



April 1, 2022

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services
Washington, DC 20201

Dear Administrator Brooks-LaSure:

On behalf of the Partnership for Medicaid, we urge you to address an urgent issue in the Medicaid program—the potential loss of coverage for millions of beneficiaries at the end of the federal public health emergency (PHE). While we believe ending the PHE would be premature at this time, we are writing to ensure the unwinding is handled in a prudent manner that will minimize unintended consequences. The Partnership—a nonpartisan, nationwide coalition made up of organizations representing clinicians, health care providers, safety net plans, and counties—has supported many of the federal initiatives that protect the Medicaid program and its beneficiaries during these last two years of the pandemic.

We are encouraged by the [recent guidance](#) issued by your agency aimed at how states can initiate Medicaid eligibility redeterminations after the PHE. This guidance outlines several flexibilities and strategies that states can use to protect beneficiaries during the unwinding period. We also appreciate the [suite of tools](#), including a state template that asks about plans to process renewals. We are also encouraging Congress to institute additional protections to prevent massive coverage loss.

As policymakers have conversations about the timing of the end of the PHE, we strongly urge you to continue working with states on a predictable, transparent, and evidence-informed wind down of the enhanced federal medical assistance percentage (FMAP) and continuous coverage provisions included in the Families First Coronavirus Response Act (FFCRA) that provides sufficient guardrails to protect beneficiaries while also reflecting the trajectory of the COVID-19 pandemic.

We understand that the department raised challenges about being able to give more than 60 days' notice of the end of the PHE. We reiterate the request of several stakeholders and ask for at least a 120-day lead time before unwinding the FMAP and Maintenance of Effort provisions of the FFCRA. This will allow state Medicaid agencies sufficient time to transition plan and ensure enrollees have time to re-establish their Medicaid eligibility or transition to subsidized coverage in the Affordable Care Act Marketplaces. The recent story titled, [Millions of vulnerable Americans likely to fall off Medicaid once the federal public health emergency ends](#), from the Washington Post, published on March 14, 2022, illustrates why providing states with as much time is needed to prevent as many as 16 million low-income Americans, millions of whom are children, from losing their vital coverage.

Our coalition welcomes the opportunity to work with you on this critical issue. We remain grateful for your leadership and commitment to the Medicaid program and the populations it serves. If you have questions or seek any additional information, please contact Jonathan Westin at the Jewish Federations of North America, First Co-Chair of the Partnership for Medicaid at Jonathan.Westin@jewishfederations.org. We look forward to working with you to protect coverage for the millions of Medicaid beneficiaries we are privileged to serve.

Sincerely,

American Academy of Family Physicians
American College of Obstetricians and Gynecologists
American Dental Association
American Dental Education Association
American Health Care Association
American Network of Community Options & Resources (ANCOR)
America's Essential Hospitals
Association for Community Affiliated Plans
Association of Clinicians for the Underserved
Catholic Health Association of the United States
Children's Hospital Association
The Jewish Federations of North America
Medicaid Health Plans of America
National Association of Counties
National Association of Pediatric Nurse Practitioners
National Association of Rural Health Clinics
National Health Care for the Homeless Council
National Hispanic Medical Association