

June 13, 2023

The Honorable Chiquita Brooks-LaSure, Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

Dear Administrator Brooks-LaSure:

On behalf of the Medicaid Health Plans of America (MHPA), we are writing to request an extension of at least 30 calendar days of the comment periods for CMS's Notices of Proposed Rulemaking (NPRMs) titled, "Medicaid and Children's Health Insurance Program (CHIP) Managed Care Access, Finance, and Quality Proposed Rule" [CMS-2439-P] and "Ensuring Access to Medicaid Services" [CMS-2442-P].

MHPA is the only national trade association with a sole focus on Medicaid, representing more than 130 MCOs serving more than 52 million Medicaid beneficiaries in 40 states, the District of Columbia and Puerto Rico. MHPA's members include both for-profit and non-profit, national, regional, as well as single-state health plans that compete in the Medicaid market. Nearly three-quarters of all Medicaid beneficiaries receive health care through MCOs, and the Association provides research and advocacy services that support policy solutions to enhance the delivery and coordination of comprehensive, cost-effective, and quality health care for Medicaid beneficiaries.

MHPA applauds and supports CMS in their stated goal of improving access to and quality of care provided to Medicaid and CHIP enrollees. However, we express concern that stakeholders will be unable to engage meaningfully with the proposed changes in the NPRMs given state, provider, and plan bandwidth constraints relating to the unwinding of continuous coverage requirements from COVID-19 era Congressional legislation.

As we speak, Medicaid programs across the United States are in the process of redetermining the eligibility of over 92 million Americans who receive health coverage under Medicaid and CHIP. States are currently facing significant bandwidth constraints as they work through a three-year backlog with staff that have in some cases never processed an eligibility verification. The Administration is also experiencing significant pressure as it works with states to oversee redeterminations efforts and facilitate state mitigation plans. Providers are concerned about the impact of a potential increase in the number of uninsured individuals.

The provisions CMS is proposing in these NPRMs are complex and impact a broad range of program areas. Responding meaningfully to the changes CMS are considering will require significant time to respond to, as stakeholders will have to convene with a wide range of subject matter experts and impacted stakeholders.

Given the significant administrative lift necessary to provide nuanced feedback on the changes CMS is considering in the Medicaid and CHIP space, we believe that additional time to provide public comments would be mutually beneficial to all stakeholders involved.

Once again, thank you for your consideration of our comments. Supporting access to care and services for eligible Medicaid beneficiaries is of paramount importance. For this reason, we urge you to provide a 30-day extension to the comment periods for CMS-2439-P and CMS-2442-P. We appreciate the opportunity to share our perspective to address access challenges and barriers and look forward to continuing to work with CMS to make a meaningful difference in the lives of Medicaid beneficiaries.

Please feel free to reach out to me directly at sattanasio@mhcpa.org with any questions or should you need any additional information.

Sincerely,

/s/

Shannon Attanasio
Vice President, Government Relations and Advocacy