## THE PARTNERSHIP FOR MEDICAID

April 1, 2022

The Honorable Chiquita Brooks-LaSure Administrator Centers for Medicare and Medicaid Services Washington, DC 20201

Dear Administrator Brooks-LaSure:

On behalf of the Partnership for Medicaid, we urge you to address an urgent issue in the Medicaid program—the potential loss of coverage for millions of beneficiaries at the end of the federal public health emergency (PHE). While we believe ending the PHE would be premature at this time, we are writing to ensure the unwinding is handled in a prudent manner that will minimize unintended consequences. The Partnership—a nonpartisan, nationwide coalition made up of organizations representing clinicians, health care providers, safety net plans, and counties—has supported many of the federal initiatives that protect the Medicaid program and its beneficiaries during these last two years of the pandemic.

We are encouraged by the <u>recent guidance</u> issued by your agency aimed at how states can initiate Medicaid eligibility redeterminations after the PHE. This guidance outlines several flexibilities and strategies that states can use to protect beneficiaries during the unwinding period. We also appreciate the <u>suite of tools</u>, including a state template that asks about plans to process renewals. We are also encouraging Congress to institute additional protections to prevent massive coverage loss.

As policymakers have conversations about the timing of the end of the PHE, we strongly urge you to continue working with states on a predictable, transparent, and evidence-informed wind down of the enhanced federal medical assistance percentage (FMAP) and continuous coverage provisions included in the Families First Coronavirus Response Act (FFCRA) that provides sufficient guardrails to protect beneficiaries while also reflecting the trajectory of the COVID-19 pandemic.

We understand that the department raised challenges about being able to give more than 60 days' notice of the end of the PHE. We reiterate the request of several stakeholders and ask for at least a 120-day lead time before unwinding the FMAP and Maintenance of Effort provisions of the FFCRA. This will allow state Medicaid agencies sufficient time to transition plan and ensure enrollees have time to re-establish their Medicaid eligibility or transition to subsidized coverage in the Affordable Care Act Marketplaces. The recent story titled, *Millions of vulnerable Americans likely to fall off Medicaid once the federal public health emergency ends*, from the Washington Post, published on March 14, 2022, illustrates why providing states with as much time is needed to prevent as many as 16 million low-income Americans, millions of whom are children, from losing their vital coverage.

Our coalition welcomes the opportunity to work with you on this critical issue. We remain grateful for your leadership and commitment to the Medicaid program and the populations it serves. If you have questions or seek any additional information, please contact Jonathan Westin at the Jewish Federations of North America, First Co-Chair of the Partnership for Medicaid at Jonathan.Westin@jewishfederations.org. We look forward to working with you to protect coverage for the millions of Medicaid beneficiaries we are privileged to serve.

## Sincerely,

American Academy of Family Physicians American College of Obstetricians and Gynecologists American Dental Association American Dental Education Association American Health Care Association American Network of Community Options & Resources (ANCOR) America's Essential Hospitals Association for Community Affiliated Plans Association of Clinicians for the Underserved Catholic Health Association of the United States Children's Hospital Association The Jewish Federations of North America Medicaid Health Plans of America National Association of Counties National Association of Pediatric Nurse Practitioners National Association of Rural Health Clinics National Health Care for the Homeless Council National Hispanic Medical Association