



Cúram H.R.1 Medicaid Community Engagement Cartridge 1.1.0

May 2026 Enablement Material

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Overview

The **HR1 Medicaid Community Engagement Cartridge 1.1.0 release** is the second release of the cartridge and is cumulative, containing all capabilities from Release 1 (version 1.0.0) along with the new enhancements delivered in this update.

Release 1 introduced support for determining the application lookback period. Release 2 builds on that foundation by delivering the renewal-specific rules and rate table values required to calculate the lookback period during renewals and scheduled redeterminations.

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This slide provides an overview of the HR1 Medicaid Community Engagement Cartridge Release 1.1.0.

Release 1.1.0 represents the second official release of the cartridge and is a **cumulative update**. This means it includes **all functionality delivered in Release 1 (version 1.0.0)**, along with additional enhancements introduced in this release. Customers adopting Release 1.1.0 do not need to separately implement any prior releases.

Release 1 focused on establishing the foundational capability to **determine the application lookback period**, enabling accurate evaluation of community engagement requirements at the time of initial determination.

Release 2 builds on that foundation by extending support into **renewals**. Specifically, it introduces the **renewal-specific business rules and rate table values** required to calculate the lookback period during **renewals and scheduled redeterminations**.

Together, these capabilities provide a more complete and scalable solution for managing Medicaid community engagement requirements across the full eligibility journey.

Overview - New Cartridge Adapts to Policy, Saves Time, and Rework

Medicaid Community Engagement Cartridge

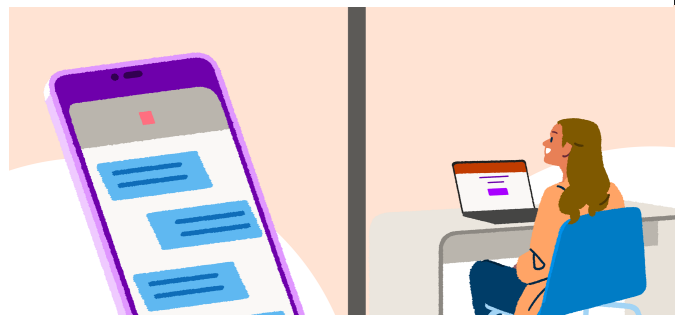
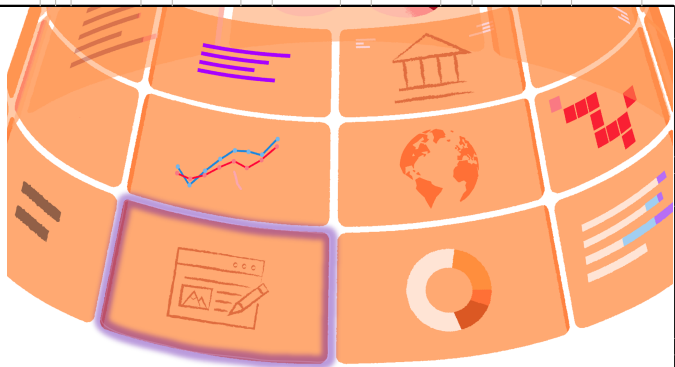
Provides **federal rules and evidence** required to capture new data and evaluate an individual's exemptions and compliance.

- Eliminates the need for states to build core Community Engagement Eligibility rules & evidence
- **Accelerates** the implementation process for community engagement requirements
- It is available to **any customer** on v8.x
- Upgrade **not required**, Cartridge will be delivered as a zip file.

Implementation

- Customers will **need to integrate these rules** into existing rulesets, screens, IEG scripts, verification strategies and business process.
- **Cartridge** designed to accommodate state specific options through extension.

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The HR1 Medicaid Community Engagement Cartridge delivers **federal policy rules and evidence**, so states don't have to build Community Engagement logic from scratch.

Rather than each customer interpreting the legislation and implementing their own version, the cartridge provides a **consistent, policy-aligned foundation** that reflects federal requirements for qualifying activities, exemptions, and compliance determination.

The cartridge is designed to **integrate into an existing Cúram implementation**. It doesn't require a platform upgrade and is delivered separately, similar to an iFix.

Customers can adopt it on **v8.x** and incorporate it into their current rulesets, screens, and business processes.

Importantly, while the cartridge **eliminates the need to design core Community Engagement rules and evidence**, it doesn't fully replace state-specific configuration.

Customers will still need to integrate the delivered content into their implementation and extend it where required, for example, to

support **state-specific options** or items that are out of scope for this first release.

The primary benefit is speed and confidence:

- faster implementation timelines,
- assurance that the delivered rules are aligned with the federal policy intent.

Documentation available for the Cartridge

Document	Description	Location
HR1 Medicaid Community Engagement Cartridge Compliance Rules.xls	This document describes the Cúram business rule and data model requirements used to assess Community Engagement compliance for Medicaid applicants during the application lookback period, as defined in Sections 71119(a)(xx)(1)(A) and 71119(a)(xx)(3)(A) of the HR1 Act. It also covers the lookback period rules applicable to Renewals and Scheduled Redeterminations, as outlined in Section 71119(a)(xx)(1)(B) of the HR1 Act.	All supporting materials are available via the HR1 Medicaid Community Engagement Cartridge ZIP and the Merative Support Portal.
HR1 Medicaid Community Engagement Cartridge Evidence.xls	This document outlines the new and updated evidence types required to support the HR1 Medicaid Community Engagement Compliance Rules.	To access documents from Merative Support Portal:
HR1 Medicaid Community Engagement Cartridge Business Scenarios.xls	This document outlines a set of key business scenarios supported by the evidence and rules delivered as part of the HR1 Medicaid Community Engagement Cartridge. Note: These scenarios are intended to illustrate typical use cases and are not intended to represent an exhaustive list of all possible scenarios.	<ul style="list-style-type: none"> - Log in to Merative Support https://merative.my.site.com/mysupport/s/ - Enter your credentials - Navigate to Knowledge Base, then Article Search, select "Cúram Knowledge" as the Data Category Group and then select "HR1 Medicaid Community Engagement" as the Data Category.
HR1 Medicaid Community Engagement Cartridge Renewal Business Scenarios.xls	This document outlines key renewal/scheduled redetermination business scenarios covered by the evidence and rules provided in the HR1 Medicaid Community Engagement Cartridge. Scenarios cover variations in the renewal/scheduled redetermination look-back period and number of compliance months.	
HR1 Medicaid Community Engagement Cartridge Developer Guide.pdf	This document focuses on the delivered HR1 Standalone Rules and Evidence, describing the structure and organization of the delivered HR1 rule sets and supporting evidence. This document assumes familiarity with Cúram development, in particular the CER rules framework and Dynamic Evidence concepts. It is intended for technical users responsible for developing, reviewing, configuring, extending, or integrating the HR1 rules.	If you don't yet have access, please submit a request through the portal.
README.txt	Contains installation, upgrade, and rollback steps for taking on the cartridge. Intended for technical users responsible for environment setup and cartridge deployment.	README.txt is available via the HR1 Medicaid Community Engagement Cartridge ZIP

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This slide outlines the supporting materials delivered with the HR1 Medicaid Community Engagement Cartridge.

These documents are included in the cartridge ZIP and are also available through the Merative Support Portal, so customers and partners can easily access them during implementation.

The Compliance Rules spreadsheet details the Cúram business rules and data model requirements used to assess Community Engagement compliance. This includes rules for the application lookback period, as defined under the relevant sections of the HR1 Act, and has been updated to also cover Renewals and Scheduled Redeterminations, including the applicable lookback period rules for those processes.

The Evidence spreadsheet outlines the new and updated evidence types introduced with the cartridge. These evidence types support the rules needed to capture qualifying activities, exemptions, and compliance outcomes.

The Business Scenarios spreadsheet provides a set of representative scenarios supported by the delivered rules and evidence. These are intended to

illustrate how the cartridge behaves in common situations, rather than being an exhaustive list of all possible cases.

The Renewal Business Scenarios spreadsheet focuses specifically on renewal and scheduled redetermination scenarios. It illustrates how the cartridge supports variations in lookback period definitions and numbers of compliance months, helping customers understand how Community Engagement compliance is evaluated over time during renewal processing.

The Developer Guide is a technical document aimed at developers. It describes the structure and organization of the delivered standalone rules and evidence, and assumes familiarity with CER rules and Dynamic Evidence. This guide is particularly relevant for teams configuring, extending, or integrating the cartridge into their existing implementation.

All of these materials can be accessed via the HR1 Medicaid Community Engagement Cartridge zip and the Merative Support Portal. If customers don't yet have access, they can request it directly through the portal.

Rules Overview

Included in Cartridge

Qualifying Activities

- 80 hours per month of work, community service, and/or work program participation
- Enrolled in education at least half time
- Any combination of the above totaling a minimum of 80 hours per month
- Monthly income of minimum wage multiplied by 80 hours
- Seasonal workers with an average monthly income over 6 months of minimum wage multiplied by 80 hours

Included in Cartridge

Mandatory Exemptions

- Under the age of 19
- Parent/guardian/caretakers of dependent children under age 14 or disabled individuals
- Pregnant or receiving postpartum coverage
- Medically frail
- Meeting SNAP/TANF work requirements
- American Indians and Alaska Natives
- Disabled veterans
- Incarcerated or released from incarceration within 90 days
- Entitled to Medicare Part A /enrolled in Medicare Part B
- Participating in a drug addiction or alcoholic treatment and rehabilitation program

Currently not in Scope

Optional Hardship Exceptions

- State option to allow short-term hardship exceptions for an individual who:
- Was in an inpatient hospital, nursing facility, intermediate care facility, or inpatient psychiatric hospital
 - Resided in a county with a federally declared emergency or disaster
 - Resided in a county with a high unemployment rate (above 8% or 1.5x the national unemployment rate), subject to a request from the state to the Secretary
 - Traveled outside the individual's community for an extended period of time to receive medical services for themselves or their dependent

Reference: [KFF: A Closer Look at the Work Requirement Provisions in the 2025 Federal Budget Reconciliation Law](#)

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The HR1 Medicaid Community Engagement Cartridge focuses specifically on the **federal requirements** defined in the HR1 Act.

In this release, the cartridge delivers rules and evidence that support **qualifying activities** and **mandatory exemptions** required to determine Community Engagement compliance.

Qualifying activities include meeting monthly work or community service hours, participation in education programs, or income-based thresholds, including seasonal worker calculations.

Mandatory exemptions cover federally defined exemptions such as pregnancy, disability, caregiving responsibilities, SNAP or TANF work compliance, and similar categories.

What's important to highlight here is that **optional hardship exceptions are out of scope** for this release.

These hardship exceptions such as impacts from natural disasters, high unemployment areas, or short-term medical situations are **state options** under the legislation. Because they vary by state and require state-level policy decisions, they are not delivered as part of the out-of-the-box cartridge.

This means the cartridge gives customers a **strong federal baseline** that aligns with HR1 requirements, while still allowing states the flexibility to configure or extend their solution where state-specific options apply.

To summarise:

- The cartridge covers what is **federally required**
- It does **not prevent** states from adding optional hardship policies
- But those state-specific policies would need to be implemented separately, based on local requirements

This approach helps accelerate implementation while still respecting state flexibility and policy ownership.

Business Scenarios - V1.0.0

Key business scenarios supported by the evidence and rules provided in the HR1 Medicaid Community Engagement Cartridge. These are available through the HR1 Medicaid Community Engagement Cartridge ZIP and the Merative Support Portal.

	Scenario Overview	Business Rule Impacted	Scenario Description
1	Individual satisfies Mandatory Exemption (Urban Indian) in Lookback Period (1 month)	Individual is an Indian, Urban Indian, Californian Indian or determined eligible as an Indian for the Indian Health Services by the Secretary	This scenario demonstrates that the individual is compliant in the lookback month and exempt from Medicaid work requirements by meeting the mandatory Urban Indian exemption.
2	Individual satisfies Mandatory Exemption (SNAP work compliance) in Lookback Period (1 month)	Individual is a member of a household that receives SNAP benefits and is not exempt from the SNAP work requirements	This scenario demonstrates that the individual is compliant in the lookback month and exempt from Medicaid work requirements as they are a member of a household that receives SNAP benefits and is not exempt from the SNAP work requirements.
3	Individual satisfies Qualifying Activity (Educational program hours) in Lookback Period (1 month)	(D) Individual is enrolled in an educational program at least half-time	This scenario demonstrates that the individual is compliant with Medicaid work requirements in the lookback month by meeting the educational program hours qualifying activity requirement.
4	Individual does not satisfy Qualifying Activity or Mandatory Exemption in Lookback Period (1 month)	(B) The individual completes not less than 80 hours of community service	This scenario demonstrates that an individual is non-compliant with Medicaid work requirements if they fail to meet the qualifying activities and do not qualify for a mandatory exemption.
5	Individual satisfies Qualifying Activity (Seasonal worker) in Lookback Period (3 months)	(G) An individual's average monthly income over the preceding 6 months must be greater than or equal to the Federal Minimum Wage multiplied by 80 hours AND the individual is a Seasonal Worker	This scenario demonstrates that an individual is compliant with the Medicaid work requirements if their average monthly income over the preceding 6 months is greater than or equal to the Federal Minimum Wage multiplied by 80 hours AND the individual is a seasonal worker.

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This slide outlines the key business scenarios covered by the evidence and rules provided in the HR1 Medicaid Community Engagement Cartridge.

- **Scenarios 1 and 2** show **mandatory exemptions**, such as Urban Indian status and SNAP work compliance.
- **Scenario 3** demonstrates compliance through a **qualifying activity**, in this case education.
- **Scenario 4** confirms correct identification of **non-compliance** when no exemption or qualifying activity exists.
- **Scenario 5** illustrates **multi-month lookback logic**, handling seasonal worker income across multiple months.

Business Scenarios - V1.0.0

Key business scenarios supported by the evidence and rules provided in the HR1 Medicaid Community Engagement Cartridge. These are available through the HR1 Medicaid Community Engagement Cartridge ZIP and the Merative Support Portal.

	Scenario Overview	Business Rule Impacted	Scenario Description
6	Individual satisfies Mandatory Exemption (Inmate of a public institution) in Lookback Period (3 months)	Individual is an inmate of a public institution in the look back month or at any point during the three months leading up to the look back month	This scenario demonstrates that an individual is exempt from Medicaid work requirements if they were an inmate of a public institution during the lookback month or at any point within the three months leading up to it.
7	Individual satisfies multiple Mandatory Exemptions concurrently (Parent of a Disabled Individual and Caregiver of Disabled Individual) in Lookback Period (3 months)	Individual is a parent, guardian, caretaker relative or family caregiver of a dependent child 13 years of age and under OR a disabled individual	This scenario demonstrates that the individual is compliant throughout the entire 3 month lookback period by meeting multiple mandatory exemptions each month, caring for a disabled adult child and a disabled mother.
8	Individual satisfies multiple Mandatory Exemptions not-overlapping (Parent of a Disabled Individual, Caregiver of Disabled Individual) in Lookback Period (3 months)	Individual is a parent, guardian, caretaker relative or family caregiver of a dependent child 13 years of age and under OR a disabled individual	This scenario demonstrates that the individual is compliant throughout the entire 3 month lookback period by meeting the mandatory Parent/Guardian/Caretaker Relative/Family Caregiver exemptions each month. The exemption type changes during the lookback period based on household composition and caregiver responsibilities.
9	Individual satisfies Qualifying Activity (Working hours) and Mandatory Exemption (Caretaker relative of a disabled individual) in Lookback Period (3 months)	Individual is a parent, guardian, caretaker relative or family caregiver of a dependent child 13 years of age and under OR a disabled individual	This scenario demonstrates that the individual is compliant with Medicaid work requirements when they meet a qualifying activity and mandatory exemption in the lookback period.

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This slide contains more key business scenarios covered by the evidence and rules provided in the HR1 Medicaid Community Engagement Cartridge.

- **Scenario 6** demonstrates a **mandatory exemption** for individuals who are inmates of a public institution at any point during the lookback period.
- **Scenarios 7 and 8** show how the cartridge handles **multiple mandatory exemptions**, including both **overlapping** and **non-overlapping** exemptions across different months.
- **Scenario 9** illustrates how the rules evaluate **mixed outcomes**, where an individual meets both a **qualifying activity** and a **mandatory exemption** within the same lookback period.

Renewals Business Scenarios – V.1.1.0

Key business scenarios supported by the evidence and rules provided in the HR1 Medicaid Community Engagement Cartridge. These are available through the HR1 Medicaid Community Engagement Cartridge ZIP and the Merative Support Portal.

Scenario Overview	Business Rule Impacted	Scenario Description
1 Individual satisfies Mandatory Exemption (SNAP work compliance) in Renewal Look-back Period (6 months with 1 month of compliance required)	Individual is a member of a household that receives SNAP benefits and is not exempt from the SNAP work requirements	This scenario demonstrates that the individual is compliant in the renewal look-back period and exempt from Medicaid work requirements as they are a member of a household that receives SNAP benefits and is not exempt from the SNAP work requirements.
2 Individual satisfies Qualifying Activity (Educational program hours) in Renewal Look-back Period (6 months with 2 months of compliance required)	Individual is enrolled in an educational program at least half-time	This scenario demonstrates that the individual is compliant with Medicaid work requirements in the renewal look-back period by meeting the educational program hours qualifying activity requirement.
3 Individual does not satisfy Qualifying Activity or Mandatory Exemption in Scheduled Redetermination Look-back Period (3 months with 3 months of compliance required)	The individual completes not less than 80 hours of community service.	This scenario demonstrates that an individual is non-compliant with Medicaid work requirements in the scheduled redetermination look-back period (where a state redetermines compliance more frequently than at renewal) if they fail to meet the qualifying activities and do not qualify for a mandatory exemption for the required number of months.
4 Individual satisfies Qualifying Activity (Seasonal worker) in Renewal Look-back Period (6 months with 1 month of compliance required)	An individual's average monthly income over the preceding 6 months must be greater than or equal to the Federal Minimum Wage multiplied by 80 hours AND the individual is a Seasonal Worker	This scenario demonstrates that an individual is compliant with the Medicaid work requirements in the renewal period if, for the required number of months in the period, their average monthly income over the preceding 6 months is greater than or equal to the Federal Minimum Wage multiplied by 80 hours AND the individual is a seasonal worker. Note: In order to satisfy the seasonal worker qualifying activity requirement, and not the monthly income qualifying activity requirement, the individual's monthly income for each month in the look-back period must be less than \$580.00.

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This slide highlights **key renewal and scheduled redetermination business scenarios** supported by the evidence and rules delivered in the HR1 Medicaid Community Engagement Cartridge.

Scenario 1 demonstrates a **mandatory exemption** in a renewal look-back period, where an individual is exempt from Medicaid work requirements due to **SNAP work compliance**, provided they are not exempt from SNAP work requirements.

Scenario 2 illustrates compliance through a **qualifying activity**, where an individual meets the **educational program hours** requirement during the renewal look-back period.

Scenario 3 focuses on a **scheduled redetermination** and shows a **non-compliant outcome** when an individual fails to meet any qualifying activity or mandatory exemption for the required number of months in the look-back period.

Scenario 4 demonstrates compliance through the **seasonal worker qualifying activity** during a renewal look-back period, based on average monthly income thresholds and seasonal worker status.

Together, these scenarios show how the cartridge evaluates compliance across **different look-back periods, varying month requirements**, and both **qualifying activities and mandatory exemptions** in renewal and scheduled redetermination contexts.

Renewals Business Scenarios – V.1.1.0

Key business scenarios supported by the evidence and rules provided in the HR1 Medicaid Community Engagement Cartridge. These are available through the HR1 Medicaid Community Engagement Cartridge ZIP and the Merative Support Portal.

	Scenario Overview	Business Rule Impacted	Scenario Description
5	Individual satisfies Mandatory Exemption (Inmate of a public institution) in Renewal Look-back Period (6 months with 1 month of compliance required)	Individual is an inmate of a public institution in the look back month or at any point during the three months leading up to the look-back month	This scenario demonstrates that an individual is exempt from the Medicaid work requirements in the renewal period if, for the required number of months in the period, they were an inmate of a public institution during the look-back month or at any point within the three months leading up to it.
6	Individual satisfies multiple Mandatory Exemptions concurrently (Parent of a Disabled Individual and Caregiver of Disabled Individual) in the Renewal Look-back Period (6 months with 3 months of compliance required)	Individual is a parent, guardian, caretaker relative or family caregiver of a dependent child 13 years of age and under OR a disabled individual	This scenario demonstrates that the individual is compliant throughout the entire 6 month look-back period by meeting multiple mandatory exemptions each month, caring for a disabled adult child and a disabled mother.
7	Individual satisfies multiple Mandatory Exemptions not-overlapping (Parent of a Disabled individual, Caregiver of Disabled Individual) in Renewal Look-back Period (6 months with 3 months compliance required)	Individual is a parent, guardian, caretaker relative or family caregiver of a dependent child 13 years of age and under OR a disabled individual	This scenario demonstrates that the individual is compliant throughout the entire 6 month look-back period by meeting the mandatory Parent/Guardian/Caretaker Relative/Family Caregiver exemptions each month. The exemption type changes during the look-back period based on household composition and caregiver responsibilities.
8	Individual satisfies Qualifying Activity (Working hours) and Mandatory Exemption (Caretaker relative of a disabled individual) in Renewal Look-back Period (6 months with 3 months of compliance required)	The individual works not less than 80 hours Individual is a parent, guardian, caretaker relative or family caregiver of a dependent child 13 years of age and under OR a disabled individual	This scenario demonstrates that the individual is compliant with Medicaid work requirements when they meet a qualifying activity and mandatory exemption in the renewal look-back period.

This slide continues the set of **renewal-period business scenarios**,

Scenario 5 demonstrates that an individual is exempt from Medicaid work requirements in the renewal look-back period if they were an **inmate of a public institution** during the look-back month or shortly before it.

Scenario 6 shows how the cartridge evaluates **concurrent mandatory exemptions**, where an individual remains compliant by meeting multiple caregiver-related exemptions in each month of the renewal look-back period.

Scenario 7 illustrates compliance through **non-overlapping mandatory exemptions**, with the exemption type changing over time based on household composition and caregiving responsibilities.

Scenario 8 demonstrates a **mixed compliance outcome**, where an individual meets Medicaid work requirements through a combination of a **qualifying activity** and a **mandatory caregiver exemption** during the renewal look-back period.

Key Considerations

Area	Detail
New Code Table values to existing Code Tables	<p>The HR1 Medicaid Community Engagement cartridge introduces some new values to your existing code tables:</p> <ul style="list-style-type: none"> • Criminal Charge Status: None • Disability Type: Chronic Substance Use Disorder • Student Status: Three-Quarter Time and Leave of Absence <p>To avoid unexpected system or UI behaviour, customers should evaluate the usage of these code tables in their existing programs and determine whether their implementation and any customizations remains compatible or if adjustments are required to align with the new cartridge values.</p>
Integration Rules	<p>This release includes integration rules and rules attributes that customers can populate to indicate an individual's compliance. The rules attributes are as follows:</p> <ul style="list-style-type: none"> • snapWorkComplianceTimeline • tanfWorkComplianceTimeline • adultCategoryTimeline (MAGI) • stateWaiverTimeline (MAGI) • titleVEFosterCareTimeline (Non-MAGI) • titleVEAdoptionTimeline (Non-MAGI) • formerFosterCareCategoryTimeline (MAGI) • IncomeAsCalculatedUnderHR1Policy71119(a)(xx)(2)(F) <p>This gives customers the flexibility to decide how that information is sourced whether through integration with rule sets, other systems or business processes based on existing architecture.</p>
Display Rules	<p>This release delivers the rules to determine HR1 community engagement compliance only. The release does not include display rules, which are used to interpret and explain the rules results to caseworkers.</p>
Data Model (CGISS Customers)	<p>The HR1 Community Engagement rules are designed to work with the HCR v8.x evidence data model. Customers who have implemented MAGI using CGISS need to determine the best approach to satisfy the rules using CGISS evidence, considering existing evidence usage and alignment with current/future program implementation.</p>

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Impact of New Code Table values to existing Code Tables

As part of the HR1 Medicaid Community Engagement Cartridge, we introduce some new values to existing code tables.

These are not brand-new tables, but additional values added to tables that may already be in use across your system.

From a UI perspective, these new values will automatically appear in caseworker evidence pages, as well as in any IEG scripts that reference the affected code tables. This includes Application, Change of Circumstances, and Renewal scripts.

A good example is the Student Status code table, which is commonly used by both HCR and CGISS.

If a customer:

- has implemented HCR and CGISS,
 - adopts the HR1 cartridge, and
 - maintains separate IEG scripts for HCR and CGISS,
- then those new Student Status values will automatically be available in both scripts.

From a rules point of view, this can have an impact if you have existing business rules that are written to “include all values”. These rules may start behaving differently unless the new values are explicitly handled.

So the key guidance for customers is:

- Review where these code tables are used across programs
- Check existing rules, scripts, and UI behavior
- Confirm that any custom logic continues to behave as intended with the new values

Customers should review to avoid unexpected behavior and ensure a smooth adoption of the cartridge.

Integration Rules

The cartridge introduces integration rule attributes that bridge external data sources or internal logic with the core compliance rules.

By populating these rules attributes, customers can programmatically indicate an individual’s compliance or eligibility status across multiple benefit programs. The attributes cover key areas such as SNAP and TANF work compliance, MAGI and non-MAGI eligibility groups, Title IV-E foster care and adoption, former foster care status, state waivers, and HR1-specific income calculations.

A core benefit of this release is implementation flexibility. These attributes act as data containers and can be populated through existing rules engines, integrations with external systems, or business processes.

Display Rules

- This release of the HR1 Community Engagement Cartridge focuses on delivering the rules required to determine compliance with HR1 community engagement requirements. It does not include display rules.
- Display rules are typically used to translate rule outcomes into explanations that caseworkers or citizens see — for example, clear reasons why someone is compliant or non-compliant. Those display rules are intentionally left to the customer, as messaging, presentation, and explanation requirements vary widely by state and program.

Data Model (CGISS Customers)

The HR1 Community Engagement rules are delivered to work with the HCR v8.x evidence data model.

For customers who have implemented Medical Assistance using CGISS, there are some additional considerations when adopting the cartridge.

CGISS customers may already be capturing much of the information needed to support Community Engagement using existing CGISS evidence.

There are multiple ways to meet the HR1 requirements using CGISS, and there isn't a single prescribed approach.

The system integrator and the customer should determine the best approach based on:

- how evidence is already being captured today, and
- how that aligns with current or planned program implementations.

The overall goal is to reuse existing data wherever possible, avoid duplicating evidence, and reduce confusion for caseworkers who might otherwise see the same information captured in multiple places.

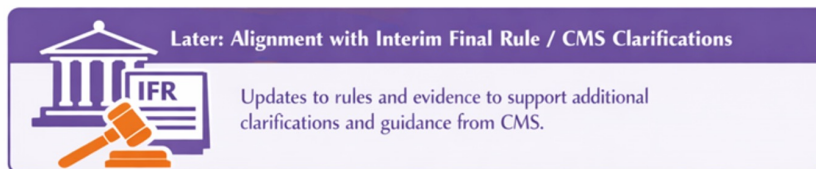
From a technical perspective, most of the adaptation effort for CGISS customers is isolated to a single ruleset: HR1EvidenceCalculatorRuleSet.

This ruleset centralizes access to evidence used by the HR1 policy rules.

Where CGISS evidence differs from HCR, the evidence calculator rules can be extended or updated to source the correct data and supply the values expected by the HR1 rules. This keeps changes contained and avoids widespread impact across the rules.

So the key message for CGISS customers is that the cartridge is compatible, but some configuration and mapping work is expected to align existing evidence with the delivered HR1 rules - with an emphasis on reuse and minimizing disruption.

Roadmap Candidates



This slide looks ahead to roadmap candidates, areas we are actively considering next, but which are dependent on additional federal clarity and customer adoption.

It's important to note that these are candidates rather than firm commitments. Sequencing and timing will be guided by customer feedback, uptake of the current cartridge, and the availability of clear regulatory direction.

At this time, the primary roadmap candidate is alignment with the Interim Final Rule and ongoing CMS clarifications. This would include updates to rules and evidence to reflect any additional CMS guidance related to Medicaid Community Engagement requirements as that guidance becomes available.

As CMS direction continues to evolve, we will assess impact and determine whether updates are best delivered through cartridge enhancements or configuration guidance.

Any additions or changes to the roadmap will be communicated as priorities are confirmed, ensuring customers have clear visibility into what's planned and why.

