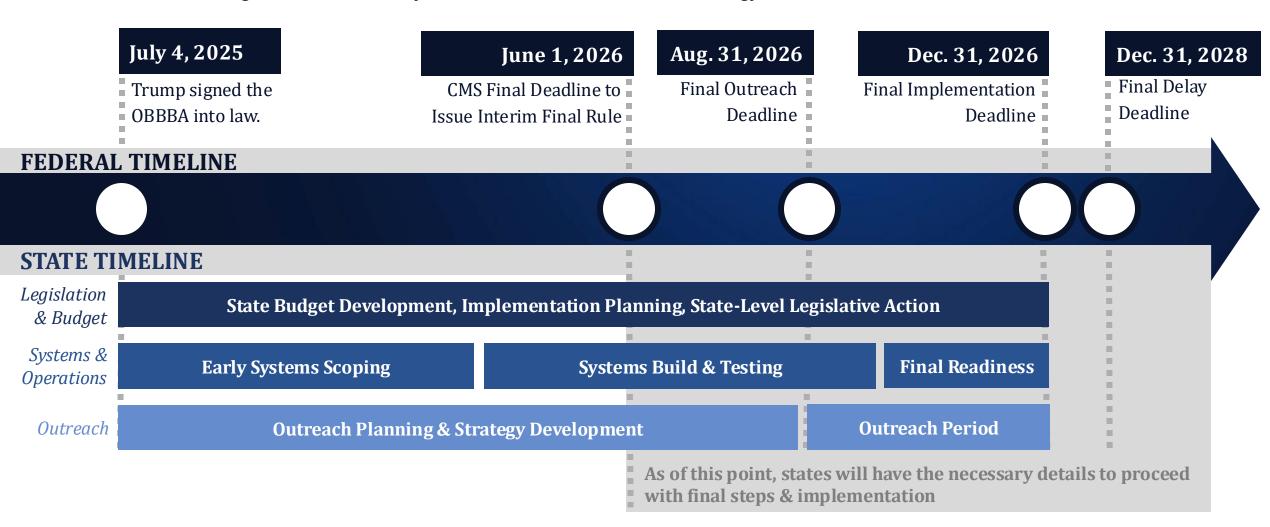
# STATE ROADMAP FOR OBBBA WORK REQUIREMENTS



This roadmap outlines how states may prepare for OBBBA's new Medicaid work requirements, though exact steps and timing will vary based on each state's legislative calendar, system readiness, and outreach strategy.



**NOTE:** This roadmap assumes states and CMS follow only the federal deadlines with a one-month lookback period. However, states may choose to implement earlier or use up to a three-month lookback, which would shift these deadlines and timelines forward. Additional detail on these options is provided on the following page.

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#### **Federal Deadlines**

#### June 1, 2026 — CMS Interim Final Rule

CMS will issue an interim final rule to provide states with guidance on the standards and processes of implementing the work/community engagement requirements. This includes enforcement standards, verification requirements, exemption definitions, data-matching expectations, and operational parameters.

#### August 31, 2026 — Outreach Deadline

This is the latest deadline for states to begin outreach, notifying affected individuals using at least two communication channels (mail or email, plus phone, text, or website). This deadline may shift based on:

- 1. State-selected compliance lookback period (outreach must start three months before it begins).
- 2. States choosing early implementation.

### December 31, 2026 — Requirements in Place

All expansion states must have work/community engagement requirements active for adults ages 19–64. HHS may grant "good faith" extensions but details for qualifying are not clear and they cannot extend beyond December 31, 2028.

#### January 1, 2027 — Enforcement Begins

After a 30-day grace period, states must begin terminating coverage for individuals not meeting the 80 qualifying hours requirement. Monthly verification is required.

#### December 31, 2028 — Extension Deadline

All "good faith" extensions will end. No state may delay implementation beyond this date.

### **States Must Make Three Key Decisions...**

#### 1. Start Date

Although requirements must be in place no later than January 1, 2026, states may choose to implement earlier.

#### 2. Lookback Period Length

States may set their own look-back period, between a minimum of one month and a maximum of three consecutive months.

#### 3. Verification Frequency

States must verify compliance at application and renewal every six months, but may require more frequent verification including monthly.

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With only seven months between CMS issuing implementation guidance and the date states must be fully operational, states will be forced to take steps to prepare for compliance before they have all expected guidance. The actions below outline key steps that states may take, highlighting where state-specific timelines and requirements may differ.

**Legislation & Budget** 

To be in compliance, states will need to begin preparing legislative and budget actions well before CMS issues guidance. In late 2025 and early 2026, state agencies are likely to review existing laws to identify any gaps in authority for implementing work requirements, conducting verification, and sharing data. During this time, we could see states draft and pre-file bills, secure preliminary budget requests, and coordinate agreements for data sharing and outreach.

During the 2026 legislative session, states may look to pass enabling laws and appropriations, establish the length of the compliance look-back period, set verification schedules, and codify exemptions. For states that adjourn before June 1, leaders may decide to act during the session as waiting for CMS guidance could result in missed deadlines. Biennial legislatures without a 2026 session could enter special sessions, while year-round legislatures will still need to plan for procedural delays. The Center on Budget and Policy Priorities maintains a helpful <u>tracker</u> of current state decisions regarding special legislative sessions. A full list of state legislative sessions can be found <u>here</u>.

**Systems & Operations** 

Building the systems needed to implement work requirements will require long lead times. Many states have already begun assessing their eligibility and data systems, identifying necessary updates, and mapping out how compliance will be tracked and exemptions applied. Even before federal guidance is issued, preliminary design work, vendor engagement, and integration planning is starting. Once the interim final rule is released, states will move to finalize specifications quickly, conduct thorough testing, and prepare staff to handle new processes. The statutory deadline requires fully functional systems in place by late 2026, ready for enforcement to begin on January 1, 2027, with contingency plans for technical issues.

Outreach

To minimize coverage loss, states must develop outreach strategies that use multiple communication methods, are accessible in multiple languages, and are coordinated with plans and providers. The statute requires states to begin outreach at least three months before the start of the first compliance look back period, meaning states that choose early implementation or longer look-backs will need to accelerate their timelines. Beyond initial notices, states will need ongoing communication and support to help individuals understand the requirements, request exemptions, and avoid coverage loss due to procedural issues.