Health Coverage Updates:

What you need to Know

HR1 Changes on Medicaid Renewals, Work Requirements and Marketplace Options

Agenda

1. Introduction and Medicaid Changes
2. Work Requirements and Exemptions
3. Compliance and Reporting
4. Next Steps and Marketplace Options
5. Summary and Final Advice

COLORADO
Department of Health Care Policy & Financing

CERTIFIED by CONNECT for HEALTH COLORADO



Introduction and Medicaid Changes

IMPORTANT!

Federal Changes to

Colorado's Medicaid Program

Why This Matters Now



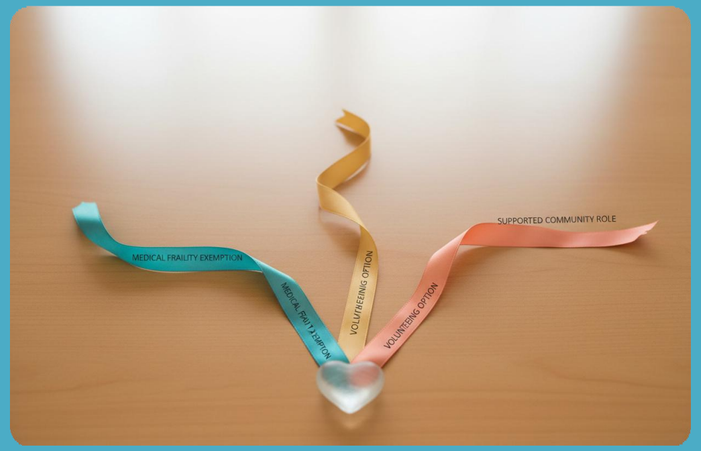
Policy changes are arriving soon

- Colorado Medicaid renewals and work rules begin shifting in **2027**.
- Not everyone is affected, but missing a notice can mean lost coverage.



Why Medicaid members should pay attention

- Health needs can change quickly, and rules may require faster action.
- Income changes from work, retirement, or caregiving can affect eligibility.



You may have more than one path

- Some people qualify for exemptions, including **medical frailty** situations.
- If work rules apply, **volunteering** may be an option for compliance.

January 1: Other Medicaid Changes



Retroactive coverage gets shorter

- Help for bills before you apply may drop to **1–2 months**.



Renewals become individualized

- Families may get different renewal dates, not one household packet.



More frequent renewals for some adults

- Some members will need to renew every **6 months** instead of yearly.



What to do now

- Update your mailing address, phone, email, and PEAK contact details.
- Open every notice and respond quickly to avoid coverage delays.

Who Could Be Affected



Most people will not see changes

- These updates do not apply to Colorado's entire Medicaid population.



Focus is Medicaid expansion adults

- Rules mainly target some adults ages 19 to 64 in expansion coverage.



How many may need action

- About **378,000** could face 6-month renewals; about **155,000** may need to show compliance or an exemption.



Why it matters for Medicaid members

- If you are nearing Medicare eligibility, confirming your status early can help prevent coverage gaps.

What Changes in Medicaid

More frequent renewals

- Some adults will renew Medicaid every **6 months**, not yearly.

New renewal timing in 2027

- Renewals shift to **individual** schedules, not one household date.

Less retroactive coverage

- Help paying older medical bills may drop to **1 to 2 months**.

Why it matters to you

- Missing notices or deadlines could mean faster loss of coverage.





2. Work Requirements and Exemptions

IMPORTANT!

Federal Changes to

Colorado's Medicaid Program

Understanding Work Requirements

What counts as meeting the rule

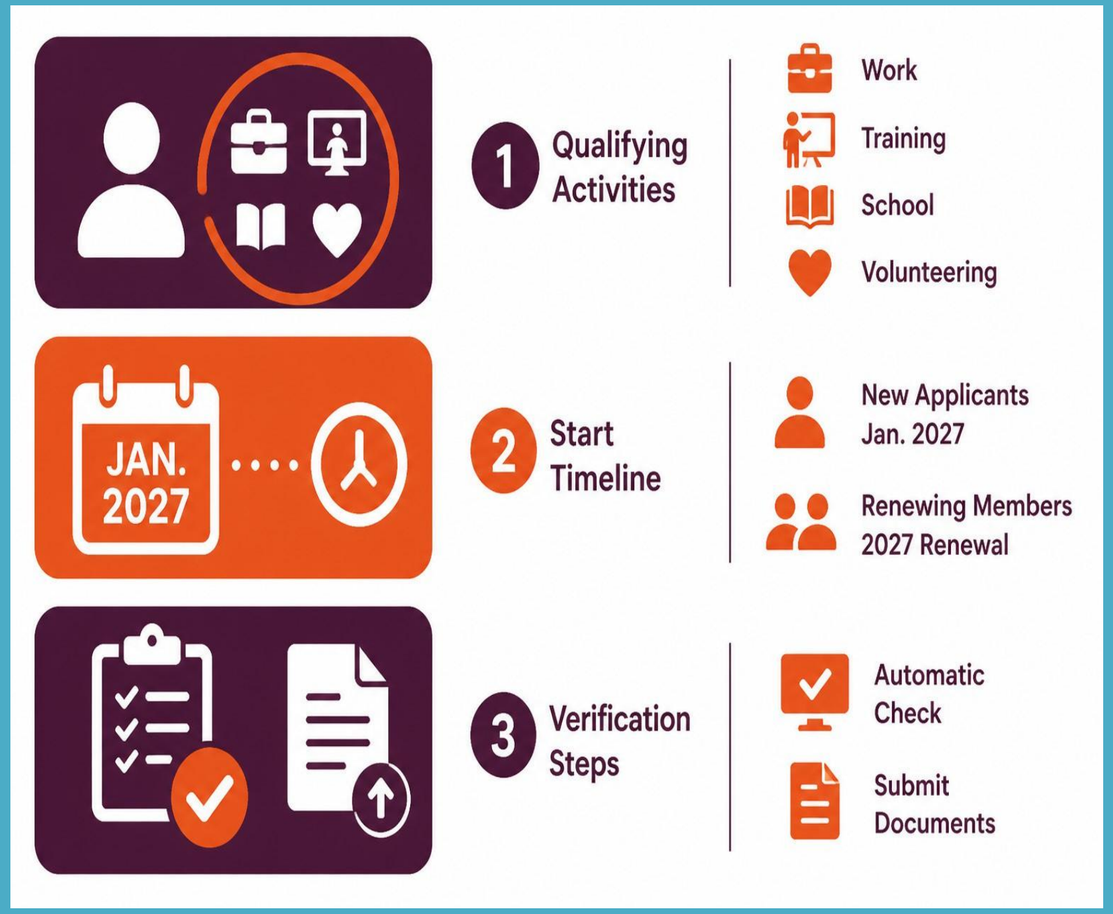
- You may qualify through work, training, school, volunteering, or a mix.
- In at least 1 calendar month since their last renewal, will need to show that they earned at least $580 a month, or
- spent at least 80 hours a month working, going to school, participating in a work program, volunteering, or a combination of these activities

When it starts

- New applicants start Jan. 2027, showing activity from the prior month.
- Renewing members start based on their 2027 renewal timing.

Proof and paperwork

- Doing the activity is not enough; you must **report it** too.
- If the state cannot verify automatically, you may need to submit forms or documents.



Who Is Exempt

Automatic exclusions

- You are not subject to the work rules if you have **Medicare**, or receive SSI/SSDI.
- People in long-term services and supports or certain buy-in programs are excluded.



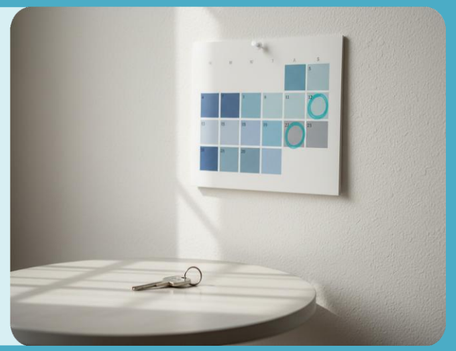


Family and pregnancy exclusions

- Caregivers for a child age 13 or younger, or a person with a disability, are excluded.
- Pregnant members, and some members pregnant within the last 12 months, are excluded.
- Some veterans with a total, permanent service-connected disability are excluded.

Short-term hardship exceptions

- Some temporary situations may qualify, like high local unemployment or a declared disaster.
- Also: inpatient/acute medical care or needing to travel for medical care.



Medical Frailty Explained

What “medically frail” means

- A health condition can exclude you if it **significantly limits** meeting the requirement.

Examples that may qualify

- Blindness, substance use disorder, disabling mental health, disability, or serious medical condition.

The key test

- It is about function: can you realistically complete 80 hours a month?

What to expect with proof

- Colorado plans to accept **self-attestation** in 2027; documentation is more likely after 2028.



Volunteering Can Count

A flexible way to qualify

- If you are not working, volunteering can meet the requirement.

Hours you may need

- A qualifying month generally means **80 documented hours** of volunteer service.

Where volunteering can happen

- Examples include food pantries, senior centers, schools, churches, and local groups.

A flexible option for eligible members

- Volunteering can be a realistic option when reducing hours, retiring or for members who need a qualifying activity.





3. Compliance and Reporting

IMPORTANT!

Federal Changes to

Colorado's Medicaid Program

When and How to Comply with Work Requirements

For renewing members

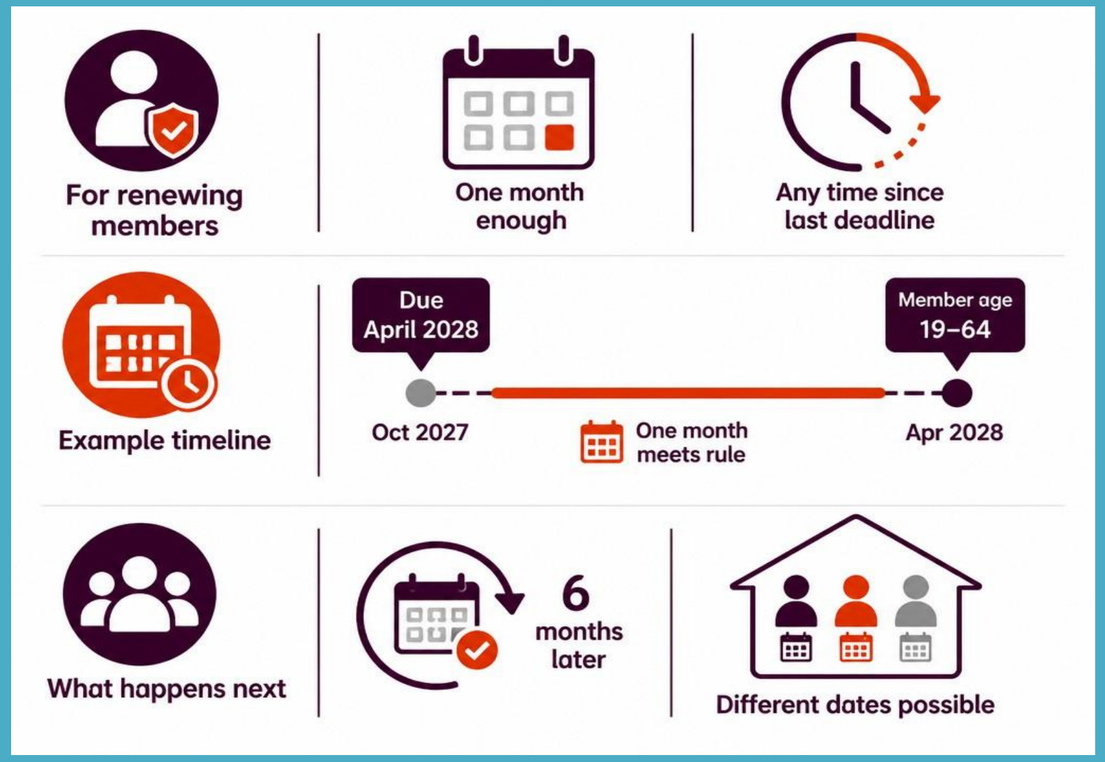
- If you must comply, you only need **one qualifying month**.
- That month can be any time since your last renewal deadline.

Example timeline

- Renewal is due April 2028 for a member age 19–64.
- They can meet the rule in one month between Oct 2027–Apr 2028.

What happens next

- If renewed, the next redetermination is set **6 months** later.
- Other people in your household may have different renewal dates.



When do new applicants have to comply with Work Requirements

The timing rule for new applicants

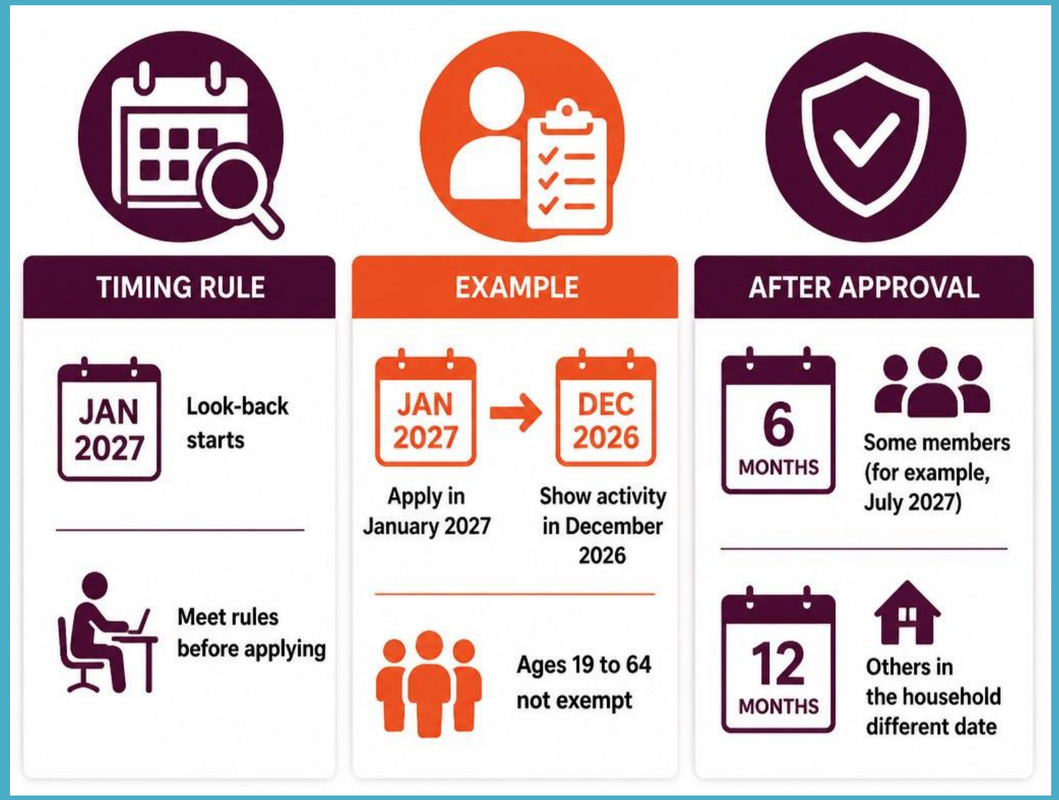
- If work rules apply, you must meet them in the **month before** you apply.
- This look-back starts when work requirements begin in January 2027.

Example: Applying in January 2027

- A January application means showing qualifying activity in **December 2026**.
- This applies to adults ages 19 to 64 who are not exempt.

What happens after approval

- Some members may be placed on a **6-month renewal** cycle (for example, July 2027).
- Others in the household may have a different renewal date (including 12 months).



How to Report Work and Community Engagement Activities

Reporting is required

- Doing the activity is not enough; you must **report it** too.

Forms may be needed

- New and current members may complete a form to confirm if rules apply.

State checks first

- HCPF will try to verify your status using existing data sources.
- If they cannot, you must send requested proof within the deadline.

How to submit

- You will get the right form for your situation (work, training, school, or volunteer).
- Submit through **PEAK** online or turn in a paper form.





4. Next Steps and Marketplace Options

What To Do First

Update your contact details

- Keep your address, phone, and email current in PEAK.
- This helps you receive renewal and work requirement notices on time.

Check whether rules may apply

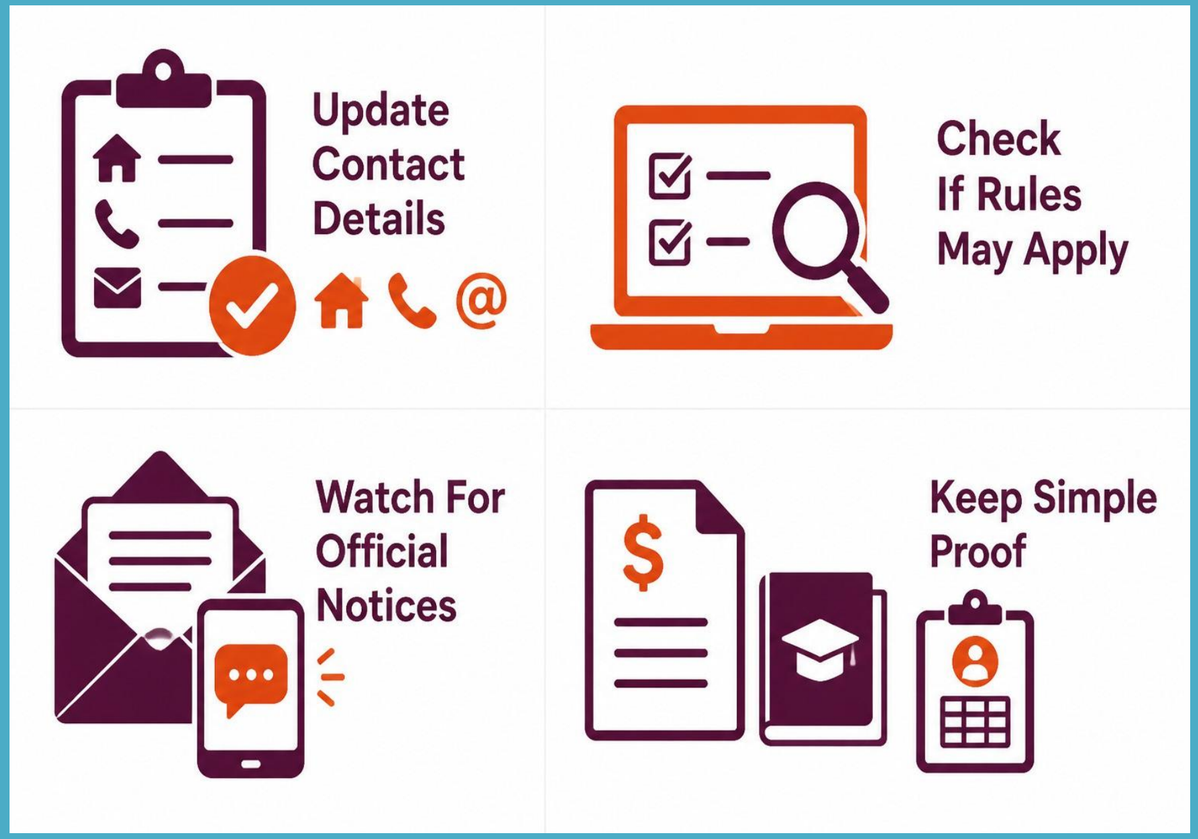
- Use the state Work Requirements Screener Tool for a quick check.
- It does not use personal identifying information.

Watch for official notices

- Look for letters by mail, plus optional texts or emails.
- Respond quickly to avoid a preventable loss of coverage.

Keep simple proof, just in case

- Save pay stubs, training or school records, and volunteer-hour logs.
- Reporting may be required even when activities are completed.



Marketplace Help If You Lose Medicaid

If Medicaid coverage ends

- Connect for Health Colorado can be your next coverage option.
- You can shop during Open Enrollment or use a Special Enrollment Period.

Premium help in 2027

- Colorado Premium Assistance continues for APTC-eligible households.
- It is added automatically after federal tax credits.

Why it matters for your budget

- State and federal help together can lower monthly premiums.
- Colorado Premium Assistance is not repaid at tax time.

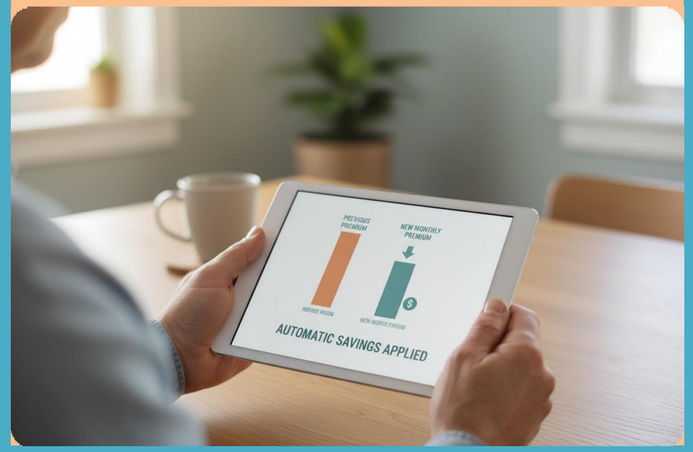


Financial Help and Enrollment Updates

01

Colorado Premium Assistance (CPA)

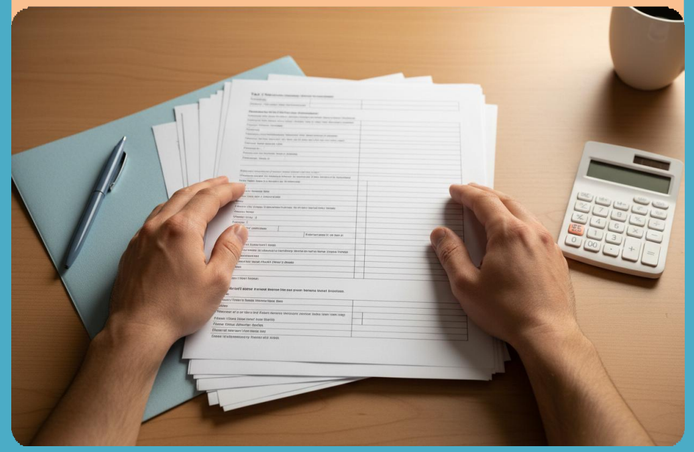
- CPA can lower premiums for APTC-eligible households at **100% to 400% FPL**.
- It is applied **automatically** after federal tax credits reduce the bill.



02

What this means at tax time

- CPA is state-funded and does **not** get reconciled on your taxes.
- If income changes, CPA does not create a repayment like APTC can.



03

Enrollment dates and smart shopping

- Open Enrollment runs **Nov. 1, 2026 to Jan. 15, 2027**.
- Compare plans yearly because premiums, networks, and benefits can change.



Local Help Is Available



Get renewal help locally

- County human services offices and eligibility sites can help you complete renewals and fix missing information quickly.



Marketplace enrollment support

- Certified Assisters, brokers, and Customer Service can help compare plan options and financial help if you move to Marketplace coverage.



Questions after a denial

- If you were recently denied Health First Colorado or CHP+ and have eligibility questions, call **855-302-4963**.



Importance for members

- Ask for help early to avoid gaps, especially if you are nearing Medicare eligibility or your income is changing.
- Address eligibility questions quickly.



5. Summary and Final Advice

Your Best Next Steps

Stay ready for renewal notices

- Keep your mailing address, phone, and email current so you do not miss deadlines.
- Respond quickly to any renewal packet or verification request to prevent a lapse.

If health limits work, ask about exemptions

- Medical frailty can apply when a condition **significantly impairs** meeting requirements.
- In 2027, Colorado expects to allow **self-attestation**, with more verification later.

Have a back-up plan if Medicaid changes

- If you lose Medicaid, enroll through Connect for Health Colorado promptly to avoid gaps.
- Plan Year 2027 includes automatic Colorado Premium Assistance for eligible households.

Members who are subject to the requirements will lose their coverage if they are not in compliance or fail to provide information showing they are exempt.

