

July 31, 2023

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 Unwind

Dear Ms. deLone:

During its unwinding period, 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 strategies states may request to assist in addressing the challenges states may face as part of a transition to routine operations. CMS can authorize these strategies under Section 1902(e)(14)(A) of the Social Security Act.

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

1. **Renew Eligibility for Individuals with Only Title II or Other Stable Sources of Income (e.g. Pension Income) Without Checking Required Data Sources (Stable Income Renewal):**

Vermont requests to temporarily complete the income determination for *ex parte* renewals without requesting additional income information or documentation if: (1) the most recent income determination (either at initial application or most recent renewal)



was no earlier than 12 months prior to the beginning of the COVID-19 PHE (*i.e.*, March 2019); and (2) the individual only had the following sources of stable income at the most recent determination: Title II Social Security income, Railroad Retirement income, unemployment compensation, pension/retirement income, Veteran's Administration compensation, Veteran's Administration pension, worker's compensation, non-government disability income, alimony, child support, mortgage/promissory note payments. 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 the unwinding period. It will efficiently facilitate the renewal process by limiting the need for requests for additional information from Vermont's Medicaid beneficiaries thereby promoting 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 will continue to take appropriate steps to complete an *ex parte* determination of the non-financial components of eligibility consistent with the state's existing policies and procedures, outlined in the state's verification plan implementing 42 CFR §§ 435.916 and 435.956, or through a renewal strategy authorized under section 1902(e)(14)(A) of the Act or other alternative processes and procedures approved by the Secretary of Health and Human Services.

Vermont requests that this authority be effective October 1, 2023 and remain effective for renewals initiated through the end of the unwinding period, as defined in SHO #22-001.

2. **Renew Eligibility Without Regard to the Asset Test for Non-MAGI Beneficiaries Subject to an Asset Test (Waiving Asset Test):**

Vermont requests to temporarily waive the beneficiary asset test for redeterminations, including renewals and changes of circumstances, for certain of the state's non-MAGI eligibility groups subject to an asset test, as otherwise required per 42 CFR § 435.916(a)(2), incorporated by cross-reference in 42 CFR § 435.916(b). The state will take appropriate steps to review income and the non-financial components of eligibility consistent with the state's existing policies and procedures, outlined in the state's verification plan implementing 42 CFR §§ 435.916, 435.948 and 435.956, or through a renewal strategy authorized under section 1902(e)(14)(A) of the Act or other alternative processes and procedures approved by the Secretary of Health and Human Services. 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 the



unwinding period. It will efficiently facilitate the renewal process by limiting the need for requests for additional information from Vermont's Medicaid beneficiaries thereby promoting 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 October 1, 2023 and remain effective for renewals initiated through the end of the unwinding period, as defined in SHO #22-001.

3. **Waive the Recording of the Telephone Signature from the Beneficiary (Telephonic Signature Recording):**

Vermont requests to temporarily waive the recording of the telephonic signature as required by 42 CFR § 435.916(a)(3)(i)(B) at renewal in order to enhance the telephone renewal process of its Medicaid beneficiaries of long-term services and supports. Vermont requests to use this authority only for its Medicaid beneficiaries receiving long-term services and supports and only at their renewals. 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 the unwinding period. This authority will efficiently facilitate the renewal process for its long-term care Medicaid population thereby promoting 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.

In implementing this authority, Vermont assures that:

- Vermont will provide, via mail or the individual's preferred electronic format in accordance with 42 CFR § 435.918, the beneficiary with a copy of the renewal completed on the phone.
- Vermont will provide, via mail or the individual's preferred electronic format in accordance with 42 CFR § 435.918, the beneficiary with a copy of the Rights and Responsibilities included in the renewal.
- Vermont will document that the beneficiary provided their verbal signature on the phone as part of the beneficiary's case record.

Vermont requests that this authority be effective August 1, 2023 and remain effective for renewals initiated through the end of the unwinding period, as defined in SHO #22-001.



State of Vermont
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Agency of Human Services

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

