



CABINET FOR HEALTH
AND FAMILY SERVICES

Medicaid Monthly Virtual
Meeting
Mar. 19, 2026

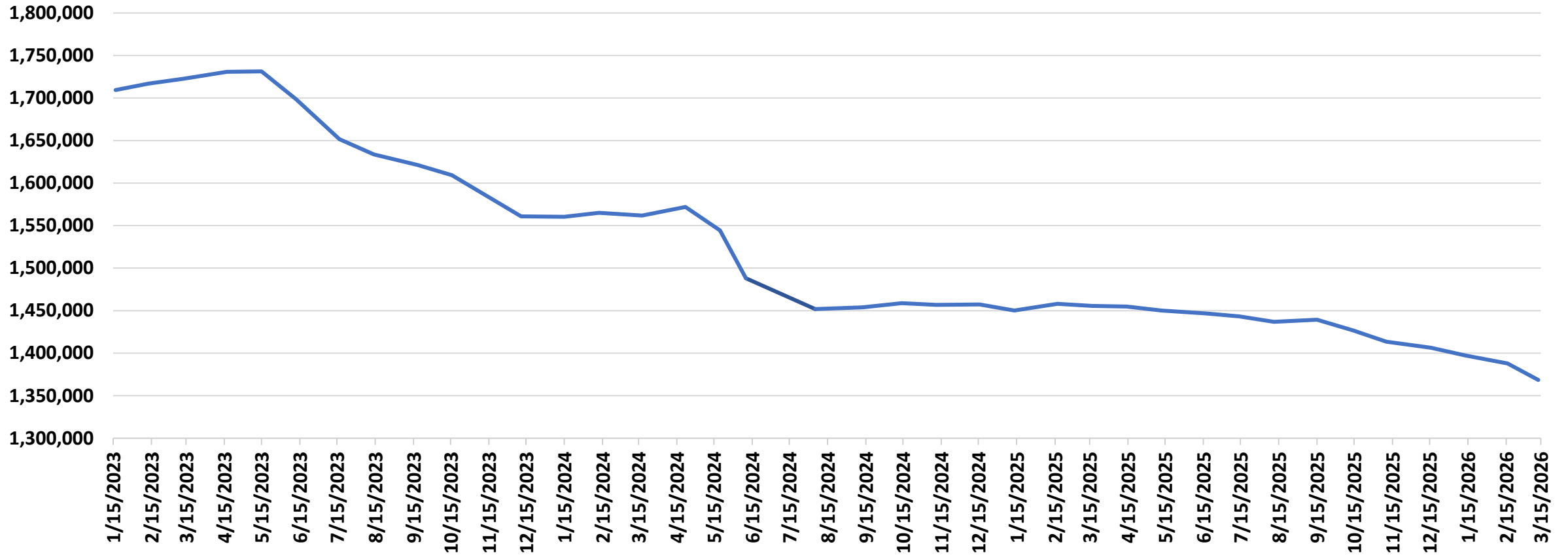
Agenda

- Welcome/Introduction
- Medicaid Renewals and State Based Marketplace Updates
- 1915(i) RISE Initiative
- 1915(c) Community Health for Improved Lives and Development (CHILD) Waiver
- Sister Agency Spotlight: Department for Aging and Independent Living (DAIL) – Emergency Preparedness
- Our Healthy Kentucky Home Spotlight: Home Emergency Preparedness
- House Resolution 1 Update

Medicaid Renewals and State Based Marketplace Updates

Medicaid Enrollment Trend

Medicaid Enrollment: January 2023 through March 2026 Renewals

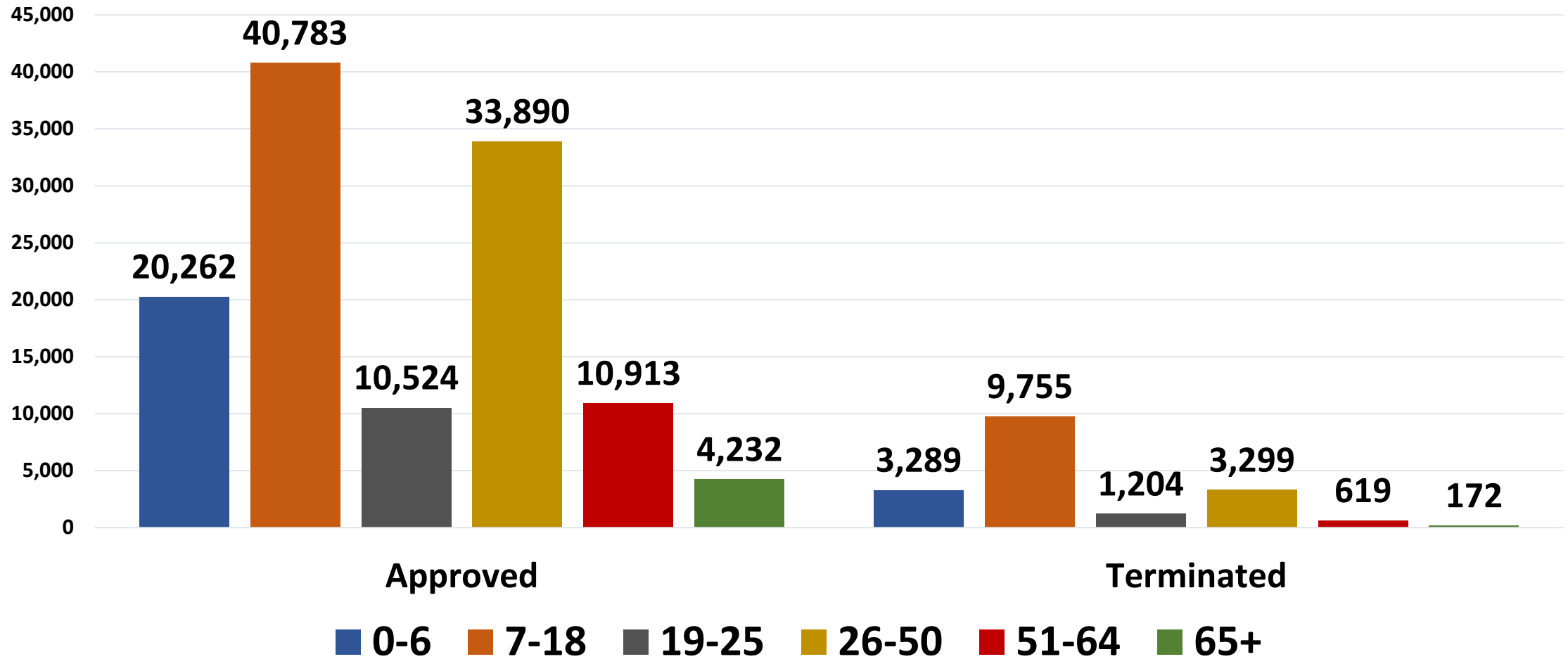


Medicaid Renewals – February 2026

	Individual Renewals	Medicaid Approvals	Medicaid Terminations	Pending
February	139,700	120,604	18,338	758

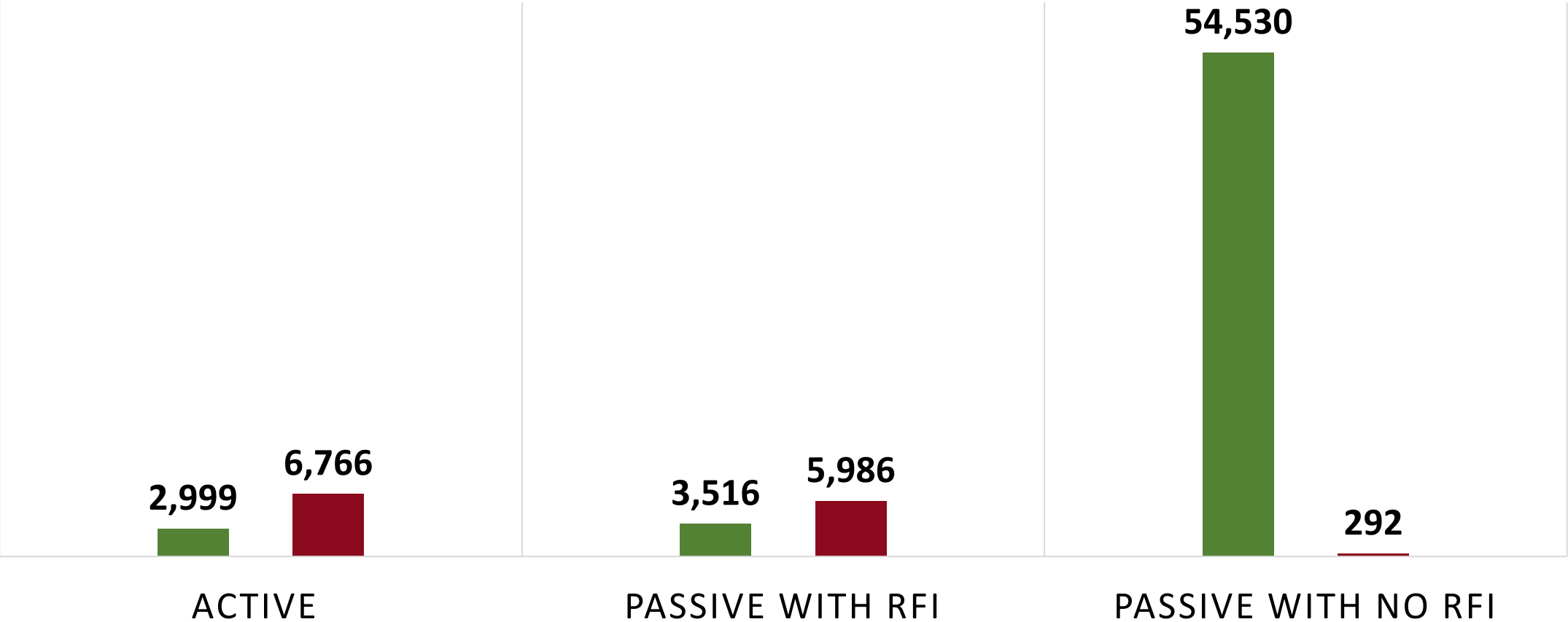
*Numbers are based on CMS Reports.

February 2026 Renewals By Age

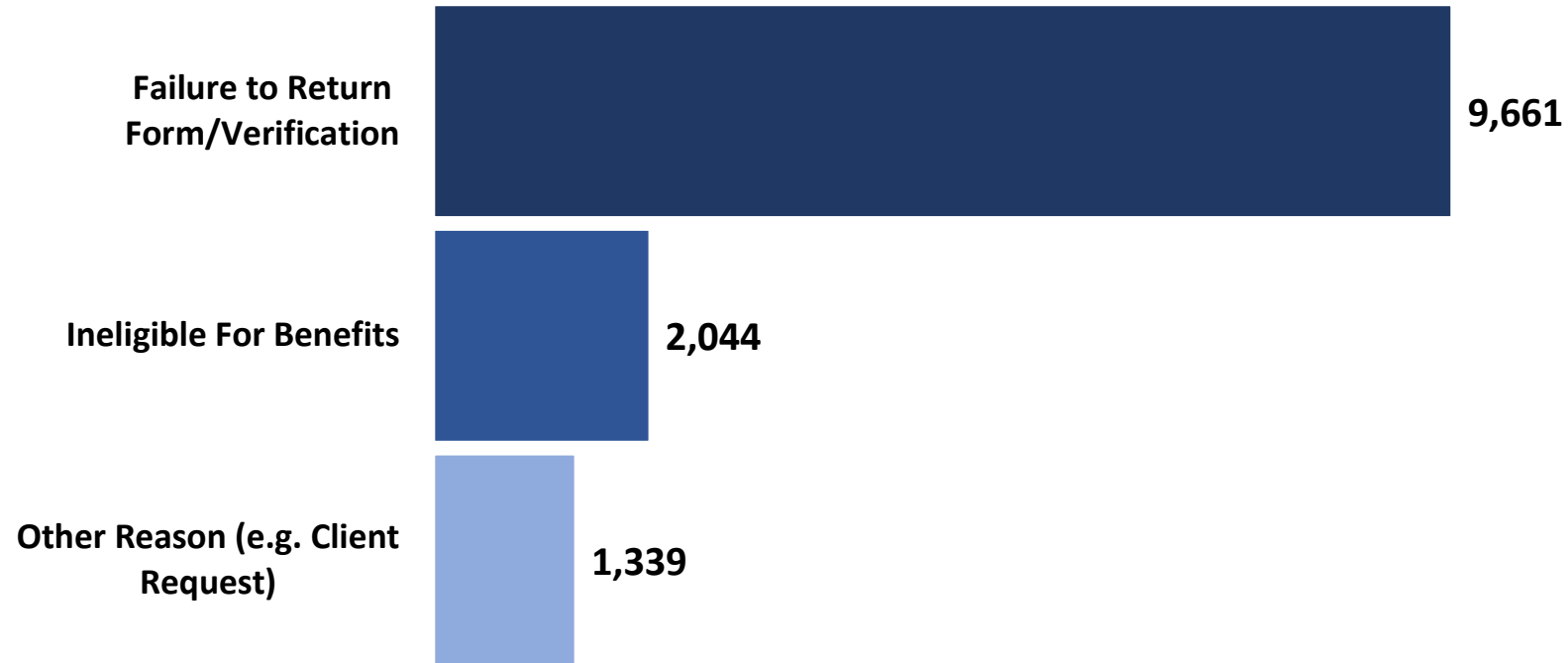


February 2026 Child Renewals

■ Approved ■ Terminated



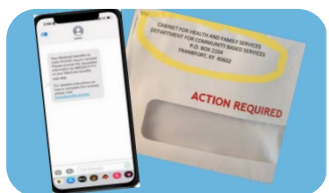
February 2026 Child Terminations by Reason



Stay Covered: Renew Your Medicaid!



Every **12 months** Medicaid members will go through a renewal process to make sure they are still eligible for coverage. **Keep your information updated!**



A renewal notice is sent at least **45 days before** the due date with instructions and a deadline to submit required information. A reminder is sent about **15 days** before the due date.



You can check your renewal month by logging into the Kynect portal or calling the Kynect line. kynect.ky.gov or call **855-4kynect (855-459-6328)**. Providers also have access to the renewal date in KYHealthNet.

Stay Covered,
Stay Connected,
Stay Healthy!

Send in requested information **right away to avoid losing coverage!** If coverage is terminated, reach out within 90 days to submit information to **reactivate** the case. If outside the 90 days will need to **reapply**.

Help us get the message out! Communications materials available to support members!

How to Apply

Materials for Offices

Get help from kynectors

Renewals

HOW DO I APPLY FOR MEDICAID?



Medicaid offers no-cost health coverage for Kentuckians, **including** pregnant women and children.

Connect with us today!

Visit kynect.ky.gov/benefits

Call (855) 306-8959

Visit your local social services office:
kynect.ky.gov/benefits/s/find-dcbs-office



Rx Stay Covered!

Are you or your family covered by Medicaid or KCHIP? Your renewal letter could be coming soon!

- Make sure your address is up to date in Kynect!
- Check your mail. We may need to contact you!
- Complete and return requests for information.
- No longer qualify? Shop Kynect for an affordable plan!



FREE HELP!

(855)-4kynect

www.kynect.ky.gov/healthcoverage



QUESTIONS ABOUT MEDICAID? kynectors CAN HELP!

kynectors can answer questions about Medicaid and talk to you about your coverage options.

Scan the QR code below or visit kynect.ky.gov to get started today!

Follow us on:

MEDICAID MEMBER? GET READY TO RENEW!

If you hear from us, please respond! Stay in touch. Stay covered.



Every 12 months Medicaid members will go through a renewal process to make sure they are still eligible for coverage.



Update any changes to your information (mailing address, phone number, or email) at kynect.ky.gov/benefit.



Respond to any letters you receive about Medicaid. You might hear from us via text, email, or letter. Be sure to respond!



If you need additional help, you can contact a local health coverage navigator at kynect.ky.gov/benefits.



Spread the word about Renewals for Children too! Materials are available to help families stay in the know!

Renewing Child Coverage

Health Coverage Options

Get help from kynectors

Use kynect

Renewing Your Child's Health Coverage

Renewing your child's Medicaid or KCHIP is easy and essential. Make sure to follow these steps:

- 1 Update important information in kynect. If anything (address, phone number, email, or income) changes, visit kynect.ky.gov or call 855-459-6328.
- 2 If you hear from us, please respond! You will be notified about Medicaid or KCHIP coverage during the annual renewal period via letter, phone call, and/or text message. The letter will tell you whether you need to complete a form or provide information to keep your coverage active. Please return any forms as promptly as possible.
- 3 Get help any time! Kentucky has many resources available to help you and your family navigate the Medicaid or KCHIP enrollment and renewal process:

- a. Online: kynect.ky.gov
- b. By phone: 855-4kynect (855-459-6328)
- c. Local kynectors: kynect.ky.gov, "Get Local Help"






Follow us: 


No longer eligible for Medicaid or KCHIP?

kynect has options.



There are other options available if a child is no longer eligible for Medicaid or Kentucky Children's Health Insurance Program (KCHIP). Go to kynect.ky.gov/benefits to learn about what is available for your family!

For any questions, or if you need assistance with understanding your options, you can reach out to a kynector at any time at no cost. To speak with a kynector, call 855-459-6238.




Follow us on: 

DOES YOUR CHILD NEED HEALTH INSURANCE?



Kentucky has many resources available to help you or your family navigate the enrollment and renewal process for Medicaid or KCHIP coverage:

- Online: kynect.ky.gov
- By phone: 855-4kynect (855-459-6328)
- Local kynectors or offices: kynect.ky.gov, "Get Local Help"



Follow us: 

DOES YOUR CHILD NEED HEALTH COVERAGE?

Let's kynect!



Explore health coverage options for children, including Medicaid and the Kentucky Children's Health Insurance Program (KCHIP), online.

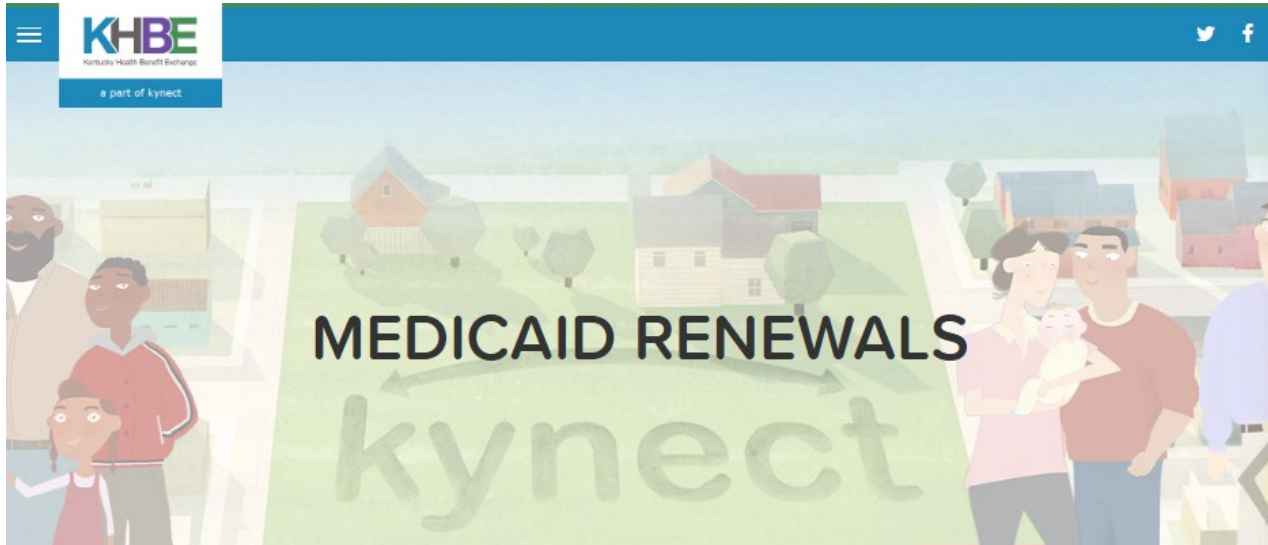
Scan the QR code, visit kynect.ky.gov/benefits, or call 859-459-6238




Follow us: 

KY Medicaid Website Resources

<https://medicaidrenewals.ky.gov>



Monthly Forum Session Information

KY Reports

FAQs

Medicaid Member Information

Medicaid Provider Information

Communication Materials

Kentucky Plans and Reports

Kentucky prioritizes transparency across all operations and progress related to renewals. The following materials include up-to-date information on renewals as they are reported to the Center for Medicare and Medicaid Services. Additional reports will be added to this section as they are available.

Most Recent CMS Monthly Data Reports

[Kentucky Monthly Data Report - October 2025 Reporting Period - Updated Report](#)

- [October Data Demographic Report](#)

[Kentucky Monthly Data Report - February 2026 Reporting Period](#)

- [February Data Demographic Report](#)

Past Monthly Reports

If you would like to review past plans, information, and reports from the public health emergency (PHE) unwinding, you can visit that website here: <https://medicaidunwinding.ky.gov>

Communications Materials

If you should need any materials to share with your customers or partners, please feel free to leverage the following resources, developed and approved by Kentucky Medicaid.

[Child Renewals Information Packet](#)

[Child Renewals Materials – Renew Coverage](#)

[Child Renewals Materials – Sign Up on kynect](#)

[Child Renewals Materials – Get Help](#)

[Child Renewals Materials – Alternative Options](#)

[KHCHIP Enrollment](#)

[Get Ready to Renew!](#)

[Find Your Local DCBS Office!](#)

[kynectors Can Help!](#)

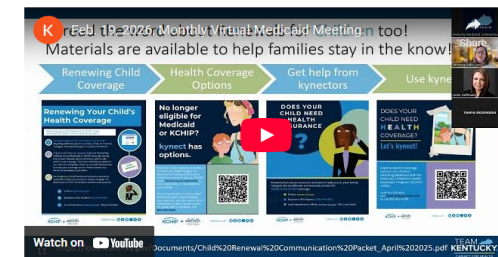
[How Do I Apply for Medicaid?](#)

[kynect Qualified Health Plan \(QHP\)](#)

Medicaid Monthly Virtual Forums

To help support Medicaid partners, DMS holds virtual Medicaid Forums. These monthly meetings provide information about Medicaid renewals and other program updates. You can find the materials from those sessions here:

February Virtual Forum Recording



[February Presentation Slides](#)

State Based Marketplace Updates

Declining Enrollments

84,700
Enrolled on
Qualified
Health Plan



Around 4,000 had terminated coverage since the end of Open Enrollment Termination for nonpayment, voluntary disenrollments prevalent



Sharp increase in enrollees seeking help with APTC verification
Federal rule changes gives 90 days instead of 120 days for documentation



Provider networks and high deductibles remain challenges
Working with kynectors and other community advocates to educate enrollees



kynect.ky.gov



855-4kynect (459-6328)



KHBE.Questions@ky.gov

Twice as many requests for Exceptional Special Enrollment compared to last year
Common concerns: Doctor not in network, the junk plan (non-ACA, health sharing ministry etc.) I signed up for doesn't cover anything

1915(i) RISE Initiative Update

1915(i) RISE Initiative

New Medicaid benefit under Kentucky's 1915(i) State Plan

Designed for Medicaid-eligible adults (18+) with Serious Mental Illness (SMI), with or without a co-occurring Substance Use Disorder
Brings 10 essential Home and Community-Based Support (HCBS) services to participants in their community

1915(i) RISE Initiative Recent Developments:

1915(i) RISE Initiative Announcement:

After securing the full complement of 10 services within the counties served, we are pleased to announce that [Community Mental Health Center \(CMHC\) Regions 2 \(Pennyroyal Regional Center\), 6 \(Seven Counties\), 12 \(Kentucky River Community Care\), and 15 \(New Vista\)](#) are now accepting 1915(i) RISE Participant referrals! See available [providers](#).

Instructions for referring participants to the 1915(i) RISE Initiative may be found on the attached [1915\(i\) RISE Referral Submission Form](#)

- Over 100 providers are currently somewhere in the application/review process – 24 have submitted applications, 15 are certified to offer services, and 13 have completed Medicaid enrollment.
- You can track as providers come on-line at our [Provider Directory](#).
- Across the four operating regions, we have received over 100 Participant referrals – 97 have been assessed, 63 referred to Case Managers, 12 denials, and 15 declines.



1915(c) Community Health for Improved Lives and Development

What is the 1915(c) CHILD Waiver?

Community Health for Improved Lives and Development

- **Serving Children & Youth with Most Complex Needs**
 - The CHILD Waiver is a new Medicaid home and community-based services program for children and youth with complex behavioral health or developmental needs. It was developed in response to longstanding gaps in support for families navigating serious challenges, particularly those at risk of hospitalization, residential placement, or involvement with child welfare due to a lack of services.
 - Launched in January 2026, the waiver helps Kentucky invest in prevention and family preservation rather than crisis-based or institutional care, helping youth get the services they need, while staying at home, in school, and in their communities.

Who does the 1915(c) CHILD Waiver Help?

- Children and Youth
 - Under age 21,
 - With significant behavioral health or developmental needs.
 - Kentucky children and youth who:
 - Need a level of care like what would be provided in an inpatient facility, intermediate care facility for individuals with intellectual disabilities (ICF/IID), or hospital.
 - Can be safely supported at home or in the community with the right services.

Who does the 1915(c) CHILD Waiver Help? Cont.

Enrollment is targeted to those who have exhausted supports and services enabling them to remain in the community and:

- Are or at risk of being unhoused
- Have a history of at least two different foster care placements
- Have at least five contacts with law enforcement
- Is discharging from an institution in the next 45 calendar days
- Require an institutional level of care but can remain safely at home or in the community with proper support

CHILD Waiver Services

Case
Management

Respite

Community
Living Supports

Environmental
and Minor Home
Modifications

Clinical
Therapeutic
Services

Supervised
Residential Care

Provider and Participant Metrics

Provider Applications	
Applications Received	13
Reviews In Progress	7
Requests for Additional Information	7
Certified Providers	4
Providers Denied	2

Participant Applications	
Number of Unique Applicants	23
In Review/Request for Additional Information	16
Number of Participants Awaiting Assessment	2
Approved Participants	5
Applicants Denied	0

CALL FOR **CHILD** **WAIVER PROVIDERS!**



The Department for Medicaid Services (DMS) is looking for providers interested in delivering services through the Community Health for Improved Lives and Development (CHILD) waiver program.

If you're interested in enrolling as a CHILD waiver provider, please email KYCHILDwaiver@ky.gov

SERVICES OFFERED

- ✓ Case Management
- ✓ Clinical Therapeutic Services
- ✓ Community Living Supports
- ✓ Environmental and Minor Home Modifications
 - ✓ Respite
- ✓ Supervised Residential

Call for Providers

Resources

- 1915c Waiver Helpdesk: 1915cwaiverhelpdesk@ky.gov or 844-784-5614
- [Cabinet for Health and Family Services Website](#)
- [CHILD Waiver Website](#)
- [CHILD Waiver Reimbursement](#)

Regulations:

- The 1915(c) CHILD regulations are currently under review and awaiting approval
- Public Comment Period is open through March 31, 2026 [Title 907 Chapter 2 • Kentucky Administrative Regulations • Legislative Research Commission](#)
 - 907 KAR 2:720: CHILD Waiver Program Requirements
 - 907 KAR 2:725 CHILD Waiver Reimbursement

Sister Agency Spotlight: Department for Aging and Independent Living – Emergency Preparedness

THREE PHASES OF THE PROJECT



Prior to an emergency your center needs these updated lists

Staff contact lists

Telephone numbers of key personnel

Names, addresses, telephone numbers

Client contact lists

Name, address, phone, cell phone, email address

Vendor contact list

Name, address, phone, cell phone, email

Utility companies

Emergency phone number to use and non-emergency numbers

Community partners

Government/regulators, including Area Agency on Aging

Media, including local radio, television and newspapers

Other stakeholders

Prepare a simple organizational chart with the names, titles and telephone numbers of your key personnel and those of emergency personnel. These will be useful before and during emergency operations.

nfesh Shelter In Place Planning
NFESH

EMERGENCY PREPAREDNESS

SHELTER IN PLACE PLANNING

07:56

🔊 CC ⚙️ 📺 🔍 **vimeo**

Shelter In Place Planning



Table 46. Has an emergency plan in place in case of widescale emergency

Proxy respondents were allowed for this question.

State	State Average	Observed N	HCBS Only	Nursing Facility	PACE	MLTSS HCBS	Combined Medicaid	Aging Medicaid	PD Medicaid	OAA
AL	89%	366	82%	94%	n/a	n/a	82%	n/a	n/a	n/a
AZ	84%	342	84%	n/a	n/a	84%	n/a	n/a	n/a	n/a
DE	82%	925	82%	84%	n/a	82%	n/a	n/a	n/a	n/a
GA	66%	483	66%	n/a	n/a	n/a	n/a	n/a	n/a	66%
IN	80%	1,141	80%	n/a	n/a	n/a	82%	n/a	n/a	79%
KS	86%	1,148	86%	n/a	n/a	86%	n/a	n/a	n/a	n/a
KY	68%	382	68%	n/a	n/a	74%	n/a	n/a	n/a	61%
MN	82%	1,252	82%	n/a	n/a	n/a	n/a	82%	81%	n/a
MO	81%	2,187	81%	n/a	n/a	n/a	81%	n/a	87%	n/a
NE	94%	834	88%	99%	n/a	89%	82%	n/a	n/a	n/a
NJ	89%	651	87%	93%	71%	87%	n/a	n/a	n/a	n/a
OH	86%	1,402	86%	n/a	n/a	89%	95%	83%	83%	n/a
OK	79%	723	79%	n/a	n/a	n/a	79%	n/a	n/a	79%
OR	75%	645	74%	85%	84%	n/a	75%	n/a	n/a	67%
TN	91%	698	85%	97%	68%	86%	n/a	n/a	n/a	n/a
TX	72%	1,432	72%	n/a	n/a	72%	n/a	n/a	n/a	n/a
VA	76%	920	76%	n/a	n/a	76%	n/a	n/a	n/a	n/a
WA	67%	1,486	65%	80%	n/a	65%	n/a	n/a	n/a	n/a

Table 118. Able to get to safety quickly in case of an emergency

Proxy respondents were allowed for this question.

State	State Average	Observed N	HCBS Only	Nursing Facility	PACE	MLTSS HCBS	Combined Medicaid	Aging Medicaid	PD Medicaid	OAA
AL	91%	366	85%	95%	n/a	n/a	85%	n/a	n/a	n/a
AZ	80%	361	80%	n/a	n/a	80%	n/a	n/a	n/a	n/a
DE	90%	914	90%	90%	n/a	90%	n/a	n/a	n/a	n/a
GA	75%	467	75%	n/a	n/a	n/a	n/a	n/a	n/a	75%
IN	92%	1,128	92%	n/a	n/a	n/a	92%	n/a	n/a	91%
KS	90%	1,120	90%	n/a	n/a	90%	n/a	n/a	n/a	n/a
KY	81%	373	81%	n/a	n/a	84%	n/a	n/a	n/a	78%
MN	90%	1,286	90%	n/a	n/a	n/a	n/a	89%	91%	n/a
MO	93%	2,168	93%	n/a	n/a	n/a	93%	n/a	95%	n/a
NE	65%	803	80%	52%	n/a	79%	88%	n/a	n/a	n/a
NJ	83%	664	82%	85%	92%	82%	n/a	n/a	n/a	n/a
OH	90%	1,371	90%	n/a	n/a	92%	97%	86%	86%	n/a
OK	90%	719	90%	n/a	n/a	n/a	90%	n/a	n/a	90%
OR	85%	664	85%	81%	96%	n/a	84%	n/a	n/a	91%
TN	82%	680	81%	84%	86%	81%	n/a	n/a	n/a	n/a
TX	74%	1,390	74%	n/a	n/a	74%	n/a	n/a	n/a	n/a
VA	91%	944	91%	n/a	n/a	91%	n/a	n/a	n/a	n/a
WA	85%	1,498	86%	79%	n/a	86%	n/a	n/a	n/a	n/a
WI	91%	2,054	90%	95%	89%	89%	93%	n/a	n/a	n/a
WY	86%	376	86%	n/a	n/a	n/a	86%	n/a	n/a	n/a

Emergency Plans

- Plan for program participants during an emergency:
 - Where to go
 - Who to contact
 - What to take
- Provide Emergency Contact's Name & Contact #s
- Must be Documented in appropriate data system

Thank you!

[Emergency Preparedness - Cabinet for Health and Family Services](#)

Marnie Mountjoy

Department for Aging and Independent Living

marnie.mountjoy@ky.gov

502-229-5229

Our Healthy Kentucky Home Spotlight: Home Emergency Preparedness



Our **HEALTHY** **KENTUCKY** Home



EAT
Healthy Foods



EXERCISE
Regularly



ENGAGE
With Others

Emergency Preparedness

March 2026

TO LEARN MORE VISIT:
OurHealthyKYHome.ky.gov

TEAM  **KENTUCKY**

Our **HEALTHY**  **KENTUCKY** Home



Natural disasters are increasing annually

Floods, tornadoes, winter storms, and severe weather are often beyond our control and can devastate our communities.

While we can't control when emergencies happen, we can control how prepared we are

Preparation plays a powerful role in protecting our health, our families, and our communities.



Emergency Preparedness

- Meet with household members to discuss the dangers of fire, severe weather, earthquakes and other emergencies.
- Explain how to respond to each.
- Find the safe spots in your home for each type of disaster.
 - Example: If a tornado is near, go to the basement or internal room without windows such as the bathroom.
- Discuss when it is appropriate to stay and when you should evacuate.
- Make an emergency check list and an evacuation kit

Emergency Preparedness: Home Preparation

Discuss what to do about power outages and personal injuries.

Someone in the home should take a basic first aid and CPR class

Show family members how to turn off the water, gas and electricity at main switches when necessary.

Post emergency telephone numbers on the refrigerator.

- First responders are taught to look on the fridge for important medical info

Teach children how and when to call 911, police and fire.

Teach children the full names of their caregivers.

- This is very important if the child and parent are separated during an emergency.

Emergency Preparedness: Home Preparation Cont.

Instruct household members to turn on the radio for emergency information.

Draw a floor plan of your home. Mark two escape routes from each room.

Keep family records in a water and fire-proof container.

Have fire extinguishers in the kitchen and at least one other location such as the garage.

For houses with more than one floor you may need an escape ladder

Make an emergency check list and evacuation kit

8 THINGS THAT SHOULD BE IN YOUR EMERGENCY DISASTER KIT

BY 8LIST



Emergency Kit

- Assemble supplies you might need in an evacuation. Store them in an easy-to-carry container such as a backpack or duffle bag.
- A supply of water (one gallon per person per day). Store water in sealed, unbreakable containers. Identify the storage date and replace every six months.
- A supply of non-perishable packaged or canned food and a can opener.
- A change of clothing, rain gear and sturdy shoes.
- Blankets or sleeping bags.

Emergency Kit Items

- A first aid kit
- Prescription medications and a list of all medications for each family member, include the name of your pharmacy
- Physicians name and contact information
- Immunization records
- A list of important family information; the style and serial number of medical devices such as pacemakers.
- Special items for infants, elderly or disabled family members
 - Such as diapers or special food such as infant formula



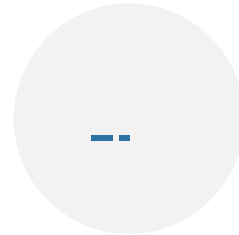
Emergency Kit – Additional Items



AN EXTRA PAIR
OF GLASSES



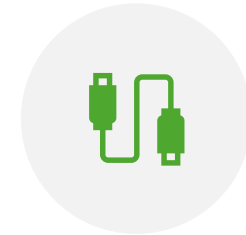
A BATTERY-
POWERED
RADIO,
FLASHLIGHT AND
PLENTY OF EXTRA
BATTERIES



CREDIT CARDS
AND CASH



YOUR EXTRA SET
OF CAR KEYS



CHARGING
CORDS FOR CELL
PHONE OR
OTHER
ELECTRONIC
DEVICES

Emergency Preparedness: Family Contacts

- Pick one out-of-state and one local friend or relative for family members to call if separated during a disaster (it is often easier to call out-of-state than within the affected area).
- Teach children your out-of-state contact's phone numbers.
- Pick two emergency meeting places.
 - A place near your home in case of a fire.
 - A place outside your neighborhood in case you cannot return home after a disaster.





SHELTER IN PLACE

- ✓ Close Windows
- ✓ Charge Devices
- ✓ Lock Door
- ✓ Stay Tuned

Assume no electricity or heat/AC
Your Evacuation kit will work for sheltering in place
Assume you will need food and water and medications for at
least 3-5 days

IT'S OKAY— TO NOT BE OKAY

Disasters and emergencies can affect mental health. The [988 Suicide & Crisis Lifeline](#) is here to help.



If you need help
Text or Call
988

TEAM 
KENTUCKY[®]
CABINET FOR HEALTH
AND FAMILY SERVICES

KENTUCKY MEDICAL RESERVE CORP

Trained volunteers,
ready to help when its
needed most.

Learn More at:

chfs.ky.gov/agencies/dph/dphps/phpb/Pages/khelps.aspx

Our **HEALTHY**
KENTUCKY Home

OurHealthyKYHome.ky.gov



KYEM

Kentucky Emergency Management

Keeping Kentuckians safe before, during and after disasters.

Learn More at:

kyem.ky.gov/plan-prepare

Our **HEALTHY** 
KENTUCKY Home

OurHealthyKYHome.ky.gov



Here in Kentucky,
we have some of
the best
resources,
teams, and
partnerships
around, giving us
a solid foundation
to face any
emergency that
comes our way.

[Ready.gov](https://www.ready.gov)

[Ready.gov | Low and No Cost Preparedness](https://www.ready.gov/low-and-no-cost-preparedness)

[988 Suicide & Crisis Lifeline](https://www.988lifeline.org)

[KYEM | Kentucky Emergency Management](https://www.kyem.org)

[MRC | Kentucky's Medical Reserve Corps](https://www.kyrc.org)

[KHELPS | Kentucky Helps](https://www.khelps.org)

House Resolution 1 Update

What is H.R. 1?

- A new federal law that changes Medicaid.
 - H.R.1, also known as the “One Big Beautiful Bill Act (OBBBA)” or “Working Families Tax Cut Act (WFTCA)”, was signed into law on July 4, 2025
 - It changes who can enroll in Medicaid and what people must do to stay covered
- What are the H.R. 1 Medicaid impacts?
 - Requires adults on Medicaid to work, go to school, or volunteer
 - States must check Medicaid eligibility more often
 - Implements new Medicaid cost sharing requirements

139 STAT. 72 PUBLIC LAW 119-21—JULY 4, 2025

Public Law 119-21
119th Congress

An Act
To provide for reconciliation pursuant to title II of H. Con. Res. 14.
Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. TABLE OF CONTENTS.
The table of contents of this Act is as follows:

Sec. 1. Table of contents.

TITLE I—COMMITTEE ON AGRICULTURE, NUTRITION, AND FORESTRY

Subtitle A—Nutrition

Sec. 10101. Re-evaluation of thrifty food plan.
Sec. 10102. Modifications to SNAP work requirements for able-bodied adults.
Sec. 10103. Availability of standard utility allowances based on receipt of energy assistance.
Sec. 10104. Restrictions on internet expenses.
Sec. 10105. Matching funds requirements.
Sec. 10106. Administrative cost sharing.
Sec. 10107. National education and obesity prevention grant program.
Sec. 10108. Alien SNAP eligibility.

Subtitle B—Forestry

Sec. 10201. Rescission of amounts for forestry.

Subtitle C—Commodities

Sec. 10301. Effective reference price; reference price.
Sec. 10302. Base acres.
Sec. 10303. Producer election.
Sec. 10304. Price loss coverage.
Sec. 10305. Agriculture risk coverage.
Sec. 10306. Equitable treatment of certain entities.
Sec. 10307. Payment limitations.
Sec. 10308. Adjusted gross income limitation.
Sec. 10309. Marketing loans.
Sec. 10310. Repayment of marketing loans.
Sec. 10311. Economic adjustment assistance for textile mills.
Sec. 10312. Sugar program updates.
Sec. 10313. Dairy policy updates.
Sec. 10314. Implementation.

Subtitle D—Disaster Assistance Programs

Sec. 10401. Supplemental agricultural disaster assistance.

Subtitle E—Crop Insurance

Sec. 10501. Beginning farmer and rancher benefit.
Sec. 10502. Area-based crop insurance coverage and affordability.
Sec. 10503. Administrative and operating expense adjustments.
Sec. 10504. Premium support.
Sec. 10505. Program compliance and integrity.
Sec. 10506. Reviews, compliance, and integrity.
Sec. 10507. Poultry insurance pilot program.

Subtitle F—Additional Investments in Rural America

Sec. 10601. Conservation.

Major Impacts of H.R.1: Community Engagement Requirements

- What does “community engagement” mean?
 - To keep Medicaid, some adults must spend 80 hours in a month doing one or more of these:
 - Working at a job (paid work)
 - Job training or workforce programs
 - Going to school
 - Volunteering in the community
 - These rules are required by federal law
 - States cannot choose to skip them
 - The requirements start January 1, 2027

Community Engagement Requirements

- Who must meet requirements?
 - Adults ages 19-64 who have Medicaid based only on income, also known as the expansion population.
- Who is excluded and does not have to meet requirements?
 - Has a disability, including veterans with a total disability rating
 - Is pregnant or in the 12-month postpartum period
 - Medically frail or have serious health conditions
 - Caring for a child 13 years or younger, or a disabled person
 - Covered in other categories of Medicaid eligibility such as a 1915(c) home and community-based waiver or foster care
 - Meeting SNAP or TANF work requirements
 - Others to be defined

Major Impacts of H.R. 1: Other Medicaid Eligibility Changes

- **Eligibility Renewals:** People on Medicaid solely based on income will have their eligibility checked every 6 months. This used to happen once a year.
 - Affects adults ages 19-64 that has Medicaid based only on income (Expansion)
 - Begins January 1, 2027
- **Coverage Start Date:** Medicaid will be limited on how far back they can be covered before a person applies. Currently may go back 3 months.
 - 1 month for expansion population and 2 months for everyone else
 - Begins January 1, 2027
- **Non-Citizen Eligibility:** Medicaid eligibility will be limited to fewer non-citizen groups. Some lawfully present immigrants who previously qualified may no longer be eligible.
 - Begins October 1, 2026

Major Impacts of H.R. 1: Cost Sharing Requirements

- What is cost sharing?
 - Cost sharing means members pay part of the cost for some health care services.
 - This can include copays when you visit a provider or get certain services.
 - Cost sharing is in addition to meeting eligibility or community engagement rules.
- Who is impacted?
 - Adults ages 19-64 who have Medicaid based only on income, also known as the expansion population.
- What is the impact?
 - Some members may have to pay out-of-pocket for certain services.
 - Providers may require patients to pay copays before receiving certain services.
 - Cost sharing is limited by federal rules and cannot exceed 5% of a member's income, and some services, like primary care and mental health, are exempt.
 - Begins October 1, 2028.

Key Process Steps

- Stakeholder engagement supports all three workstreams for implementing H.R.1:
 - Policy
 - IT Systems
 - Communication

Process for Implementing Policy Changes

- Review and understand H.R. 1 - Complete
- Compare state law with H.R. 1 to see what is different - Complete
- Decide which state rules need to be updated - Complete
- Create a timeline for writing and approving changes - Complete
- Decide where the state has choices or flexibility – In Progress
- Write new language and update existing language – In Progress
- Follow required approval and enactment steps – Next Step



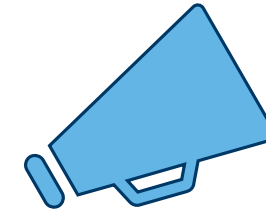
Process for Implementing System Changes

- Create an H.R. 1 IT workgroup – **Complete**
- Identify system changes needed based on policy decisions – **In Progress**
- Hold design sessions to plan system updates and business rules – **In Progress**
- Gather and use feedback from stakeholders – **In Progress**
- Build and update system changes – **Next Step**
- Test system changes to make sure they work correctly and follow the rules – **Next Step**
- Launch system updates and put changes into use – **Next Step**



Process for Communicating Changes

- Identify and prioritize needed materials – **In Progress**
- Drafting communication materials – **In Progress**
- Create communication plan – **In Progress**
- Stakeholder review of communications – **Next Step**
- Final approval of materials – **Next Step**
- Upload materials and share publicly – **Next Step**



Communications may include:

- Frequently Asked Questions (FAQs)
 - Fact Sheets
 - Topic-Specific One-Pagers
 - Stakeholder Toolkits
- Social Media and Promotional Materials
- Member Outreach and Notices

Stakeholder Engagement Plan

Communications

- Medicaid Beneficiary Advisory Council (BAC) and Medicaid Advisory Committee (MAC)
 - We will share communication materials as they are developed with the BAC and MAC.
 - This allows members to review materials early and share feedback before they are finalized
- Notice Improvement Workgroup
 - CHFS intends to restart the Notice Improvement Work Group
 - This group will review letters, notices, and other materials similar to the group used during the Public Health Emergency unwinding.
 - The goal is to make materials clearer, easier to understand, and more helpful.

IT Systems Update

- Medicaid IT System Update Focus Group
 - For IT system updates, we plan to create a standalone focus group.
 - This group will provide feedback during a pause in system design and development.
 - Feedback will help ensure system changes are user-friendly and work well for members.

KY CHFS Immediate Next Steps



Draft state policies, regulations, and laws needed for H.R. 1



Continue IT system design sessions to put policies into place



Create public-facing materials to explain changes clearly



Engage key stakeholders to review communications and system updates

A Look Ahead!

- April 1, 2026 – [Children’s Health TAC](#), 2 – 4 p.m.
- April 2, 2026 – [Medicaid Advisory Committee \(MAC\)](#), 10 a.m. – 12 p.m.
 - Public comment sign-up for the MAC meetings will now be done virtually. [Sign up for public comment](#). If you are unable to fill out the form for any reason or need assistance doing so, please call and leave a voicemail at (502) 564-2155 with your name and request to share a public comment at the upcoming MAC meeting.
- April 7, 2026 – [Intellectual and Developmental Disabilities TAC](#), 10 a.m. – 12 p.m.
- April 8, 2026 – [Pharmacy TAC](#), 1 – 3 p.m.
- April 13, 2026 – [Home Health TAC](#), 11 a.m. – 1 p.m.
- April 14, 2026 – [Therapy TAC](#), 8:30 – 10:30 a.m.
- April 15, 2026 – [Disparity and Equity TAC](#), 1 – 3 p.m.
- April 16, 2026 – Monthly Medicaid Meeting, 11 a.m. – 12 p.m.
 - Link will be announced soon!

Open call for topics of interest!

What would you like to hear more about
from the Cabinet?

Contact CHFS Listens at
CHFS.Listens@ky.gov or call 1-833-372-004.

