



THE LIVER SPOT COMMUNITY

We Do Brave Things Here

LIVER SUPPORT FROM A PATIENT'S PERSPECTIVE

MEDICAID COMMUNITY ENGAGEMENT REQUIREMENTS



WHAT THE LIVER SPOT COMMUNITY NEEDS TO KNOW

Information current as of June 2026

WHY ARE WE TALKING ABOUT THIS?



Beginning no later than January 1, 2027, many states will begin implementing new federal Medicaid Community Engagement Requirements (sometimes called "Medicaid Work Requirements"). These new rules may affect whether some adults remain eligible for Medicaid.

For people living with advanced liver disease, recovering from alcohol use disorder, awaiting transplant, or adjusting to life after transplant, maintaining health insurance is often essential for ongoing medical care.

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FREQUENTLY ASKED QUESTIONS

1



What is the Medicaid Community Engagement Requirement?

Certain adults enrolled through Medicaid Expansion may be required to complete 80 hours per month of qualifying activities to keep Medicaid coverage.

Qualifying activities may include:

- Employment
- Job training
- Education
- Community service
- Approved work programs

Some people may also qualify by earning a minimum monthly income established by federal rules. Activities may be combined to reach the 80-hour monthly requirement.

2



When does this start?

Federal law requires states to implement these requirements no later than **January 1, 2027**, although some states may begin earlier.

3



Does everyone on Medicaid have to comply?

No. The requirements apply only to certain Medicaid beneficiaries. Many people are exempt.

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Who may be exempt?

Federal guidance includes exemptions for many individuals, including:

- Pregnant individuals
- Postpartum individuals
- People considered medically frail
- Many people with disabilities
- People already meeting similar SNAP or TANF work requirements
- Certain caregivers
- Former foster youth
- American Indians and Alaska Natives

Additional state-specific exemptions may also exist.

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What does "medically frail" mean?

This is an important question. CMS recognizes that some individuals have serious medical conditions that make work requirements inappropriate. Examples may include people with:

- Serious chronic illnesses
- Conditions requiring ongoing treatment
- Physical or mental limitations
- Complex medical needs

States will determine how medical frailty is documented using federal guidelines. Some aspects of these determinations are still being clarified.

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I have liver disease. Am I automatically exempt?

Not necessarily. Having liver disease alone does not automatically qualify someone for an exemption. However, many Liver Spot participants may qualify if they are considered medically frail or meet another exemption category. Each person's situation is unique.

7



I am waiting for a liver transplant. Will this affect me?

Possibly. Many transplant candidates have serious medical conditions that may qualify for exemptions, but eligibility will depend on state implementation and individual circumstances. If you are listed for transplant, discuss this with your transplant coordinator, your hepatologist, and your Medicaid case worker. Do not assume your exemption will happen automatically.

8



I already work. Do I have anything to worry about?

Possibly. Even if you are working enough hours, you may still have to report or verify your work. Many experts note that maintaining eligibility may depend not only on meeting the requirement but also on completing any required documentation.

9



I can't work because of my health. What should I do?

If your medical condition limits your ability to work:

- Speak with your physician.
- Ask whether your condition may qualify as medically frail.
- Keep copies of important medical documentation.
- Stay in communication with your Medicaid office.

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Does volunteering count?

In many cases, yes. Community service is listed as one of the qualifying activities under the federal rule. Specific qualifying activities will ultimately be determined by your state's implementation.

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Does school count?

Yes. Enrollment in an educational program at least half-time can satisfy the federal requirement.

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Can different activities be combined?

Yes. Federal rules allow combinations of work, education, community service, and qualifying programs to reach the required monthly hours.

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What happens if I don't meet the requirement?

States are required to notify individuals if they cannot verify compliance and generally must provide an opportunity—typically 30 days—to demonstrate compliance or show that an exemption applies before taking action on eligibility.

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Could I lose Medicaid because of paperwork?

Potentially. Some health policy experts and researchers point to earlier state experiences in which eligible people lost coverage because of reporting or administrative issues rather than because they were not working. This is one reason it is important to respond promptly to notices and keep documentation up to date.

WHAT YOU CAN DO NOW



STAY INFORMED.

Rules will be implemented by each state.



KEEP YOUR CONTACT INFORMATION UPDATED.

Don't miss important Medicaid notices.



SAVE IMPORTANT MEDICAL RECORDS.

Keep copies of:

- physician letters
- transplant status
- hospital discharge summaries
- disability documentation



TALK WITH YOUR HEALTHCARE TEAM.

Ask: "Will my medical condition qualify me for an exemption?"



DON'T IGNORE MAIL FROM MEDICAID.

Deadlines matter.



REACH OUT EARLY IF YOU RECEIVE A NOTICE.

Waiting can make problems harder to resolve.

REMEMBER

The Liver Spot is a peer-support community. We are not attorneys, insurance specialists, or Medicaid caseworkers. We encourage every participant to discuss their individual situation with:



Their transplant center



Their hepatology team



Their Medicaid eligibility office



A qualified benefits counselor or legal aid organization, if needed



FINAL THOUGHTS

For many people in recovery and living with liver disease, Medicaid is more than an insurance program—it can be the pathway to transplant evaluation, medications, counseling, laboratory monitoring, and long-term recovery support.

The new Community Engagement Requirements introduce additional responsibilities for some beneficiaries, but they also include exemptions and appeal processes. Understanding the rules early, keeping documentation organized, and staying connected with healthcare providers can help reduce the risk of interruptions in coverage.