H.R. 1 Stakeholder Meeting

July 14, 2026

Agenda

Pennsylvania
Department of Human Services

- **Welcome and Updates**
- **Interim Final Rule – Key Policy Decisions**
  - Kristin Ahrens, ODP
  - Hoa Pham & Lexi Deisenroth, OIM
  - Megan Todd & Dave Grande
- **Toolkit Discussion**
- **Next Steps and Conclusion**

Welcome and Updates

Pennsylvania
Department of Human Services

Secretary Val Arkoosh

HR1 Medicaid Changes

Pennsylvania
Department of Human Services

PRE-IMPLEMENTATION COMMUNICATION

AUG-SEPT 2026

- Initial outreach begins for current Medicaid recipients
- Outreach will take place over four mailings
- Clients who have shared phone numbers will also get texts and robo calls

OCT-DEC 2026

- Outreach to newly eligible Medicaid recipients
- Mailings will go out monthly
- Monthly texts, robo calls will be sent

JAN 1, 2027

- Medicaid Work Requirements
  - Will verify at first renewals following implementation.
  - Must show that they are meeting requirement through work, volunteering or school/training
  - Must show that they met requirement for at least one month since last renewal (six months for new applicants).
- 6-Month Renewals Implementation - starts after existing 12-month renewal due date is processed

NEW MEDICAID RECIPIENT (AS OF JANUARY 2027)

JAN 2027: APPLICANT

- In addition to normal eligibility, must demonstrate that they are meeting Medicaid work requirement in ***the month prior to application*** (December 2026)
- If eligible, will have a six-month renewal due in July 2027

JUN 2027

- Receive first six-month renewal packet.
- Packet will include outreach letter/notice of noncompliance if information could not be verified through ex parte renewal.

JUL 2027 RENEWAL

- Continued eligibility is assessed through renewal
- During this renewal, must demonstrate meeting Medicaid work requirements by spending 80 hours working, volunteering, or being in a school/training program during ***at least one month since application (January–July 2027)***

RENEWING AS A CURRENT MEDICAID RECIPIENT

AUG/SEPT 2026

- Outreach about upcoming changes complete Aug/Sept 2026
- Client keeps existing 12-month renewal due date in 2027
- ***Six-month renewals begin after first renewal processed in 2027***
- Example: If a client renews in September 2026, their next renewal will be scheduled for September 2027.

AUG 2027

- Client receives their renewal packet due in September 2027
- Renewal packet includes outreach letter/notice of noncompliance if information could not be verified through ex parte renewal.

SEPT 2027 RENEWAL

- Continued eligibility is assessed through renewal
- During this renewal, must demonstrate meeting Medicaid work requirements by spending 80 hours working, volunteering, or being in a school/training program ***during in at least one month since last renewal (October 2026-September 2027)***
- Next renewal will be due in March 2028

Interim Final Rule

Pennsylvania
Department of Human Services

Kristin Ahrens – Deputy Secretary, Office of Developmental Programs

ODP Communications

Pennsylvania
Department of Human Services

- **Most individuals enrolled in Medicaid services administered by ODP, not subject to CE**
  - However, Direct Support Professionals and relative caregivers may be
- **2025 ODP informational campaign on re-determinations**
  - **ODPANN 25-097: Maintaining and Verifying Medicaid Eligibility**
- **OIM/ODP communications workgroup on CE**
  - Outreach strategy
  - Materials

Pennsylvania
Department of Human Services

Keep Your Medicaid

A Helpful Guide for ODP Participants

Don't Miss Your Medicaid Renewal

Look for the PINK Envelope!

Participants served through the Office of Developmental Programs (ODP) MUST complete their Medicaid renewal paperwork and submit the necessary documentation to the County Assistance Office (CAO) in order to maintain healthcare coverage and continue receiving critical ODP services. The CAO has made it even easier to recognize the arrival of your benefit renewal packet. Simply watch for a large PINK envelope in the mail and submit your renewal by the due date indicated.

ODP Participants **MUST** maintain Medicaid coverage to receive necessary medical, behavioral and ODP services.

What is Medicaid?

In Pennsylvania, Medicaid is called Medical Assistance. Medicaid provides access to essential healthcare needs and daily living support, including services provided through the Office of Developmental Programs' (ODP) Home and Community-Based Waivers and Targeted Support Management (TSM). Medicaid eligibility is determined by your local CAO.

Submit Your Renewal

- Via COMPASS
- By mail in the return envelope, or
- In-person to your CAO.

Preparing for Medicaid Renewals

Sign up for COMPASS
- Create COMPASS account
- Download MyCompassPA app
- Sign up for text messages through COMPASS

Pay attention to communications
- Respond to the CAO information requests
- Renew **ON TIME!**

Address potential eligibility issues NOW

Be Aware of Your Renewal Date(s)!

Report address changes
- Customer Service Center at 1-877-395-8930 or 215-560-7226 (Philadelphia) or to your local CAO
- COMPASS or MYCOMPASS PA mobile app

Report language needs
- Customer Service Center
- Write language needs on all documents submitted to the CAO
- Ask for interpreters if necessary

Interim Final Rule

Pennsylvania
Department of Human Services

Hoa Pham - Deputy Secretary, Office of Income Maintenance

Lexi Deisenroth – Director, Division of Health Services

OIM Policy

H.R. 1: Medicaid Work Requirements

On Monday, June 1, 2026, pursuant to federal law the Centers for Medicare and Medicaid Services released an Interim Final Rule (IFC) titled Medicaid Program; Community Engagement Requirement for Certain Individuals. This directs states on most of CMS's key expectations for how the Work Requirements created through the One Big Beautiful Bill Act must function.

Based on the IFC DHS will share with the HR1 Implementation meeting group the following information today;

- Key takeaways from the IFC
- Policy decisions reached
- An update on DHS correspondence documents on which feedback was solicited

H.R. 1: Eligibility Pathways

Individuals eligible for Pennsylvania's Expansion categories of MA that are not mandatorily excluded must be assessed for exception from, or compliance with, Community Engagement as required in federal law. If specific exceptions are not met and compliance is required, the applicant/recipient may also claim a hardship to also be excepted from Work Requirements .

Mandatory Exceptions

- Under 19
- Medicare Recipient
- Mandatory MA Groups
- Recent Incarceration

Specified Exclusions

- Former Foster Care
- American Indian
- Caretaker Relatives
- Family Caregivers
- Vets with 100% Disability
- Medically Frail
- Meeting TANF Work Rules
- Exempt from SNAP Work Rules
- In drug or alcohol program
- Pregnant or in postpartum period

Compliance

- Work Hours
- Community Service
- Work Program Participation
- At Least Half Time Education
- Combination of Above
- Monthly income of $580

Short-Term Hardship

- Inpatient Services
- Disaster/Emergency Area*
- High Unemployment Area*
- Travel for Treatment

*Note: These Short-Term Hardships, if elected by a state, are granted automatically as applicable.

H.R. 1: Eligibility Pathways – Mandatory Exceptions

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
Under 19	Information to verify these exceptions should be available. If information is not available, states can accept self-attestation	Information to verify these exceptions should be available. If information is not available, states must require documentation to resolve inconsistency.	Eligibility notice must address if an individual meets an exception.
Medicare			
Mandatory Medicaid Groups			
Recent Incarceration			
An inmate of a public institution at any point during the 3-month period ending on the first day of the month being reviewed for community engagement.			

H.R. 1: Eligibility Pathways – Specified Exclusions

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
Former Foster Care	Use existing data. No reverification specific to community engagement is needed.	Use existing data. No reverification specific to community engagement is needed.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
American Indians	Use existing data and verification policy. No reverification specific to community engagement is needed.	Use existing data and verification policy. No reverification specific to community engagement is needed.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
Caretaker Relatives	Use reliable information available. PA accepts self-attestation of caretaker relative status unless questionable.	Use reliable information available. PA accepts self-attestation of caretaker relative status unless questionable.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.

Caretaker Relative is any adult with whom the dependent child or dependent individual is living and who assumes primary responsibility for the dependent child's or dependent individual's care.

More than one Caretaker Relative can be in the same household.

H.R. 1: Eligibility Pathways – Specified Exclusions

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
Family Caregivers	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
A family caregiver is an adult family member or another adult with a *significant relationship* who provides care within a broad range of assistance. Individuals who can meet caregiver exclusion are: 1. Individual living in the same household, 2. Relative (meeting a caretaker relative definition), or 3. Another individual for whom the individual provides at least 80 hours of care not incidental in nature.			
Veterans with 100% Disability	Use reliable information available; documentation optional.	Reverification and documentation required.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
This applies to Veterans with a VA disability rating of 100% (“total”) or Veterans receiving Total Disability based on Individual Unemployability (TDIU). This specified exclusion is applicable regardless of if the status is temporary or permanent. Permanent status must not be reverified, but temporary status must be reverified at least once every 12 months.			

H.R. 1: Eligibility Pathways – Specified Exclusions

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
TANF	Use information available in the system.	Use information available in the system.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
SNAP	Use information available in the system.	Use information available in the system.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.

If an individual is in a household that receives SNAP benefits and is subject to a work requirement under the SNAP program, they meet the definition of a specified excluded individual. This includes both the general work requirements and the PEER work requirements.

Non-PEER, expansion eligible recipients who are work registrants are subject to a work requirement are therefore excluded. Work registrants are recipients aged 18 to 59 and meet the following criteria; pregnant, expected to return to work in 60 days, nonchronic homeless, traveling more than two hours for work, or receiving expedited SNAP.

The following PEER statuses have been determined by DHS to be specified excluded;
•Time limited PEERs with time on their clock or meeting the PEER requirement through employment and training
•PEERs receiving a State Discretionary Exemption

H.R. 1: Eligibility Pathways – Specified Exclusions

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
D&A Treatment Programs	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
Anyone actively participating in a qualifying drug addiction or alcohol treatment and rehabilitation as defined by section 3(h) of the Food and Nutrition Act of 2008 is specified excluded. Active participation is defined by the state but must be current at time of review period.			
Inmates	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
Pregnant/Postpartum	Use reliable information available; documentation optional.	Use reliable information available; documentation optional.	Eligibility notice must address if an individual meets an exclusion. Notice required if an individual loses an exclusion.
The State must accept an attestation of pregnancy unless the State has information that is questionable or not reasonably compatible with such attestation. Postpartum information is available in the system.			

H.R. 1: Eligibility Pathways – Compliance

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
Work Hours	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Standard Eligibility notice must address if compliance is met through WR compliance.
Work is inclusive of paid employment, In-Kind Work, and Unpaid work. Unpaid work does not include community service but may include family caregiving if the caregiver does not meet the caregiver exclusion and providing care to a dependent child or disabled individual.			
Community Service	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Standard Eligibility notice must address if compliance is met through WR compliance.
Community Service must be unpaid within a structured program by a public or nonprofit. The entity must have supervision over the activity and be able to provide information on the type of service performed, dates/times and a point of contact. The activity cannot be done independently.			

H.R. 1: Eligibility Pathways – Compliance

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
Work Program Participation	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Standard Eligibility notice must address if compliance is met through WR compliance.
Work program is defined as a WIOA Title I program, a Trade Act program, a state-operated/supervised program, a Vet's program, or a workforce partnership under SNAP rules. The state-operated/supervised programs are inclusive of SNAP E&T, and these cannot include job search activities unless it is less than half of the required hours.			
Educational Program (Half-time)	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Standard Eligibility notice must address if compliance is met through WR compliance.
Half-time is defined by the educational institution. Educational institution is defined as entity under Higher Ed Act, Perkin's Act, High Schools, High School Equivalency. Enrollment begins on the first day of the school term and continues through vacation/recess. Enrollment ends at expulsion, withdrawal, completion without new registration, graduation.			

H.R. 1: Eligibility Pathways – Compliance

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
Educational Program (< Half-time)	Use reliable information available; documentation optional.	Use reliable information available; documentation required.	Standard Eligibility notice must address if compliance is met through WR compliance.
Hours of educational programming for less than half time is counted by credit hour which allows for one credit being equal to three hours per week. Noncredit hours programming will have hours based on actual instruction.			
Monthly income of at least $580 a month **For seasonal workers, average monthly income for the last 6 months at least $580 a month.**	PA requires verification of income.	PA requires verification of income.	Standard Eligibility notice must address if compliance is met through WR compliance.
Monthly income means MAGI household income. It includes earned and unearned income. It can be attributed to household members in the same MAGI household.			

H.R. 1: Eligibility Pathways – Optional Hardship

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
Inpatient Services	Individual must request, documentation optional.	Individual must request, documentation required.	Notice required when hardship is approved and ended. Could all be one notice.
An individual qualifies if, for the month in question, they receive: A. Inpatient hospital services, or B. Services in institutional settings of similar acuity, C. Comparable noninstitutional services likely to lead to inpatient care The State must specify the start date, anticipated end date, and inform the individual when the exception will terminate.			
Disaster/Emergency Area	Automatic; no documentation.	Automatic; no documentation.	Outreach required through two modalities to all applicable individuals covered by the hardship at hardship election. Notice required at hardship end with appeal rights.
The exception applies when: 1. A Presidential emergency or disaster declaration is issued 2. The individual resides in the geographical area covered by the declaration. 3. The emergency or disaster creates barriers to meeting Work Requirements The duration is at least the full "incident period" of the emergency/disaster. This can be extended with CMS approval based on barriers to meeting Work Requirements . All hardships on this basis must be approved by CMS.			

H.R. 1: Eligibility Pathways – Optional Hardship

Category	Verification Needed Before 1/1/28	Client Verification Needed On/After 1/1/28	Notice Requirements
High-Unemployment Area	Automatic; no documentation.	Automatic; no documentation.	Outreach required through two modalities to all applicable individuals covered by the hardship at hardship election. Notice required at hardship end with appeal rights.

A State may request this hardship for any county or locality where unemployment is:
•≥ 8%,
OR
•≥ 1.5 times the national unemployment rate, whichever threshold is lower.

The exception applies for the month(s) when unemployment in the area meets the threshold and CMS has approved the request.

Travel for Treatment	Documentation optional; individual request.	Documentation required (travel & medical need).	Notice required when hardship is approved and ended. Could all be one notice.

The hardship applies when the individual OR their dependent must travel outside the "community" AND the purpose of travel is to receive medically necessary services for a:
•Serious or complex medical condition,
•Not available within the individual's community.

The "extended" period of travel may be less than a full month.
The travel or treatment meaningfully prevents CE compliance
Examples include:
•The individual's own absence from home/work
•A dependent's medical treatment requiring the individual to take leave, manage logistics, or travel with/for the dependent

The State must verify the individual's inability to meet CE due to the travel need.

DHS Key Decisions

After evaluating details in the IFC DHS has determined that it will take the following steps in program implementation and policy.

- **DHS will accept attestation of applicants/recipients where permissible until required to verify as of January 1, 2028.**
- **DHS will accept income as hours by proxy when lower than the $580 threshold.**
- **DHS will offer hardships as an additional category of exclusion from CER.**
- **DHS will ex parte review expansion recipient cases for continuing eligibility and if there is no ability to continue eligibility based on this review, issue a Notice of Noncompliance with the renewal packet affording the household 35 days to complete the renewal as well as demonstrate exception, exclusion, compliance, or request a hardship where applicable.**

DHS Key Decisions

After evaluating details in the IFC DHS has determined that it will take the following steps in program implementation and policy.

DHS will accept attestation of applicants/recipients where permissible until required to verify as of January 1, 2028.

- DHS will create policy, correspondence documents, and systems functionality to support requesting verification effective with CER implementation on 1/1/27 but accept attestation if the verification is not provided.
- The exception to this will be for income information because we do not currently accept self-attestation of income due to implications for eligibility and enrollment across the programs offered.
- The implementation of CER in MA reflects a significant change to policy, systems processes, worker practice, and public expectations.
- This will best allow DHS to manage change for both workers and clients and is supported by CMS.
- Prior to the deadline to transition over to requiring verifications (1/1/28) effort can be made to inform the public and train staff on what will be needed to determine eligibility, which may not have been necessary before.

DHS Key Decisions

After evaluating details in the IFC DHS has determined that it will take the following steps in program implementation and policy.

DHS will accept income as hours by proxy when lower than the $580 threshold.

- Allowed only when verified monthly income is below $580 and the hourly rate is unknown.
- Example: Individual's verified monthly income is $400. The hourly rate is unknown to the CAO, as verification was received through a data source. Caseworker will divide $400 by federal minimum hourly wage, $7.25. The individual can be credited with 55 hours of compliance. The individual would need to demonstrate compliance for additional 25 hours to be determined eligible for the adult group.
- The calculation needed to determine this is straightforward and will reduce administrative burden on clients.
- A reasonable policy for the distribution of these hours within the MAGI household can be determined as well.

DHS Key Decisions

After evaluating details in the IFC DHS has determined that it will take the following steps in program implementation and policy.

DHS will offer hardships as an additional category of exclusion from CER.

- The hardship categories for Emergency/Disaster and High Unemployment are sensible policy responses to account for some labor market circumstances out of the control of the client.
- The ability automatically provide these exemptions to all applicants/recipients for MA expansion in the effected jurisdiction makes provisioning manageable as well.
- Additional details about what CMS will expect to be able to approve provision of these hardships is still pending.
- DHS plans to build the ability of clients to request the hardship categories of Inpatient/Institutional Treatment and Travel for Treatment into the application/renewal forms.
- Further policy development around these will be needed to define relevant terms such as;
  - What are services that, but for receipt of them, the client would be inpatient/institutionalized?
  - What travel constitutes an “extended period” and “community”?

DHS Key Decisions

After evaluating details in the IFC DHS has determined that it will take the following steps in program implementation and policy.

DHS will ex parte review expansion recipient cases for continuing eligibility and if there is no ability to continue eligibility based on this review, issue a Notice of Noncompliance with the renewal packet affording the household 35 days to complete the renewal as well as demonstrate exception, exclusion, compliance, or request a hardship where applicable.

- This is the only permissible approach based on CMS timeliness rules at 45 CFR § 435.912 and 435.916. Pennsylvania initiates the renewal process 60 days prior to the renewal due date. It is not possible to complete an ex parte for the renewal cohort and then send the renewal packet and then send a notice of noncompliance to allow for an additional 35 days all prior to CMS timeliness deadlines.
- This approach is the most efficient way to manage the renewal process. By electing to send the Notice of Noncompliance with the renewal packet all items necessary to determine continued eligibility will be requested at one time minimizing unnecessary back and forth with the CAO and the need for continued work item tracking.
- No client will be denied the opportunity to make it known to DHS if they are excepted, excluded, under a hardship, or no longer eligible in the expansion categories of MA.

Feedback and Correspondence Updates

DHS reviewed comments and edits provided in response to our request for input on several key client correspondences. Thank you!

- **DHS attempts to be as clear as possible in mailing references. In initial drafts statutory language was purposely used as a placeholder in certain places until more clarity was found in the IFC.**
- **DHS adopted recommendations to transition from referring to Community Engagement to referring to Work Requirements, as well as other specific requests in language change around simplified wording.**
- **DHS adopted recommendations to reorganize the order of exclusions.**
- **DHS adopted recommendations to prepopulate the person to whom the correspondence applies and their renewal due dates where applicable**
- **DHS adopted recommendations to move up text pertaining to action steps.**
- **DHS's Self Assessment form will only be used at application if an application is not filled out fully. The Self-Assessment questions will be integrated into the renewal, and a notice of noncompliance will go out with the renewal packet if compliance, exclusion and exception was not verified during ex-parte renewal.**

Direct questions and requests to
RA-HSPADHS-HR1@pa.gov

Medical Frailty

Pennsylvania
Department of Human Services

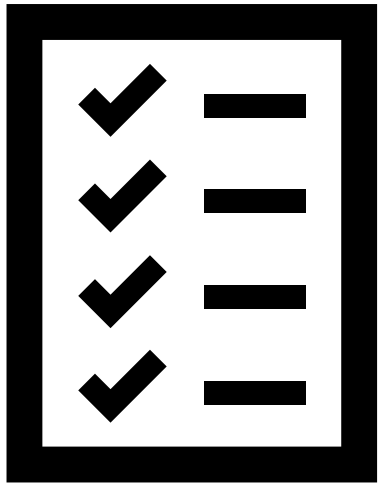
Megan Todd, Director of Data & Analytics

David Grande, Special Advisor for Medicaid Innovation

HR 1 Work Requirements

Pennsylvania
Department of Human Services

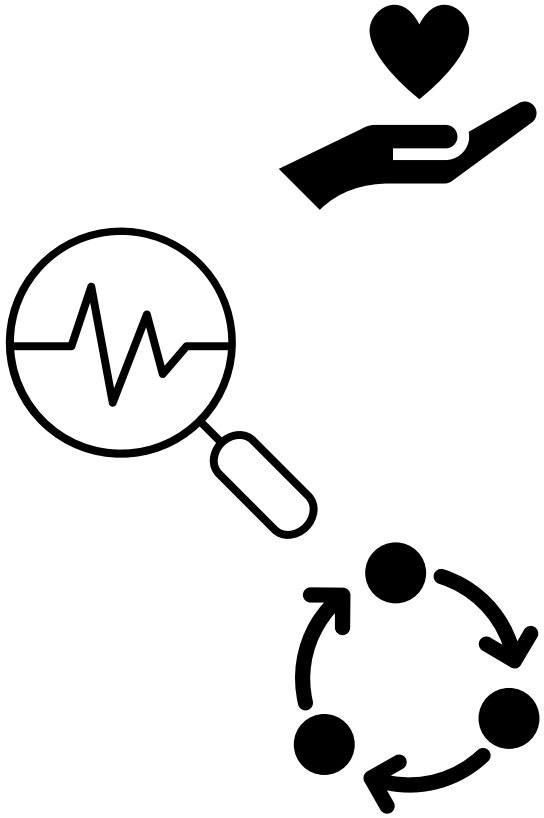
- **New federal work and community engagement requirements as of Jan 2027 for the Medicaid adult expansion population**
- **Certain people are exempted from the requirement including: an individual who is medically frail or otherwise has special medical needs including people who are or have a:**
  - Blind or disabled
  - Substance use disorder
  - Disabling mental disorder
  - Physical, intellectual, or developmental disability that significantly impairs their ability to perform one or more activities of daily living
  - Serious or complex medical condition
- **Additional short-term hardship exemptions (e.g., recent hospital admission)**



PA Approach to Medical Frailty

Pennsylvania
Department of Human Services

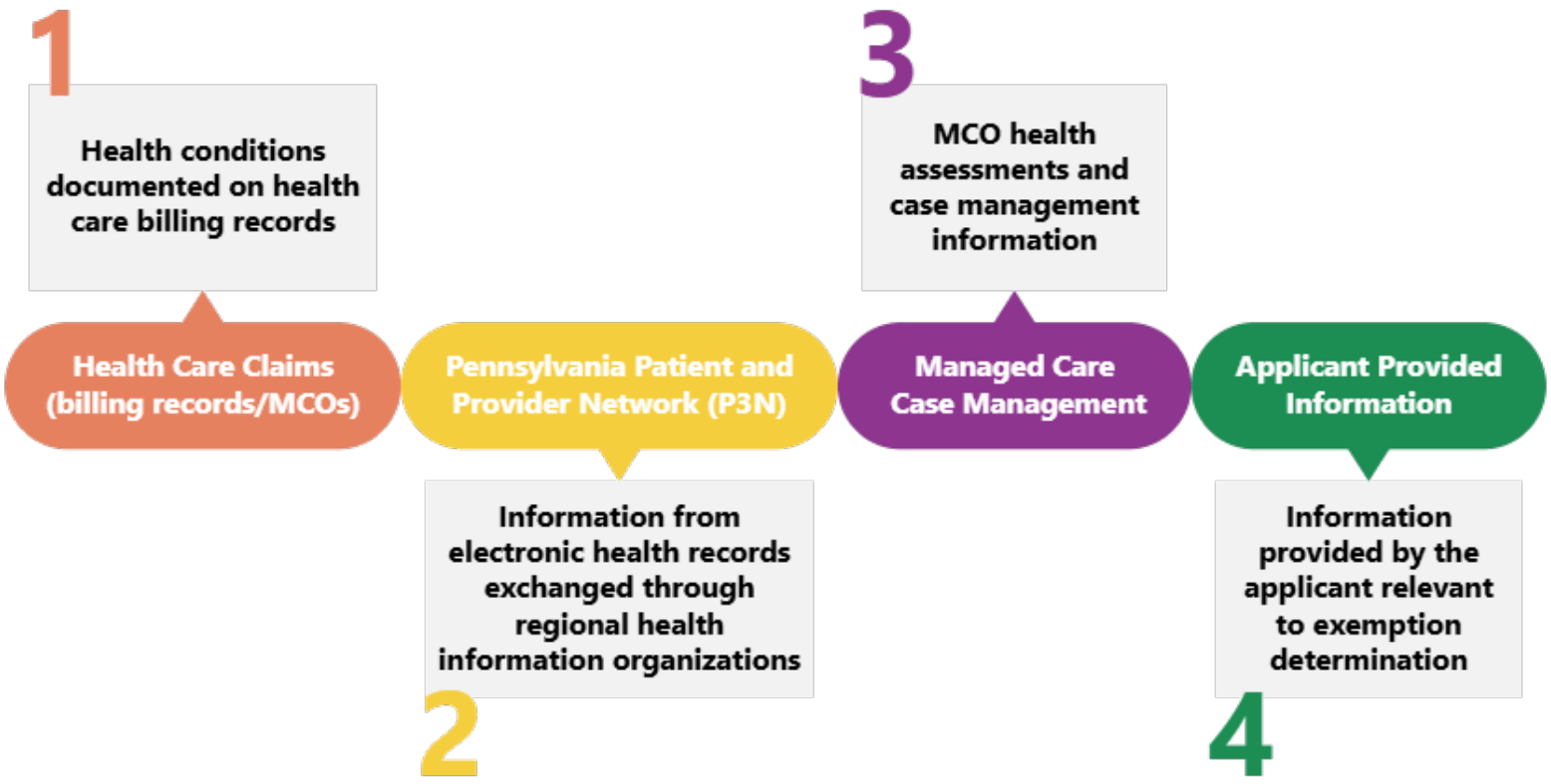
- **Goals:**
  - **Minimize paperwork** burden for beneficiaries, clinicians, caseworkers
  - **Maintain coverage** consistent with HR1 for those that remain eligible
- **Process:**
  - Leverage multiple **data** sources to the extent possible
  - Utilize a **continuous improvement framework** with rapid-cycle innovation methods to evaluate and improve our approach in year 1



PA Approach to Medical Frailty

Pennsylvania
Department of Human Services

- **Data first process: Use information from multiple sources to identify presence of health conditions meeting definition of medical frailty**



Interim final rule issued June 1 unexpectedly changed requirements

- **Medical frailty requires not only the presence of a particular diagnosis or condition, but also consideration of the extent to which the condition impairs an individual's ability to comply with community engagement requirements.**

PA Approach to Medical Frailty

Pennsylvania
Department of Human Services

Interim final rule issued June 1 unexpectedly changed requirements

Identify presence of one or more health condition(s) meeting definition of medical frailty

+

Severity of the health condition significantly impairs ability to comply with community engagement requirements

Modified Approach

Pennsylvania
Department of Human Services

List of health conditions meeting definition of medical frailty

→

Group conditions into three categories:

- **Category 1:** Medically frail based on presence of high-risk, severe condition
- **Category 2:** Medically frail based on presence of a chronic condition with additional supporting evidence of severity, complexity, treatment burden, functional impairment, or overall worse health
- **Category 3:** Medically frail based on the presence of a significant acute or temporary condition

Modified Approach

Pennsylvania
Department of Human Services

Design principles for severity indicators (Category 2)

Available

Consistently available in administrative records and data

Feasible

Manageable for clinicians and analysts

Meaningful

Directly identify higher complexity care or supported by peer reviewed literature

Efficient

Limits paperwork, cost, and reliance on third-party vendors

Transparent

Clear and explainable for stakeholders

Adaptable

Built for innovation, learning, improvement

Severity indicators (for Category 2 conditions)

High acuity or high frequency utilization

- Examples: SNF admission, repeat emergency care, frequent outpatient visits, high cost

Treatment that is high risk or requires frequent monitoring

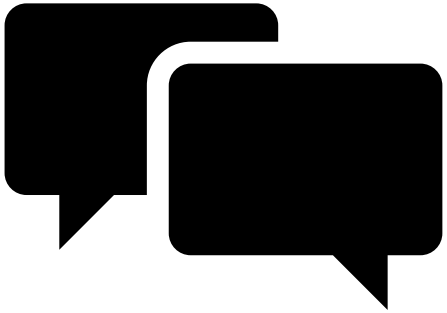
- Examples: Dialysis, chemotherapy, radiation

Services that directly reflect functional limitations

- Examples: Durable medical equipment, receiving home health services

Risk factors for impairment and mortality

- Examples: Polypharmacy, multiple chronic conditions, advanced age



Thank You!

Communications Toolkit

Pennsylvania
Department of Human Services

- **As notices and direct outreach is finalized, timeline and copies will be on DHS' website**
- **Building toolkit around these milestones and general information**
- **Limitations on paid marketing will require assistance from community – what kind of materials will be helpful to each of you? Think platforms, print vs. digital, etc.**
- **Email suggestions & needs to alfogarty@pa.gov or ra-pwdhspressoffice@pa.gov**

Next Steps

Pennsylvania
Department of Human Services

- **Follow Up**
- **Upcoming meetings:**
  - Tuesday, September 1, 2026 at 2 pm
  - Friday, October 2, 2026 at 10 am
  - Friday, November 13, 2026 at 10 am
  - Friday, December 4, 2026 at 10 am
  - Friday, January 8, 2027 at 10 am
- **Resource Account**
  - **Direct questions and requests to RA-HSPADHS-HR1@pa.gov**