



State of Vermont
Department of Vermont Health Access
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October 7, 2022

Sarah deLone, Director Children and Adults Health Programs Group Center for Medicaid and CHIP Services Centers for Medicare & Medicaid Services 7500 Security Boulevard Baltimore, Maryland 21244-1850

RE: 1902(e)(14)(A) Waiver Authority for PHE Unwind

Dear Ms. deLone:

Upon the end of the Public Health Emergency, Vermont will have a large volume of eligibility and enrollment actions to complete. Vermont anticipates severe operational and systems challenges in the timely completion of these eligibility and enrollment actions in large part due to an unprecedented caseload of renewals that the state will need to process, coupled with significant staffing shortages that the state currently faces.

The March 3, 2022 Centers for Medicare & Medicaid Services (CMS) State Health Official (SHO) letter #22-001, "Promoting Continuity of Coverage and Distributing Eligibility and Enrollment Workload in Medicaid, the Children's Health Insurance Program (CHIP), and Basic Health Program (BHP) Upon Conclusion of the COVID-19 Public Health Emergency," describes five strategies states may request to assist in addressing the challenges states may face as part of a transition to routine operations. These strategies are authorized under Section 1902(e)(14)(A) of the Social Security Act and CMS advises that it will consider other strategies in addition to those it describes ("1902(e)(14)(A) strategies").

Vermont is requesting that CMS approve the 1902(e)(14)(A) strategy outlined below to protect beneficiaries from inappropriate terminations and reduce state administrative burden during this transition period.

## Suspend Requirement for an Applicant/beneficiary to Apply for Other Benefits as a Condition of Eligibility

Vermont requests a temporary suspension of the requirement, as a condition of Medicaid eligibility, for individuals to apply for certain other benefits to which they are entitled (such as annuities, pensions, retirement, disability, and unemployment benefits). This authority is needed to help address the extraordinarily high volume of renewals and other eligibility and enrollment actions that Vermont will need to conduct during its unwinding period. It will efficiently



facilitate the renewal process, as well as the initial application process, by limiting the need for requests for additional information from Vermont's Medicaid beneficiaries and applicants thereby promoting access to care, continuity of coverage, minimizing burden and reducing workload for Vermont's eligibility staff during a time that the state is facing significant strains on its workforce, including staff shortages.

Vermont requests that this authority be effective as of the start date of its unwinding period and remain effective through the end of the unwinding period, as defined in SHO #22-001.

Vermont looks forward to your review and approval of this request. If you have any questions or concerns, please contact Danielle Fuoco, Policy Analyst, (802) 585-4265, Danielle.Fuoco@vermont.gov

Sincerely,

Adaline Strumolo

Deputy Commissioner

Department of Vermont Health Access

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