

Thank you for joining. The Community Partners webinar will begin shortly. Gracias por unirte. El seminario web para socios comunitarios comenzará en breve.

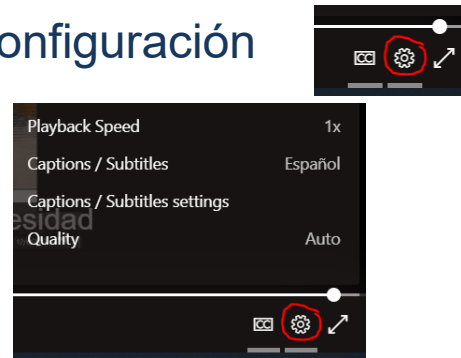
A copy of today's slide deck and recording will be available on our website at
[medicaid.ncdhhs.gov/transformation/more-information](https://www.ncdhhs.gov/transformation/more-information)

Una copia de la presentación y de la grabación de hoy estará disponible en nuestro sitio web

Quick tips on attending a Microsoft Teams Live Event / Consejos rápidos para asistir un evento en vivo de Microsoft Teams.

To view the webinar with captions/subtitles / Para ver el seminario web con subtítulos:

- Click the settings (gear icon) / Haz clic en el icono de configuración
- Click captions/subtitles / Haz clic en captions/subtitles

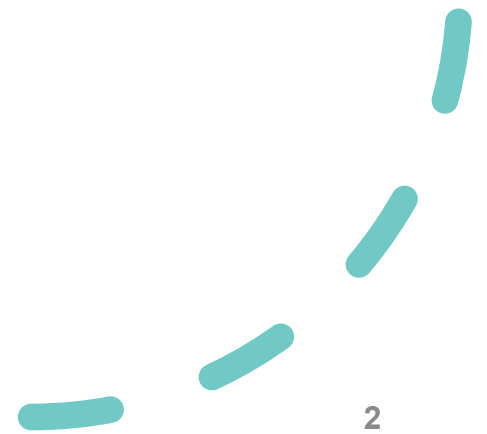


Use the Q&A feature at the top right of the screen to ask questions and provide comments, we will try to answer as many questions as possible in the Q&A session at the end of the webinar.



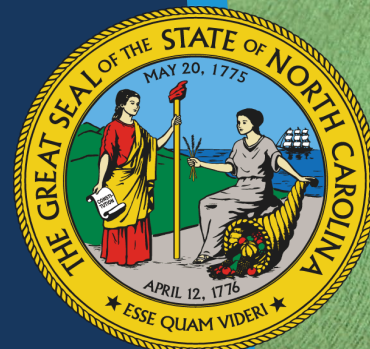
**LaQuana
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**Deputy Director
Office of Communication & Engagement
NC Medicaid**



NC Medicaid Community Partners Webinar

June 30, 2026



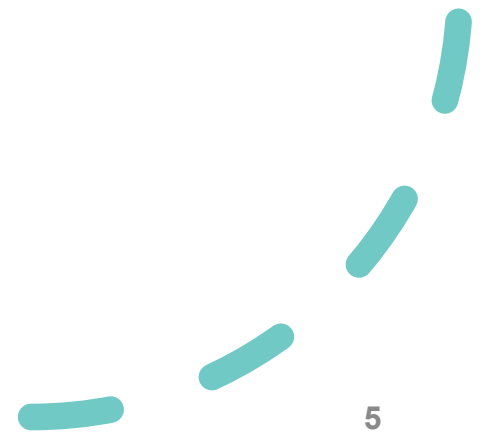
AGENDA

- Welcome
- H.R.1 Update
- Resources
- Questions & Answers



**Sarah
Gregosky**

**Assistant Secretary and
Deputy Medicaid Director
NC Medicaid**



H.R. 1 Overview

Understanding the Impact of H.R.1 and the Federal Changes to Medicaid

On July 4, 2025, the House Reconciliation bill (H.R. 1), previously known as the “H.R.1 One Big Beautiful Bill Act,” was signed into law.

The federally required changes will have a significant impact to Medicaid, including four big changes that will take place for people who have **or** are applying for health coverage through Medicaid.

1. Many non-citizens will no longer be able to have Medicaid coverage.
2. Most adults ages 19 through 64 will have to recertify (renew) their Medicaid every 6 months. This is a change from the current 12 months.
3. Most adults ages 19 through 64 will have to show they participated in an approved activity, like work, school or volunteer to be able to have health coverage through Medicaid.
4. Changes to the length of retroactive coverage

Eligibility Changes for Certain Non-citizens

Begins October 1, 2026

- Limits Medicaid to lawful permanent residents (“green card” holders), certain Cuban and Haitian entrants and individuals from the Compacts of Free Association nations.
- Excludes refugees, asylees and other humanitarian groups who were previously eligible for Medicaid coverage.
- Limits federal matching payments for Emergency Medicaid for individuals who would otherwise be eligible for expansion coverage except for their immigration status to the state’s regular Federal Medical Assistance Percentage (FMAP).

Who Will Lose Health Care Coverage

The following will lose Medicaid coverage October 1, 2026, if they have any of these immigration statuses:

- American Indians born in Canada or outside of the U.S. (including federally recognized tribal members that are not U.S. citizens)
- Battered Non-citizens (including spouse, parents and children)
- Lawfully Residing Veterans/Active-duty Service Members (including certain family members)
- Non-citizens with Iraqi or Afghan Special Immigrant Visas (including spouse and children)
- Hmong, Mien or Highland Laotian Non-citizens (including spouse and children)
- Applicants for Permanent Residence, Asylum or Temporary Protected Status
- Other Lawfully Residing Non-citizens

Who Will Keep Health Care Coverage

On October 1, 2026, only these non-citizen and immigration statuses (“qualified” statuses) will keep their Medicaid coverage:

- U.S. citizens and U.S. nationals
- Lawful permanent residents (green card holders)
- Cuban and Haitian entrants
- Compacts of Free Association (COFA) migrants which are citizens of the Federated States of Micronesia, the Marshall Islands, and the Republic of Palau

What this Means for Their Medicaid

Starting October 1, 2026, if your immigration status is not a “qualified” status, you:

- Will lose Medicaid coverage, including doctor visits, prescriptions, mental health, dental and other services.
- May qualify for Emergency Medicaid if the medical need is determined to meet the emergency criteria and the person meets all other factors of eligibility Medicaid.

Changes to Retroactive Coverage

Begins January 1, 2027

Member impact: Anyone applying for new Medicaid coverage

For individuals who apply for Medicaid benefits on or after January 1, 2027

- The retroactive coverage period changes from 3 months to 1 month prior to the month of application for most low-income adults ages 19 through 64 without disabilities (also called Medicaid expansion).*
- Limits retroactive coverage for children, adults age 65+ and individuals with disabilities to 2 months prior to the month of application.*

** If eligible for Medicaid during those months*

H.R. 1 Overview

Work and Community Engagement Requirements

How do I know if I am enrolled under Medicaid expansion?

- Medicaid expansion beneficiaries includes low-income adults ages 19 through 64, who are not pregnant, do not have a disability and get their health insurance through NC Medicaid.
- People who earn up to 138% of the federal poverty level, which is about \$21,610 per year for a single person, are considered low income.*
- Beneficiaries should ask their local Department of Social Services caseworker if they are not sure if they are enrolled under Medicaid expansion.
- To find your local Department of Social Services, there is an online directory at dhhs.nc.gov/localdss or you can call the Medicaid Contact Center at 1-888-245-0179 (TTY Relay Services: Call 711) to find the DSS closest to you.

* More information on the 2026 Federal Poverty Limits can be found at medicaid.ncdhhs.gov/eligibility

Work and Community Engagement Requirements

Begins January 1, 2027

To have health coverage through Medicaid, most adults ages 19 through 64 who are not exempt, must:

- Work or a participate in a work training program
- Volunteer in the community
- Attend school at least half-time (usually 6 credit hours)
- Have a monthly income that is at least \$580
- Be a seasonal worker whose average monthly income for the last 6 months is at least \$580 (equal to the federal minimum wage)

These activities can be combined. They must add up to 80 hours for the month. To find out if an activity meets the requirements, contact your local Department of Social Services.

Work and Community Engagement Requirements

What counts as work? In addition to going to a paid job, the law allows:

- **Job Search.** A supervised job search, a structured employment program where people look for jobs with support from a counselor or job search training. Job search activities conducted to meet unemployment insurance requirements also count. These hours must be less than half of the 80 hours per month,
- **In-kind work.** This is work where you are paid with something other than money. For example, a property manager who receives free rent in exchange for building duties can meet the 80-hour requirement.
- **Unpaid work.** This is different from community service as it can benefit a private company or an individual. This includes internships, trial-period work, and unpaid caregiving hours of a family caregiver, who does not independently qualify as a specified excluded individual.

Work and Community Engagement Requirements

What counts as volunteering?

The activity must be completed through a structured program under a non-profit or public organization for the direct benefit of the community. This can be voluntary or court ordered.

What counts as education?

- This includes higher education, career and technical education (CTE), high school and GED programs.
- Enrollment is determined by the institution and continues through academic breaks.
 - For example, an individual who graduates from high school in May, enrolls in community college mid-August and applies for Medicaid in July will satisfy the work reporting requirements because their status before their break was full-time high school enrollment and within the normal rhythm of school schedules.

Work and Community Engagement Requirements

What does this mean when applying for Medicaid?

- Starting January 1, 2027, adults ages 19 through 64 that apply for Medicaid may have to show proof in their application that they worked, went to school or volunteered for 80 hours **each month of the 3 months** before they apply for Medicaid.
- For example, Mary applies for Medicaid on April 1, 2027, and she does not have an exemption from work, school or volunteer activities. Mary must show she did her activities in January, February and March to meet this requirement. If Mary did not show activities for all 3 months, she may not get Medicaid.

H.R. 1 Overview

Work and Community Engagement Requirements

What do you need to do?

To keep full Medicaid benefits, most adults ages 19 through 64 must complete work, school or volunteer activities, unless they meet an exemption.

1. Check to see if you are exempt.

Exempt means you do not have to work, go to school or volunteer. You may be exempt if you:

- Have certain health needs
- Have a disability
- Are pregnant or have recently had a baby
- Take care of a child or disabled family member
- Meet other exemption rules

Save any papers that show you are exempt. Your local Department of Social Services may need to see them.

H.R. 1 Overview

Work and Community Engagement Requirements

What do you need to do, continued

2. If you are not exempt, you may already be doing some of the work, school or volunteer activities
 - Save your pay stubs, school records and volunteer logs. Your local Department of Social Services may need to see the information to check your 80 hours each month.
 - Adults ages 19 through 64 who are getting Medicaid benefits and are not exempt or have not done the 80 hours required for work, school or volunteer activities each month, may lose full Medicaid benefits.
3. Make sure your contact information is correct with your local Department of Social Services. If they need information, they will mail you're a letter to let you know, so it's important to have your correct address on file!

H.R. 1 Overview

Who is Exempt from the Work and Community Engagement Requirement

- Children up to age 19
- People with disabilities, receiving Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)
- Adults age 65 or older
- Women who are pregnant or eligible for postpartum coverage (12 months after a pregnancy ends)
- Former foster care children age 25 or younger and those currently in foster care
- Parent or caregiver of a child under age 14
- Parent or caregiver of people with disabilities

H.R. 1 Overview

Who is exempt from the work and community engagement requirement?

- Veterans with a total disability (100%)
- American Indian, Alaska Natives or other members eligible for Indian Health Services (IHS)
- People who are medically frail*
- People enrolled in a substance use disorder treatment program
- People who are incarcerated or people who have been released from incarceration in last 90 days
- People who qualify for Medicare

* *Criteria still to be determined*

H.R. 1 Overview

Work and Community Engagement Requirements

What does this mean for recertification (renewal)

- Starting January 1, 2027, adults ages 19 through 64 enrolled under Medicaid expansion must renew their Medicaid every 6 months instead of once a year.

NOTE: This does not apply to American Indians, Alaska Natives or other members eligible for Indian Health Services (HIS)

- Adults ages 19 through 64 (Medicaid expansion) must complete 80 hours of work, school or volunteer for **3 of the 6 months** during their certification period, unless they have an exemption.
- For example, if Mary's certification period is from January to June, and she is not exempt, she must report her work, school, or volunteer activities for 3 of those months to keep her Medicaid benefits for her next 6-month certification period.

Additional Resources

H.R. 1 webpage

- Available in English and Spanish
- Will be updated regularly with additional information
- medicaid.ncdhhs.gov/HR1

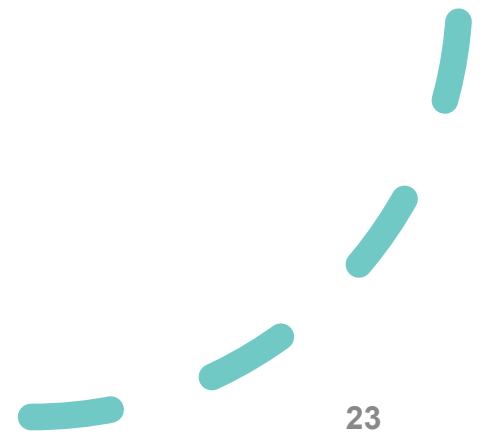
The screenshot shows the official website of the North Carolina Department of Health and Human Services (NCDHHS). The page is titled "The Impact of H.R.1 and Federal Changes to Medicaid". The header includes the NCDHHS logo and navigation links for "About NC Medicaid", "Beneficiaries", "Find a Doctor", "Providers", "Reports", "Meetings/Notices", and "Counties". A search icon is also present. The main content area features a large blue banner with the text "NEW RULES" and "The Impact of H.R.1 and Federal Changes to Medicaid". Below the banner, there is a breadcrumb trail: "Home > Beneficiaries > The Impact of H.R.1 and Federal Changes to Medicaid". A "ON THIS PAGE" dropdown menu is visible, with "Versión en español" as an option. The main heading is "What is H.R. 1 and the Federal Changes to Medicaid?". Below this heading, a paragraph states: "Federally mandated changes will have a significant impact on Medicaid. They will change eligibility rules for some people and how Medicaid operates." On the right side, there is a sidebar menu with the following items: "Beneficiaries", "How To Apply", "Medicaid Health Plans and Programs", "Medicaid Programs and Services", "Medicaid Reauthorization", "Non-Emergency Medical Transportation (NEMT)", and "The Impact of H.R.1 and Federal Changes to Medicaid" (which is highlighted).

Note: Information may change with the Centers for Medicare & Medicaid final rule.



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Office of Communication & Engagement
NC Medicaid**



Connecting Communities and Medicaid (CCM)

What is CCM?

Through regular meetings, shared resources and open dialogue, CCM aims to foster meaningful partnerships and exchange information between NC Medicaid and community organizations to reduce barriers to care and ensure Medicaid services are responsive to the needs of our communities.

Why join?

- Stay informed about NC Medicaid updates and federal policy changes
- Share feedback and insights from your community
- Collaborate with other organizations across the state
- Help shape a more inclusive and effective Medicaid system

Sign Up to Join CCM

[CCM Registration Form](#)

Medicaid Ambassador Initiative

How to become a Medicaid Ambassador?

- Send an email stating your interest in becoming a Medicaid Ambassador to Medicaid.NCEngagement@dhhs.nc.gov
- Complete the Medicaid Essentials training
- Complete ePASS navigation training either by attending a live ePASS demo or watching the recording posted to the Medicaid expansion website
- Have an established confidentiality agreement with your organization
- Sign the Attestation form with NC Medicaid that you meet all the requirements

Provider Resources

- NC Medicaid Website [medicaid.ncdhhs.gov](https://www.medicaid.ncdhhs.gov)
Includes County and Provider Playbooks
- Regular Medicaid Bulletins [medicaid.ncdhhs.gov/providers/medicaid-bulletin](https://www.medicaid.ncdhhs.gov/providers/medicaid-bulletin)
- NC Medicaid Managed Care Webinar Series (Back Porch Chat)
 - Aug. 20, 2026, noon – 1 p.m.
 - Nov. 19, 2026, noon – 1 p.m.
- NC Medicaid Quarterly Virtual Office Hours
 - Aug. 6, 2026, noon – 1 p.m.
 - Nov. 5, 2026, noon – 1 p.m.

For more information, see the [Training page](#) in the [Provider Playbook](#).

Questions & Answers

A copy of today's slide deck and recording will be available
on our website at

medicaid.ncdhhs.gov/transformation/more-information

If we couldn't get to your question, feel free to email it to Medicaid.NCEngagement@dhhs.nc.gov