



FOR IMMEDIATE RELEASE

June 2, 2026

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MHPA Issues Statement in Response to CMS Releasing Proposed Regulations on Medicaid Community Engagement Requirements

In response to the Centers for Medicare & Medicaid Services releasing an interim final rule (IFR) on the Working Families Tax Cut Act community engagement requirement, MHPA President and CEO Craig A. Kennedy, MPH issued the following statement:

“First and foremost, MHPA remains focused on ensuring those eligible for Medicaid do not lose coverage due to procedural reasons. Now that community engagement requirements are law, MHPA believes they must be implemented in a way that is workable for states, fair and navigable to enrollees, and consistent with statutory requirements and protections.

“Significantly more restrictive than what the Working Families Tax Cut Act requires, the Administration’s community engagement rules threaten coverage for the very people Congress intended to protect. We have long expressed concern with the implementation timelines included in the Working Families Tax Cut Act, and the new procedures required of states, plans and enrollees reconfirm this concern.

“By drastically narrowing who qualifies for a medical frailty exemption and requiring that individuals prove they are unable to work, not just that they have a serious medical condition, it is inevitable that medically frail individuals who Congress intended to exempt from community engagement requirements will lose coverage.

“MCOs have a proven track record of reaching enrollees during complex transitions, most recently during the post-COVID-19 unwinding of continuous enrollment, and they stand ready to assist enrollees and states to traverse this new transition, as well as more frequent eligibility determinations. MHPA looks forward to providing formal, detailed feedback on the IFR and working with the Administration to ensure that eligible people remain covered.”

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About MHPA

Founded in 1995, Medicaid Health Plans of America (MHPA) is the only national association that solely represents the interests of the Medicaid managed care industry. Through its advocacy and research work, MHPA supports innovative policy solutions that enhance the delivery of comprehensive, cost-effective, and quality health care for Medicaid enrollees. MHPA works on behalf of its more than 160-member health plans which serve nearly 48 million Medicaid enrollees in 40 states, Washington, D.C., and Puerto Rico. MHPA's members include for-profit and non-profit national, regional, and single-state health plans that compete in the Medicaid market. Visit mhpa.org for more information.