

July 20, 2020

The Honorable Alex Azar
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue
Washington, D.C. 20201

Dear Secretary Azar,

Our nation continues to face an unprecedented public health threat that is challenging health care delivery and capacity across the country. Given this situation, we were pleased to see your department’s communications indicating that you intend to extend the public health emergency (PHE) declaration beyond July 24. We strongly support this action. Extension of the PHE will maintain critical flexibilities for states, Medicaid managed care plans, and Medicaid providers to remove barriers to care and access for patients and reduce regulatory burdens amidst these challenging circumstances.

During this time, preparations, prevention efforts, and provision of treatment related to COVID-19 remain the highest priority for Medicaid providers and states, requiring substantial time and resources. We believe our collective resources are best used for continuing to adjust to the new and still evolving realities of health care delivery as well as meeting the pressing pandemic-related demands. We are also undertaking this work while preparing for significant growth in Medicaid enrollment.

Given this context, we urge you to pause issuance of Department of Health and Human Services (HHS) and CMS regulations that have negative fiscal implications and could have unintended consequences for states during the PHE, including the Medicaid Fiscal Accountability Rule. We also ask that the Department proceed thoughtfully with potential regulatory changes during the period of recovery from this COVID-driven economic crisis. As you know, all states are contending with revenue losses and increased spending demands related to COVID-19, which will require dramatic adjustments in their fiscal year 2021 and future budgets. States, providers and Medicaid managed care plans need latitude to retain funding in the Medicaid program to support provision of care to patients now and during the recovery period.

We appreciate the flexibility that HHS and CMS have afforded providers and states during the initial period of this pandemic. Our request will help ensure that we maintain appropriate focus on delivering services to Medicaid enrollees and efficient operation of the program. We are committed to collaborating and working with the Administration to achieve these goals.

Sincerely,

American Health Care Association/
National Associated of Assisted Living

Association of Community
Affiliated Plans

America’s Health Insurance Plans

Children’s Hospitals Association

Medicaid Health Plans of America

National Association of
Community Health Centers

National Council for Behavioral Health



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