized civilians. We use an augmented version of the ACS prepared by the University of Minnesota Population Center, known as the Integrated Public Use Microdata Series, which uses the public use sample of the ACS and contains edits for family relationships and other variables (Ruggles et al. 2017).

Health insurance coverage is measured as status at the time of the survey. Though data are collected continuously over 12 months, the coverage estimates represent an average day in the calendar year. We applied a set of logical coverage edits if other information collected in the ACS implies that coverage for a sample case is misclassified; for instance, a low-income adult who does not have access to employer-sponsored insurance, is enrolled in another means-tested program, and reports private nongroup coverage but likely could not afford such coverage is reclassified as having Medicaid (Lynch et al. 2011).

Our main ACS analysis excludes Medicaid enrollees who report receipt of Supplementary Security Income and enrollees who report being dually enrolled in Medicare and Medicaid because the available information indicates that these groups of enrollees will be unaffected by the Medicaid work requirements in Kentucky. We describe the characteristics of these enrollees in table A.1.

## Classification of Nonelderly Adult Medicaid Enrollees

Using 2016 American Community Survey information from Kentucky, this analysis classifies Medicaid enrollees by waiver exemption status and, among those who are thought to be non-exempt, working status. To estimate exemption status, we identify the following groups:

- Students
- Primary caregivers of children
- Primary caregivers of family members with SSI

Identifying students is straightforward, although one discrepancy with the waiver’s language is that only “full-time” students are exempt. Full-time school-attending status is not available in the ACS. For this analysis, we have classified all individuals attending school as exempt from the waiver’s work requirements.

Regarding exemptions for primary caregivers, the Kentucky HEALTH waiver states that “primary caregiver of a dependent including either a dependent minor child or adult who is disabled (limited to only one exempt beneficiary per household).” To reflect this, the logic rules assigning primary caregiver status are the following:

1. For each child identify whether both parents are in the household.
2. Assign a parent as the primary caregiver of the child
  1. if that parent is the only parent in the household, or
  2. if both parents are in the household,
    - a. if one parent is working, assign the nonworking parent as a primary caregiver,
    - b. if both parents are working, randomly assign one parent as a primary caregiver, and
    - c. if both parents are not working, randomly assign one parent as a primary caregiver.
3. If more than one individual in the household is assigned as a primary caregiver (e.g., in households with more than one child), randomly reassign to ensure just one family member is designated as the primary caregiver (per waiver’s rule).
4. Determine whether anyone in the household is receiving SSI.
5. In families with at least one member of the household receiving SSI, randomly assign one nonelderly, nonworking adult in the household as the primary caregiver of this person.
6. Because the waiver says households can have just one primary caregiver (for either children or disabled adults), if a household already has a primary caregiver of a child, remove anyone’s status as primary caregiver of a disabled adult (per waiver’s rule).

Because we assign statuses as primary caregivers of children *first* and reassign statuses as primary caregivers of disabled household members if there are already primary caregivers of children in the

household, this approach will mechanically report more primary caregivers of children than disabled family members.

Enrollees who do not fit one of the three classification criteria listed above are classified as potentially nonexempt. We further subdivide individuals based on their working status, which we determine by individuals reporting having worked for pay in the prior week. Under the waiver, people who are not exempt from the work requirements are required to participate in 80 hours of community engagement activities a month. In the ACS, we do not observe the number of hours individuals are currently working (if any). Questions about work intensity are only asked about the previous calendar year. Thus, we simply classify whether nonexempt Medicaid enrollees are working or not working at the time of the survey.

## Descriptions of Other Measures

Income measures are developed to approximate modified adjusted gross income.

“Employed” is an indicator for whether the individual reports employment at the time of the survey. ACS measures on the hours worked (employed 50 weeks a year, employed 50 weeks a year and 20 hours a week, and usual hours worked per week) are conditional on having worked in the previous calendar year. Individuals who are not working at the time of the survey may report positive working hours in the past. In the ACS, individuals who are not working or who are temporarily absent from work are asked whether they have actively been looking for work in the past four weeks. “Unemployed” is an indicator for whether individuals are not employed and are looking for work. Individuals who are not employed at the time of the survey nor actively looking for work are counted as not being in the labor force.

The six health limitation measures in the ACS are whether respondents have serious difficulty concentrating, remembering or making decisions; serious difficulty walking or climbing stairs; serious difficulty doing errands; serious difficulty bathing or dressing; blindness or serious vision difficulty even when wearing glasses; or deafness or serious hearing difficulty.

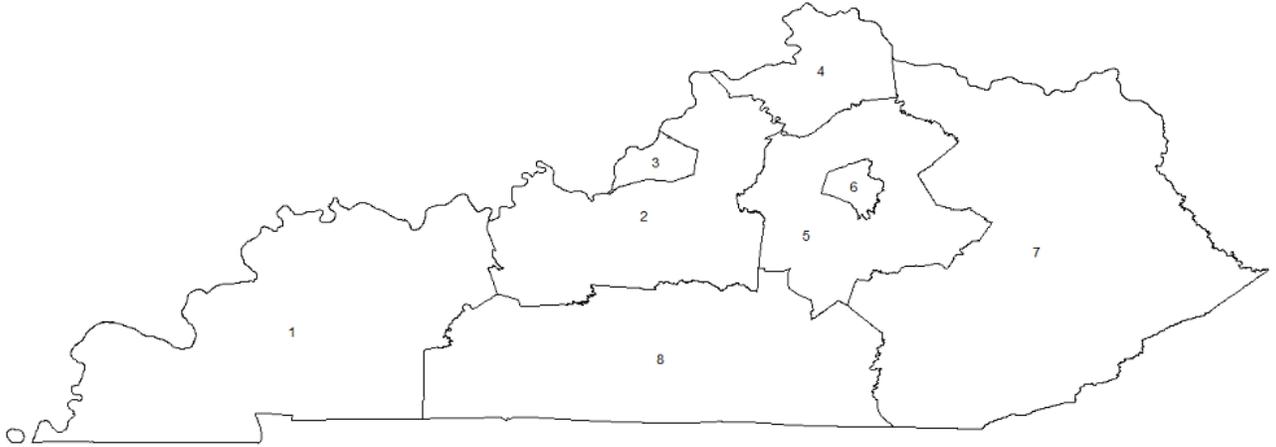
Internet access questions are assessed at the household level. Broadband internet refers to cable, DSL, or fiber-optic internet connections.

## Regional Analysis

We aggregated public-use microdata areas to designate eight substate regions. Two regions are metropolitan counties (Jefferson county, which contains Louisville, and Fayette County, which contains Lexington), and we’ve labeled areas surrounding these regions as “Greater Louisville” and “Greater Lexington.” Figure A.1 outlines the boundaries of the eight regional substate areas defined.

FIGURE A.1

Map of Kentucky Reference Regions Defined for This Analysis



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Source: Authors' delineations.

TABLE A.1

Selected Characteristics of Nonelderly Adult Medicaid Enrollees Receiving Supplemental Security Income or Dually Enrolled in Medicare and Medicaid in Kentucky

Enrollee characteristic	Enrollees with SSI or Dually Enrolled in Medicare and Medicaid
<b>Age</b>	
Average (years)	47.24
19-29	13%
30-39	16%
40-49	17%
50-64	54%
<b>Race and ethnicity</b>	
White, non-Hispanic	84%
Black, non-Hispanic	11%
Hispanic	2%
Other race, non-Hispanic	4%
<b>Gender</b>	
Male	44%
Female	56%
<b>Marriage and family</b>	
Married	27%
Divorced, separated, or widowed	40%
Never married	34%
Childless <sup>a</sup>	72%
Parents of children under age 18	28%
Parents of children under age 6	7%
<b>Income and education</b>	
Income <50% FPL	50%
Income ≥50 and <100% FPL	21%
Income ≥100% FPL	29%

<b>Enrollee characteristic</b>	<b>Enrollees with SSI or Dually Enrolled in Medicare and Medicaid</b>
Less than high school education	35%
High school degree	45%
Greater than high school education	20%
<b>Labor market</b>	
Employed at time of survey	7%
Worked in prior year	10%
Worked at least 50 weeks in prior year <sup>b</sup>	47%
Worked at least 50 weeks and 20 hours a week in prior year <sup>b</sup>	42%
Usual hours worked per week in prior year (if working in prior year) <sup>b</sup>	30.25
Unemployed	3%
Not in labor force	90%
Looking for work	3%
<b>Health limitations</b>	
Serious difficulty concentrating, remembering, or making decisions	41%
Serious difficulty walking or climbing stairs	43%
Serious difficulty doing errands	37%
Serious difficulty bathing or dressing	19%
Blind or serious vision difficulty	14%
Deaf or serious hearing difficulty	11%
Reports one or more serious health limitations	68%
Reports two or more serious health limitations	47%
Household member (including self) reports one or more serious health limitations	79%
<b>Internet and vehicle access</b>	
Household has no internet access	30%
Household has no broadband (cable/DSL/fiber-optic) internet access	50%
Household has no access to vehicle	22%
<b>Estimated number of enrollees</b>	<b>156,000</b>

Source: Urban Institute tabulations of the 2016 American Community Survey.

Notes: SSI = Supplemental Security Income. Sample limited to adults ages 19 to 64 who have Medicaid coverage, reside in Kentucky, and receive SSI or are dually enrolled in Medicare and Medicaid. Population numbers have been rounded to the nearest thousand.

<sup>a</sup> Childless adults are not living with dependent children age 18 or under, but they may be noncustodial parents of children age 18 or under or parents of children age 19 and older.

<sup>b</sup> Estimates of work intensity are conditional on having worked in the prior year.

## Notes

<sup>1</sup> Kentucky received approval to implement other new provisions for populations covered under the waiver, including premiums; “lock-out periods” of up to 6 months; required use of new health care accounts for access to vision, dental, or drug benefits; and the elimination of retroactive eligibility. See Brian Neale, [letter to Adam Meier](#), January 12, 2018. A class-action lawsuit has been filed challenging the legality of the Centers for Medicaid & Medicare Services’s approval of the Kentucky waiver. See Zachary Tracer, John Tozzi, and Erik Larson, “Trump Administration Challenged in Court on Medicaid Overhaul,” *Bloomberg*, January 24, 2018, <https://www.bloomberg.com/news/articles/2018-01-24/trump-administration-challenged-in-court-on-medicare-overhaul>.

<sup>2</sup> The waiver requires nonexempt Medicaid enrollees to report their community engagement hours monthly. Beneficiaries who do not meet community engagement hours may make up the missed hours in the following

month, complete a state-approved health- or financial-literacy course, or apply for a “good-cause” exemption. Otherwise, beneficiaries may have their eligibility suspended. See Burton et al. (forthcoming) for details on the waiver’s provisions.

- <sup>3</sup> The state’s waiver modification request projects that enrollment will drop by 1.14 million member months. See Adam Meier, “[Re: Kentucky HEALTH §1115 Demonstration Modification Request](#),” letter to Brian Neale, July 3, 2017. Solomon (2018) estimates that this is roughly equivalent to a 15 percent decrease in the number of enrollees covered for a full year.
- <sup>4</sup> See Demetrios Kouzoukas, [letter to Allison Taylor](#), February 1, 2018; Seema Verma, [letter to Asa Hutchinson](#), March 5, 2018.
- <sup>5</sup> Kentucky Cabinet for Health and Family Services, “[Kentucky HEALTH Notice Guide](#)” (Frankfort: Commonwealth of Kentucky, 2018).
- <sup>6</sup> “Is It for Me?,” Kentucky HEALTH, Commonwealth of Kentucky, <https://kentuckyhealth.ky.gov/Pages/Is-it-for-Me.aspx>.
- <sup>7</sup> “FAQ,” Kentucky HEALTH, Commonwealth of Kentucky, <https://kentuckyhealth.ky.gov/Pages/FAQ.aspx>.
- <sup>8</sup> Leighton Ku and Erin Brantley, “Medicaid Work Requirements: Who’s at Risk?,” *Health Affairs* blog, April 12, 2017, <https://www.healthaffairs.org/doi/10.1377/hblog20170412.059575/full/>.
- <sup>9</sup> For example, the 2016 March Current Population Survey has a sample size of 210 nonelderly adult Medicaid beneficiaries in Kentucky. The ACS has a sample size of 5,822, which enables state-specific and regional analysis of this population.
- <sup>10</sup> Medicaid coverage is estimated using a methodology developed by Victoria Lynch of the Urban Institute. See Kenney et al. (2012) for more details.
- <sup>11</sup> See the appendix for more detail on our methodological approach.
- <sup>12</sup> The waiver specifies the following activities as community engagement: job skills training; job search activities; education related to employment; general education; vocational education and training; self-employment; subsidized or unsubsidized employment; community work experience; community service/public service; caregiving services for a nondependent relative or other person with a disabling medical condition; and participation in substance use disorder treatment.
- <sup>13</sup> See page 33 of the approved waiver, available at <https://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Waivers/1115/downloads/ky/ky-health-ca.pdf>.
- <sup>14</sup> Self-reported estimates from the ACS suggest that of the 330,000 enrollees who are potentially nonexempt from the waiver’s work requirements, 138,000 (42 percent) were receiving assistance from SNAP in 2016, though prior research has found that SNAP receipt is underreported in the ACS (see, for example, <https://www.ers.usda.gov/publications/pub-details/?pubid=45371>).
- <sup>15</sup> For example, 97 survey respondents who are reported to have both Medicaid and Medicare coverage reported no receipt of Supplemental Security Income or Social Security income (which includes receipt of Social Security disability income). Disability is the most common pathway to dual coverage for nonelderly adults, so these 97 cases appear to reflect some type of survey reporting error. In addition, 240 Medicaid enrollees under age 62 (the earliest age at which one can collect Social Security retirement income) were reported to be receiving Social Security income, but neither Supplemental Security Income nor coverage through Medicare; these cases also appear to reflect some type of survey reporting error.
- <sup>16</sup> Persistent-poverty counties are counties where at least 20 percent of residents are in poverty. A high concentration of such counties is in the Eastern Kentucky region. For more details on this measure, see the persistent poverty section of “County Typology Codes – Descriptions and Maps,” United States Department of Agriculture, Economic Research Service, last updated May 31, 2017, <https://www.ers.usda.gov/data-products/county-typology-codes/descriptions-and-maps/#ppov>.
- <sup>17</sup> According to information that is currently available, “medically frail” individuals who will be exempt from work requirements in Kentucky will include those with a disabling mental health diagnosis, a chronic substance use disorder, a serious and complex medical condition, significant impairment in the ability to perform activities of

daily living, a diagnosis of HIV/AIDS, eligibility for Social Security Disability Insurance, chronic homelessness, or refugee status (up to 1 year after entering the US). See “FAQ,” Kentucky HEALTH.

- <sup>18</sup> Ongoing changes in SNAP rules for work requirements and time limits for able-bodied adults without dependent children make it difficult to predict who would be deemed compliant with the program’s work requirements at this juncture.

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