



Children and Adults Health Programs Group

August 16, 2023

Adaline Strumolo
Deputy Commissioner
Department of Vermont Health Access
280 State Drive, NOB 1 South
Waterbury, VT 05671-1010

Dear Deputy Commissioner Strumolo:

This letter is in response to Vermont's request, dated July 31, 2023, for a waiver under section 1902(e)(14)(A) of the Social Security Act (the Act), that will protect beneficiaries in addressing the challenges the state faces as part of a transition to routine operations upon the expiration of the Medicaid continuous enrollment condition. Section 1902(e)(14)(A) allows for waivers "as are necessary to ensure that states establish income and eligibility determination systems that protect beneficiaries." Such waivers are time-limited and are meant to promote enrollment and retention of eligible individuals by easing the administrative burden states may experience in light of systems limitations and challenges.

Vermont has requested that the Centers for Medicare & Medicaid Services (CMS) provide authority under section 1902(e)(14)(A) of the Act to temporarily waive the recording of the telephonic signature at renewal for those beneficiaries receiving long-term services and support. The state has expressed the need for this authority in order to address systems and operational issues related to the extraordinarily high volume of renewals and other eligibility and enrollment actions that need to be conducted during the unwinding period. Specifically, without this waiver the state is concerned about significant delays in renewal processing, unmanageable workloads given limited staff capacity, and an increase in procedural closures. Adopting this strategy will help the state increase renewal rates and reduce gaps in coverage.

Under Section 1902(e)(14)(A) of the Act, your request to temporarily waive the recording of the telephonic signature as required by 435.916(a)(3)(B) at renewal is approved, as described and subject to the conditions below.

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

The authority provided in accordance with this letter will enable the state, during the period of time specified below, to temporarily waive the recording of the telephonic signature as required by 42 CFR 435.916(a)(3)(B). This authority applies to beneficiaries receiving long-term care in an institution as well as beneficiaries receiving home- and community-based services (HCBS) through the following programs: Choices for Care, Brain Injury Program, Developmental Disabilities, and Intensive HCBS.

In exercising the authority provided in this letter, the state will ensure that:

- The state 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.
- The state 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 application and renewal.
- The state will document that the beneficiary provided their verbal signature on the phone as part of the beneficiary's case record.

The authority provided in this letter is effective August 1, 2023 and will remain effective until 14 months after the end of the continuous enrollment condition (i.e. May 31, 2024).

The authority provided in this letter is subject to CMS receiving your written acknowledgement of this approval and acceptance of this new authority and the terms described herein within 30 days of the date of this letter.

We look forward to our continuing work together as part of a transition to routine operations. If you have questions regarding this award, please contact Joe Weissfeld and Jessika Douglas in the Division of Enrollment Policy and Operations, at josef.weissfeld@cms.hhs.gov and jessika.douglas@cms.hhs.gov.

Sincerely,

A handwritten signature in blue ink that reads "Sarah deLone". The signature is fluid and cursive, with a large initial "S" and a long, sweeping underline.

Sarah deLone, Director,
Children and Adults Health Programs Group