

30/60/90 Day MCO Action Plan

30 Days - Establish Ownership

Goal: Eliminate ambiguity and surface risk

- ☐ Name HR1 executive owner + cross-functional lead with authority across ops, compliance, IT, and member services
- ☐ Baseline current application, renewal, and redetermination workflows
- ☐ Identify top 3 failure points from unwinding and renewals
- ☐ Confirm state target start date and delegation expectations
- ☐ Quantify exposure: expansion population size and churn sensitivity

Days 31–60: Reduce Unknowns

Goal: Replace assumptions with tested workflows. Discover gaps BEFORE launch.

- ☐ Decide build vs buy for verification and documentation workflows
- ☐ Map data exchanges with state eligibility systems and workforce agencies
- ☐ Define what will be ex parte (automated from govt systems) vs member-submitted
- ☐ Pilot revised documentation and communications flow with a small cohort
- ☐ Establish HR1 success metrics: avoidable terminations, time to verify, call volume etc

Days 61–90: Prove Readiness

Goal: Show defensible execution to avoid experimentation during launch

- ☐ Implement operational redesign + training. (Include end-to-end mock HR1 redetermination cycle)
- ☐ Stand up vendor / integration solutions
- ☐ Stress-test call center and case management load
- ☐ Finalize member education and outreach strategy
- ☐ Lock reporting cadence and escalation paths with the state
- ☐ Share readiness status and gaps transparently with state partners

30/60/90 Day Tech/Vendor Action Plan

30 Days - Establish Ownership

Goal: Eliminate ambiguity and surface risk. Establish yourself as a solution not a “tool.”

- ☐ Map how your product touches HR1 verification, exemptions, and reporting
- ☐ Identify where you reduce error, not just speed
- ☐ Align product language to specific HR1 risks (What are the problems you solve?)
- ☐ Identify one MCO or state partner for early design feedback

Days 31–60: Reduce Unknowns

Goal: Replace assumptions with tested workflows/ Establish evidence and boundaries for your product.

- ☐ Configure workflows to match real state and MCO processes
- ☐ Test mobile documentation capture, reminders, and escalation paths
- ☐ Demonstrate how errors are prevented, flagged, and corrected
- ☐ Produce implementation playbooks, not just product demos
- ☐ Align SLAs and responsibilities clearly

Days 61–90: Prove Readiness

Goal: Show defensible execution to avoid experimentation during launch.

- ☐ Support pilots with measurable outcomes tied to churn reduction
- ☐ Deliver audit-ready documentation and reporting outputs
- ☐ Train MCO and state-facing teams
- ☐ Finalize integrations and data governance standards
- ☐ Prepare for scale, not just pilots

HR 1 MCO Readiness Checklist

Policy Alignment

- ☐ Work with Medicaid State Directors to ensure you're engaged in compliance determination activities
- ☐ Confirm your state's target start date (default Jan 1, 2027; some states may accelerate).
- ☐ Define who is subject (expansion adults; confirm age cutoffs and nuances).
- ☐ List qualifying activities and 80 hours/month requirement.
- ☐ Document exemptions/hardships and how they must be verified.
- ☐ Track state plan milestones toward June 2026 implementation plan submission.

Data + System Readiness

- ☐ Inventory systems that must exchange HR1 data:
 - State eligibility portal / system
 - Workforce agency databases
 - Employer/payroll sources
 - Plan CRM + member comms tools
- ☐ Decide what will be ex parte vs member-submitted verification.
- ☐ Identify capability gaps:
 - Payroll integrations / automated paystub pulls
 - Mobile doc capture + OCR completeness checks
 - Audit-ready verification tracking

Financial Readiness

- ☐ Estimate coverage-loss/churn exposure in your expansion population.
- ☐ Model downstream costs:
 - Uncompensated care / provider disruption
 - Admin cost increase (verification + renewals)
 - Rate pressure / enrollment volatility
- ☐ Establish HR1 success metrics (e.g., avoidable terminations, renewal completion, time-to-verify, call center load).
- ☐ Tie ROI to risk reduction (not platform sales)

Member Experience Readiness

- ☐ Create clear, multilingual member education covering:
 - What counts as work/qualifying activity
 - How to report
 - Deadlines + consequences
- ☐ Build “hard-to-reach” plays (text-first, language translations, community partners, employer channels).
- ☐ Provide at-risk member supports (benefits counseling, reminders, one-stop screening).
- ☐ Set up feedback loops (termination reasons, friction hotspots, appeals).

Operational Readiness

- ☐ Map HR1 workflows integrated with state systems for:
 - New applications
 - Renewals / redeterminations (every 6 months minimum)
- ☐ Identify unwinding failure points you must prevent (missing docs, late reporting, member confusion, low ex parte rates).
- ☐ Name an HR1 internal owner + PMO timeline.
- ☐ Forecast staffing/training needs for:
 - Eligibility/enrollment ops
 - Member services/call center
 - Community outreach / navigators

Legal & Compliance

- ☐ Define documentation standards for:
 - Work verification
 - Exemptions/hardships
 - Renewal determinations
- ☐ Confirm HR1 reporting specs for state/CMS oversight.
- ☐ Run an audit simulation: “Could we defend decisions 12-18 months later?”

Governance & Ownership

- ☐ Assign accountable leads for each workstream:
 - HR1 strategy + overall responsibility
 - Regulatory/compliance
 - Eligibility workflows
 - Member outreach/comms
 - IT/data integration
 - Vendor management
 - Implementation PMO

HR 1 Vendor Readiness Checklist

Political & Stakeholder Awareness

- ☐ Understand state-specific sensitivities
- Build your offering around what you can do:
 - You may support outreach, document capture, workflow guidance
 - You must not be positioned as the entity “determining compliance” for MCOs (state retains that and CMS restricts MCO compliance determination)
- ☐ Support data/reporting that helps MCOs brief states and legislators, feedback loops (termination reasons, friction hotspots, appeals).

System + Integration Readiness

- ☐ Design “reliable data first, member docs last” flows.
- Inventory systems that must exchange HR1 data:
 - State eligibility portal / system
 - Workforce agency databases
 - Employer/payroll sources
- ☐ Handle fluctuating income and hours accurately
- ☐ Mobile doc capture + OCR completeness checks

Proof of Risk Reduction

- Measure what matters. Establish HR1 success metrics:
- ☐
 - Avoidable terminations prevented
 - Completion rates
 - Time to verification
 - Tie value to risk removed, not features delivered

Member Experience Readiness

- ☐ Minimize member burden as much as possible
- ☐ Make reporting mobile-first and intuitive
- ☐ Clearly explain consequences without intimidation
- ☐ Support multilingual and accessibility needs
- Create clear, multilingual member education covering:
 - What counts as work/qualifying activity
 - How to report
 - Deadlines + consequences
- ☐ Support timeline logic for outreach start based on application look-back choice (July–September 2026 equivalents for Jan 2027 start).

Operational Readiness

- Map today’s work-verification user flows for:
- ☐
 - New applications
 - Renewals / redeterminations (every 6 months minimum)
 - Exemptions/hardships
 - ☐ Support partial completion and progressive verification
 - ☐ Build workflows for missed deadlines and corrections
 - ☐ Test under worst-case conditions, not ideal pilots

Legal & Compliance

- Implement audit-ready evidence:
- ☐
 - Verification logs
 - Decision trails
 - Timestamped member actions
 - ☐ Align outputs to CMS and state reporting expectations.
 - ☐ Run an audit simulation: “Could we defend decisions 12-18 months later?”

Governance & Ownership

- ☐ Clearly define what you own vs what the state or MCO owns
- ☐ Align scope to HR1 workflows, not generic “benefits access”
- ☐ Avoid taking responsibility without authority

HR 1 State Readiness Checklist

Policy Requirements

- ☐ Confirm HR1 target implementation date and internal rollout date (default Jan 1, 2027; earlier optional).
- ☐ Define who is subject (expansion adults; confirm age cutoffs and nuances).
- ☐ List qualifying activities and 80 hours/month requirement and set policy for hours tracking.
- ☐ Document exemptions/hardships and how they must be verified.
- ☐ Track and align to CMS guidance on lookback verification rules and exemptions June 2026 implementation plan submission.

Data + System Readiness

- ☐ Inventory data systems linked to:
 - Payroll sources
 - Workforce agency data
 - State eligibility systems
- ☐ Build reliable data matching before member submission.
- ☐ Decide what is ex parte vs member-submitted.

Financial Readiness

- ☐ Estimate coverage churn and financial exposure (uncompensated care, provider impact).
- ☐ Model downstream costs:
 - Uncompensated care / provider disruption
 - Admin cost increase (verification + renewals)
 - Rate pressure / enrollment volatility
- ☐ Protect budgets with implementation funding (Section 71119(e) and CMS grants).

Member Experience Readiness

- ☐ Create clear, multilingual member education covering:
 - What counts as work/qualifying activity
 - How to report
 - Deadlines + consequences
- ☐ Provide at-risk member supports (benefits counseling, reminders, one-stop screening).
- ☐ Set up feedback loops (termination reasons, friction hotspots, appeals).

Governance & Ownership

- ☐ Assign accountable leads for each workstream:
 - HR1 policy strategy + overall responsibility
 - Regulatory/compliance
 - Eligibility workflows
 - MCO management to determine activities and follow up
 - IT/data integration
 - Vendor management

Operational Readiness

- ☐ Map today's work-verification user flows for:
 - New applications
 - Renewals / redeterminations (every 6 months minimum)
 - Exemptions/hardships
- ☐ Identify failure points (missing docs, late reporting, member confusion, low ex parte rates).
- ☐ Forecast staffing + call center surge capacity.
- ☐ Define state vs contractor vs vendor roles clearly.

CMS Compliance & Legal

- ☐ Define documentation standards for:
 - Work verification
 - Exemptions
 - Hardships
 - Renewal determinations
- ☐ Build legal defense plans referencing CMS requirements.
- ☐ Confirm reporting obligations and audit processes.
- ☐ Confirm states must notify and allow 30-day cure windows before termination.