

May 7, 2026

Implementing Community Engagement Requirements in Medicaid

Draft Recommendation and Implications

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Medicaid and CHIP Payment and Access Commission

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Overview

- Draft recommendation
- Rationale
- Implications
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Draft Recommendation

Recommendation 1.1 (as approved)

The Secretary of the U.S. Department of Health and Human Services should direct the Centers for Medicare & Medicaid Services (CMS) to develop a transparent plan for monitoring and evaluating community engagement (CE) requirements in Medicaid. The monitoring plan should provide insight into how such policies affect eligibility and enrollment. CMS should identify new metrics for state reporting and build upon existing data collection to minimize administrative burden. The evaluation plan should outline, at a minimum, CMS's approach to evaluating the effect of CE requirements on employment, health, and state and federal administrative and program spending. CMS should ensure timely publication of monitoring and evaluation results to inform policy and operational decision making.

Rationale

- MACPAC's research highlights need to monitor eligibility and enrollment changes following CE requirement implementation
- CMS's monitoring plans are in development and it is unclear if those plans or resulting state reporting will be public
- With stakeholder input, CMS should develop and make public a plan with meaningful metrics for tracking eligibility and enrollment
- CMS should consider ways to minimize state burden and make data publicly available on a monthly basis

Rationale, cont.

- MACPAC's research underscored need for evaluation to assess changes in employment, health, and administrative spending
- CMS has not indicated plans to conduct a federal evaluation
 - States can conduct their own evaluations, but such efforts may be limited by competing priorities and state budget pressures
- CMS should develop an evaluation plan with stakeholder input
 - The plan and evaluation results should be made public
 - In addition to a full-scale evaluation, rapid cycle evaluation reports could provide timely, actionable insights to support continuous improvement

Implications

- **Federal:** CBO estimates this recommendation would increase federal direct spending by less than \$10 million over ten years
- **States:** Would result in additional state reporting, which could also support states' own monitoring and program improvement
- **Enrollees:** No direct effect, though it could help reduce coverage barriers for eligible individuals
- **Plans:** No direct effect, though insight into eligibility and enrollment trends affecting their business model may be useful
- **Providers:** No direct effect, though they may benefit from improved ability for CMS and states to identify and address coverage barriers

Next Steps

- Commissioners will vote on the recommendation later during this meeting
- If approved, the recommendation will be included in the chapter for the June report

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