



June 26, 2026

The Honorable Robert F. Kennedy
 Secretary
 U.S. Department of Health and Human Services
 200 Independence Ave, SW
 Washington, DC 20201

Re: CalAIM 1115 Demonstration Renewal

Dear Secretary Kennedy:

Thank you for the opportunity to submit comments on the California Advancing and Innovating Medi-Cal (CalAIM) Section 1115 Demonstration Renewal.

The undersigned organizations represent millions of individuals facing serious, acute and chronic health conditions. We have a unique perspective on what individuals and families need to prevent disease, cure illness and manage chronic health conditions. The diversity of our organizations and the populations we serve enable us to draw upon a wealth of knowledge and expertise that is an invaluable resource regarding any decisions affecting the Medicaid program and the people that it serves. We urge the Centers for Medicare and Medicaid Services (CMS) to make the best use of the recommendations, knowledge and experience our organizations offer here.

Our organizations are committed to ensuring that California’s Medicaid program provides quality and affordable healthcare coverage. We support the state’s proposal to continue to provide targeted pre-release services for justice-involved individuals and to create an Employment Supports benefit. Our organizations urge CMS to approve these proposals and offer the following comments on the CalAIM Demonstration Renewal:

Our organizations support the proposed continuation of coverage for incarcerated youths and adults who are otherwise eligible for Medicaid for up to 90 days prior to release. This proposal will continue to

help these populations with complex needs to access the critical supports needed to treat physical and behavioral health conditions. For example, studies in Washington and Florida reported that people with severe mental illness that had Medicaid coverage at the time of their release were more likely to access community mental health services and had fewer detentions and stayed out of jail longer than those without coverage.¹ This proposal is consistent with the goals of Medicaid and is an important step in improving continuity of care. By aiming to reduce post-release overdoses and deaths, this proposal is also aligned with federal efforts to combat the opioid crisis, first declared a public health emergency by the Trump Administration in 2017.² CMS should work with the state to ensure that existing state spending on healthcare for this population is supplemented, not replaced when implementing this policy.

Additionally, our organizations support the state's proposal to implement an optional Employment Supports benefit for individuals who are subject to work reporting requirements under Public Law 119-21. Our organizations have long opposed work reporting requirements and have deep concerns about the upcoming coverage losses for the people we represent.³ While it is impossible to fully shield patients from the impact of these devastating cuts, we appreciate California's proposal to allow counties to opt into a program to provide pre-employment services and post-employment retention services to eligible individuals. Our organizations support the voluntary nature of the proposed Employment Supports benefit. Given that participation is optional and does not impact access to healthcare, these services will help eligible Californians in navigating and overcoming barriers to maintaining health coverage. Our organizations urge CMS to approve this proposal while ensuring that this policy does not condition access to care upon use of or participation in the Employment Supports benefit.

Our organizations appreciate California's efforts to improve access to healthcare and urge CMS to approve these proposals.

Thank you for the opportunity to provide comments.

Sincerely,

AiArthritis

American Cancer Society Cancer Action Network

American Lung Association

Blood Cancer United

CancerCare

Crohn's & Colitis Foundation

Epilepsy Foundation of America

Hypertrophic Cardiomyopathy Association

Legal Action Center

National Bleeding Disorders Foundation

National Kidney Foundation

National Multiple Sclerosis Society

The AIDS Institute

The Coalition for Hemophilia B

Volunteers of America

¹ Joseph Morrissey et al. Medicaid Enrollment and Mental Health Service Use Following Release of Jail Detainees with Severe Mental Illness. *Psychiatric Services* 57, no. 6 (June 2006): 809-815. DOI: 10.1176/ps.2006.57.6.809, and Joseph Morrissey et al. The Role of Medicaid Enrollment and Outpatient Service Use in Jail Recidivism Among Persons with Severe Mental Illness. *Psychiatric Services* 58, no. 6 (June 2007): 794–801. DOI: 10.1176/ps.2007.58.6.794.

² Ongoing Emergencies & Disasters. Centers for Medicare and Medicaid Services. Sept 10 2024. Available at: <https://www.cms.gov/about-cms/what-we-do/emergency-response/current-emergencies/ongoing-emergencies>

³ 48 Patient Organizations Warn of Massive Coverage Losses Under Final Work Reporting Requirement Rule. June 2, 2026. Available at: <https://www.lung.org/media/press-releases/fy26-work-requirements-coalition-statement>