

Virtual Meeting Tips



Use either a computer or phone for audio connection.



Mute your line when not speaking.



Members are encouraged to turn on their cameras during the meeting.



For questions or comments, email MMAC@dhcs.ca.gov.

Medi-Cal Member Advisory Committee

Wednesday, March 4, 2026

Agenda

- | | |
|--------------------|---|
| 5:30 – 5:40 | Welcome |
| 5:40 – 5:50 | Director's Update |
| 5:50 – 7:00 | DHCS Presentation: Communications Plan for Work and Community Engagement Requirements |
| 7:00 – 7:25 | Group Discussion/Member Comments |
| 7:25 – 7:30 | Closing Remarks and Next Steps |

Welcome

Language Justice

- » One person speaks at a time.
- » Speak slowly and clearly.
- » Avoid acronyms.
- » If needed, pause when asked by meeting facilitators.
- » Raise your hand if you are not understanding the presentation.
- » Drop your comments or questions in the chat during the meeting.

Community Norms

- » **Embrace an honest, brave, and kind space.**
- » Choose collaboration.
- » **Everyone participates, no one dominates.**
- » Acknowledge and respect differing views, opinions, and experiences.
- » **Practice active listening. Don't interrupt or assume; ask for clarification.**
- » Avoid acronyms, and if we have acronyms and program names, we will explain the acronym or program before having a conversation as a group.
- » **There are no "stupid questions." We all have different levels of understanding and different perspectives.**
- » Speak your truth, without blame or judgement.
- » Attack the problem, not the person – no blame game.
- » **Be interested by the differences you hear.**
- » Check egos and titles at the door.
- » Please share what you need to feel comfortable and welcomed here.
- » Support each other and learn together as we go.
- » Stay on task, no side conversations.
- » What happens here, stays here. What's learned here leaves here.
- » **Identify pending issues and agreements at the end of the meeting.**
- » **Identify actions that result from decisions.**

Disclose Conflict of Interest

- » What is a conflict of interest?
 - When someone has a personal, professional, or financial interest that makes it hard to participate in a fair way.
- » If you have a conflict of interest, we will provide the space for you to state your situation, and we will move forward.

Director's Update

Communications Plan for Work and Community Engagement Requirements

Yingjia Huang, Deputy Director, Health Care Benefits & Eligibility
Krissi Khokhobashvili, Deputy Director, Office of Communications

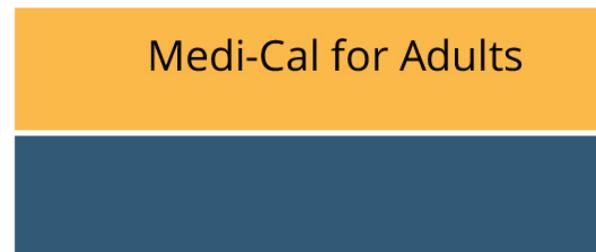
Overview

1. Reminder about which Medi-Cal members will need to follow the *Work and Community Engagement Requirements* and what those requirements are.
2. Introduction to the communications plan that will support Medi-Cal members as they learn about this new requirement.
3. Gather feedback on the plan in breakout rooms.

Who Will Need to Meet the Work and Community Engagement Requirements?

- » Low-income adults (19-64) without children or disabilities.
 - For example, a person making under \$21,597 will need to follow the new requirement.
- » About 4.6 million out of more than 14 million Medi-Cal members
 - Of these, roughly 3 million can be exempted based on August 2025 data.

	% FPL	100%	138%	DHCS monthly 138%
Household Size	1	\$15,650	\$21,597	\$1,801
	2	\$21,150	\$29,187	\$2,433
	3	\$26,650	\$36,777	\$3,065
	4	\$32,150	\$44,367	\$3,699
	5	\$37,650	\$51,957	\$4,331
	6	\$43,150	\$59,547	\$4,963
	7	\$48,650	\$67,137	\$5,596
	8	\$54,150	\$74,727	\$6,228
	add'l, add	\$5,500	\$7,590	\$634



Mandatory Exemptions to Work and Community Engagement Requirements

1. Enrolled in one of the following Medi-Cal eligibility groups:
 - Pregnant or up to 12 months postpartum.
 - Foster youth and former foster care youth under age 26.
 - People who are aged, blind, or have a disability (including individuals who receive Supplemental Security Income).
 - Children under age 19.
2. American Indian/Alaska Natives
3. Parents/guardians/caregivers of a dependent child age 13 and younger.
4. Parents/guardians/caregivers of an individual with a disability.
5. Veterans with a disability.
6. Incarcerated or recently released from a correctional facility within the past 90 days.
7. Entitled to Medicare Part A or enrolled in Part B.
8. Meeting work requirements for Temporary Assistance for Needy Families (CalWORKs) or Supplemental Nutrition Assistance Program (CalFresh).
9. Participating in drug/alcohol treatment programs.
10. Medically frail, per the statute.

Work and Community Engagement Requirements: High-Level Process Overview

1

Starting January 2027, when you apply* or during the renewal period, DHCS will check automatically if you have an exemption or need to meet work and community engagement requirements.

*Questions will be added to the CalHEERS, BenefitsCal, and paper application and yellow renewal packages.

2

How will this be done?

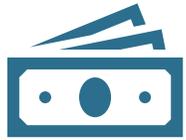
- » DHCS will use available data and new sources to confirm work activities and exemptions: information from programs like CalFresh, CalWORKs, General Assistance/Relief, and income data in CalSAWS will help with these reviews when you apply or renew.

3

If DHCS can't confirm your exemption, work and community engagement requirements automatically, they will ask you for paper verification.

- » You will have 30 days to show you meet work and community engagement or have an exemption.

What Activities Count Toward Meeting the Requirements?



Monthly Income

At least 80x the federal hourly minimum wage (\$580) or employment of 80 hours/month



Volunteer Service

80 hours/month (unpaid seasonal work averaged over last 6 months)



Educational Program

At least enrolled half-time (2-3 classes or 6-8 credits each semester)



Work Training Program

80 hours/month

Note: The law allows for mandatory and short-term hardship exemptions. These exemptions must be checked every 6 months.

Six Month Renewals

Non-exempt Medi-Cal members will have their eligibility checked every six months

» **WHOM THIS APPLIES TO:**

- Low-income adults (19-64) without children or disabilities.

» **IMPORTANT TO KNOW:**

- Missing deadlines could cause loss of coverage.

» **WHO WILL CONTINUE WITH ONCE-A-YEAR RENEWALS:**

- Members in a Medi-Cal program that is **not** under the Affordable Care Act new adult group.
- **Pregnant or postpartum** individuals.
- **Alaska Native or American Indian** members.
- **Foster youth or former foster youth who were in foster care on their 18th birthday** ages 0–26 (as designated by the county).

Communications Plan Overview

- » Main Goals
- » Outreach and Communications Strategies
- » Phases for Communicating with Medi-Cal Members
 - Phase I: Awareness and Preparation
 - Phase II: Support and Action

Main Goals

- » **Automate to Protect Coverage:** Use the data we already have, to check if someone is eligible for coverage. This way, members will not have to take extra steps to prove they meet the requirements.
- » **Simplify the Renewal Experience.** Keep forms simple and make sure the six-month renewal steps are clear and easy.
- » **Share Information Early:** Tell Medi-Cal members about changes ahead of time so they can plan.
 - As an example, we are sending text messages to members.

Outreach and Communications Strategies

- » **Share clear messages.** Make materials easy to understand and culturally relevant so members, families, and caregivers can trust the information and know what to do. Translate materials in all 19 Medi-Cal languages.
- » **Work with Trusted Messengers:** Team up with local groups and DHCS Coverage Ambassadors who can help people get or keep their Medi-Cal.
- » **Train front-line workers and share toolkits:** Teach county eligibility workers, DHCS Coverage Ambassadors, navigators, health plans, doctors' offices, clinics, community health workers, and community-based partners how to help Medi-Cal members, give them ongoing support, and share toolkits that include member-facing materials.

Implementation Timeline

2026				2027			
Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4

Phase 1: Awareness and Preparation

- » Share clear information early so members know about changes.
- » Update the DHCS website with easy-to-read materials.
- » Share flyers, social media posts, and text messages.
- » Clinic-based navigators and local partners will use these tools to spread the word and teach members what steps to take to keep Medi-Cal coverage.

Phase 2: Support and Action

- » DHCS will help members take steps to keep Medi-Cal.
- » This means responding to notices and finishing renewal packets.
- » DHCS will send reminders and give extra help through direct outreach.
- » Partners will get toolkits with information to share with members.

JANUARY 1, 2027:

Work requirements go into effect.

Clarification Questions?



Breakout Rooms Instructions



Reminders

Includes:

- » Facilitators, a note taker, and a reporter.
- » MMAC members.
- » DHCS leadership will be in both rooms.

- » This is the time to dive deeper into the topic of conversation.
- » You will have a chance to ask questions and share what you think we are missing.

Before Going into the Breakout Rooms...



Member Journey Example: Work and Community Engagement Requirements at Renewal (1 of 3)

Member Journey

DHCS **can** verify

DHCS **cannot** verify

Christopher is a Medi-Cal member who will likely be impacted by the new Work and Community Engagement Requirements.

Renewal Date: July 2027

- » **July 2026 Christopher will receive an awareness text message:**
From Medi-Cal: Starting in 2027, some adults must work, volunteer, or study to keep Medi-Cal. You may be affected. Learn more: [Medi-Cal Changes 2026-2028](#)
- » **September 2026 (Estimated timeframe) will receive a mailed notice:**
Notice from DHCS informing him of upcoming Work and Community Engagement reporting requirements, will include FAQ.
- » **January 2027 will receive a second preparation text message:**
From Medi-Cal: Six months until you renew Medi-Cal. Some adults must meet new work or community engagement rules. Check if this applies to you: [Medi-Cal Changes 2026-2028](#)
- » **April 2027 – Automated Check**
DHCS will attempt to conduct automated renewal for Christopher based on information available on the system.

Member Journey Example: Work and Community Engagement Requirements at Renewal (2 of 3)

Member Journey

DHCS **can** verify

DHCS **cannot** verify

DHCS can verify compliance or exemption automatically.

May 2027* - Christopher will be renewed for coverage.

- » The County will send a Notice of Action to Christopher saying that he has been successfully reenrolled for another sixth months.
- » At this point, no further action needed from the member.

*The timelines will vary slightly depending on the county social services agency

Member Journey Example: Work and Community Engagement Requirements at Renewal (3 of 3)

Member Journey

DHCS cannot verify compliance/ exemption automatically.

May 2027 – Christopher receives a Yellow Renewal Packet requesting paper verification documents.

June–August 2027 – Christopher has 3 month window to renew Medi-Cal coverage:

- 1. Submit Packet** – Christopher sends completed forms (ideally by end of June).
- 2. DHCS Review** – Documentation is evaluated.

Outcome:

- » **Approved** – Coverage renewed for July–December 2027; notification sent.
- » **Not Meeting Requirements** – Non-compliance notice; 30 days to meet work reporting requirements.
- » **Non-Compliance** – Failure to comply within 30 days results in coverage termination.

DHCS **can** verify

DHCS **cannot** verify

Questions

- » When do you want to receive information? (monthly, every three months, annually, as the change is coming up)
- » How would you like to receive information? (e.g. flyer, letter, text, email, public announcement, social media, bus stop (out-of-home advertising), radio, a person in your community, your doctor, your county Medi-Cal office)
- » Who do you consider to be the best messenger to tell you about upcoming changes to your Medi-Cal eligibility? Who do you trust?
- » What do you want to know?
 - Do you want to know more about exemptions?
 - Do you want to know about volunteer/community engagement opportunities?
 - Does this requirement apply to you?

Group Discussion/Member Comments

Closing Remarks and Next Steps

Stay Involved

- » Members can learn more on the [What Members Need to Know](#) webpage.

Upcoming Meeting Dates

MMAC:

- » Wednesday, June 3, 2026, from 5:30 - 7:30 p.m.
- » Virtual via Teams

Medi-Cal Voices and Vision Council:

- » Wednesday, March 18, 2026, from 5:30 - 7:30 p.m.
- » Virtual via Teams
- » Open to the public

2026 Medi-Cal Member Advisory Committee Meeting Dates



- » September 16, 2026
- » December 2, 2026

Thank you!



Acronyms

- » DHCS – Department of Health Care Services
- » U.S. HHS – U.S. Department of Health and Human Services
- » MMAC – Medi-Cal Member Advisory Committee
- » H.R. 1 – House Resolution 1: One Big Beautiful Bill Act
- » SNAP – Supplemental Nutrition Assistance Program
- » FAQ – Frequently Asked Questions
- » TA – Technical Assistance

APPENDIX

The image features the word "APPENDIX" in a dark blue, sans-serif font, centered horizontally. Below the text are two decorative, wavy horizontal lines. The top line is a medium teal color, and the bottom line is a darker navy blue. Both lines have a smooth, undulating path across the width of the page.

Communication to Counties

» **All County Welfare Director's Letter (ACWDL) [25-30](#):
Work and Community Engagement Requirements
for New Adult Group.**

- *Note: This is preliminary DHCS guidance that is subject to change as federal guidance evolves.*

Verification Periods

Beginning January 2027, under H.R. 1, people applying for or renewing coverage must meet the work and community engagement requirements at the time of application or renewal.

- 1. At application:** Individuals must meet work and community engagement requirements ***in the month before they apply, or***
- 2. At renewal:** Individuals must meet work and community engagement requirements in ***at least one of the months since their last renewal.***

Measuring impact

DHCS will monitor key metrics to evaluate the impact of H.R. 1 implementation, including:

- » The number of individuals subject to work reporting requirements.
- » The number of individuals in compliance with reporting requirements.
- » The number of individuals who lose coverage due to procedural disenrollments.
- » These metrics will inform ongoing evaluation and guide adjustments to minimize negative impacts.

Work and Community Engagement Requirements: Mandatory Exemptions

H.R. 1 provides that individuals who meet the following criteria **do not need to demonstrate compliance with work requirement's qualifying activities.**

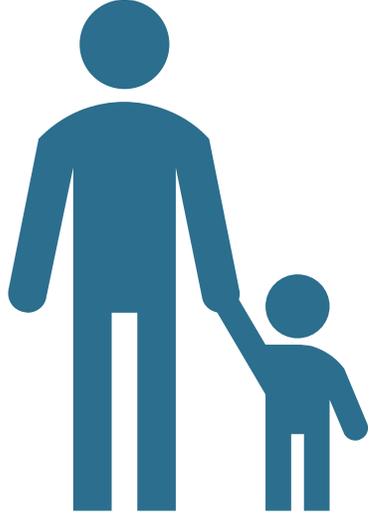
Work and Community Engagement Requirements: Mandatory Exemptions (1 of 3)



Mandatory Exemptions

- » Enrolled in one of the following Medi-Cal eligibility groups:
 - Pregnant or up to 12 months postpartum.
 - Foster youth.
 - Former foster care youth under age 26, who were in foster care on their 18th birthday.
 - Aged, Blind, or Disabled people (including individuals who receive Supplemental Security Income (SSI)).
 - Children under age 19.
- » American Indian/Alaska Natives.

Work and Community Engagement Requirements: Mandatory Exemptions (2 of 3)



Mandatory Exemptions

- » Parents/guardians/caregivers of a dependent child age 13 and younger.
- » Parents/guardian/caregivers of a disabled individual.
- » Veterans with a disability rating of total.
- » Incarcerated or recently released from a correctional facility within the past 90 days.
- » Entitled to Medicare Part A or enrolled in Part B.

Work and Community Engagement Requirements: Mandatory Exemptions (3 of 3)



Mandatory Exemptions

- » Meeting Temporary Assistance for Needy Families (TANF) (CalWORKs) work requirements or Supplemental Nutrition Assistance Program (SNAP) (CalFresh) work requirements
- » Participating in drug/alcohol treatment programs
- » Medically frail, per the statute, which includes individuals with a (1) substance use disorder (SUD); (2) disabling mental disorder; (3) physical, intellectual or developmental disability that significantly impairs their ability to perform one or more activities of daily living; (4) serious or complex medical condition; or individuals (5) who are blind or disabled (as defined in section 1614 of the Social Security Act)).

Work and Community Engagement Requirements: Optional Temporary Exemptions

DHCS will implement optional short-term hardship exemptions and automatically apply them as applicable to members and applicants to the maximum extent possible. Short term-hardship exemptions include:

- » **Emergency declaration:** Living in a county impacted by a federally declared emergency or disaster.
- » **Unemployment:** Living in a county or local jurisdiction (not yet defined by CMS) with a high unemployment rate (at or above the lesser of 8% or 150% of the national unemployment rate, which was 4.2% as of July 2025). Enrollees in approximately 22 counties (including Alpine, Colusa, Fresno, Glenn, Imperial, Kern, Kings, Madera, Merced, Sutter, and Tulare counties) could qualify for this exemption (approximately 15.6% of Medicaid expansion enrollees in California).¹
- » **Inpatient Care:** Receiving inpatient hospital care, nursing facility services, services in an intermediate care facility for individuals with intellectual disabilities, inpatient psychiatric care, or other services of similar acuity (including related outpatient care) determined by the U.S. HHS Secretary.*
- » **Travel for Care:** Traveling for an extended period to access medically necessary care for a serious or complex medical condition that is not available in the individual/their dependent(s)' community.*

1. KFF, [A Look at the Potential Impact of the High Unemployment Hardship Exemption to Medicaid Work Requirements, 2025.](#)

*Exemption only available if specifically requested by the individual.

Verification Steps (1 of 3)

1 Assess if the individual meets an exemption based on being eligible for a non-expansion eligibility category or based on other eligibility information.

(*Note: All data below reflects August 2025 Medi-Cal enrollment numbers)

Identify Medicaid Expansion Adults/New Adult Group

Individuals aged 19 to 64.

~4,633,636
Individuals

Identify eligibility group exemptions: Exempts individuals identified by aid code based on their eligibility category, including: children under age 19; parents and other caretaker relatives; aged/blind/disabled non-Modified Adjusted Gross Income (MAGI) eligibility; pregnant and postpartum individuals; foster youth and former foster youth under age 26; those receiving SSI; and inmates.

**Already
exempted based
on aid code**

Identify individuals who can be coded as exempt based on their eligibility group plus a

systems modification: Exempts individuals, including parents/guardians/caregivers of dependent child age 13 and younger; and individuals recently released from incarceration within the past 90 days.

~619,711
Individuals

Identify individuals who can be coded as exempt based on information provided on the

application/renewal form: Exempts individuals including AI/AN; and individuals entitled to or enrolled in Medicare Part A or Part B.

~14,385
Individuals

Verification Steps (2 of 3)

2 Assess if the individual meets a hardship exemption that can be verified electronically.

Determine individuals who meet a short-term hardship exemption:

Exempts individuals living in a county impacted by a federally declared emergency or disaster; and individuals living in a county with a high unemployment rate.

~373,389
Individuals

3 Identify individuals who meet exemptions using data sources or cross-system information data sharing.

Determine if individuals meet other exemption criteria using new data sources or reports. Verify that individuals:

- » Meet TANF work requirements;
- » Have a member of a household receiving SNAP or meets a SNAP exemption that is aligned with a Medicaid exemption;
- » Are parents or guardians of a disabled individual;
- » Are veterans with a disability rated as total by Veterans Affairs (VA);
- » Are medically frail; or
- » Are at least half-time enrolled in educational program.

TBD
Individuals

Verification Steps (3 of 3)

4 Conduct data verification to identify compliance with qualifying activities based on income and/or hours.

Verify individuals complying with income/work hours qualifying activities:

Verifies individuals who have an income of at least \$580/month; who have an average monthly income of \$580/month; and who work 80 hours/month.

~672,831
Individuals

~1,842,155 individuals determined exempt or income compliant via an automated source (Steps 1-4)

5 Request information from the consumer to verify compliance with qualifying activities or an exemption.

Individuals unable to verify compliance with qualifying activities or receive an exemption using sources above.

May vary by individual.

~2,791,481

Individuals who could not be determined exempt or income compliant via an automated data source

~1,395,741

assume 50% of 2,791,481 will disenroll due to failure to return verifications/comply