



May 17, 2023

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

Dear Administrator Brooks-LaSure,

On behalf of the nation's Medicaid Directors and leaders of Medicaid home- and community-based services waiver operating agencies, our associations are writing to request an extension of at least 30 calendar days of the comment periods for CMS's recently released Notices of Proposed Rulemaking on access to care in Medicaid and CHIP [CMS-2442-P] and Medicaid and CHIP managed care finance, access, and quality [CMS-2439-P]. As our members embark on an intensive period of work conducting long-paused Medicaid renewals, winding down the COVID-19 public health emergency and its attached flexibilities, and continued management of HCBS investments from the American Rescue Plan, agency bandwidth to thoughtfully respond to regulatory actions of this magnitude by the current July 3 closure of the comment period is extremely limited. A longer comment period will allow state and territory leaders to more fully assess these rules and provide constructive comment for CMS's consideration.

Our associations appreciate CMS's goals with these regulations. Strengthening access to Medicaid and CHIP covered services and improving the quality of those services within fee-for-service and managed care delivery systems is a shared aim of the federal government, the states, and the territories.

The specific policies CMS proposes to achieve these goals are complex, far-ranging, and touch a diverse array of programmatic areas. The scope and complexity of CMS's policy ideas would require significant time to analyze and respond to in normal times. We do not find ourselves in normal times. Our association memberships must manage multiple significant priorities between now and July 3, most significantly the initiation of renewal processes for the over 90 million individuals currently covered by the Medicaid program. The resources necessary to focus on this work directly impact the ability for

our members to carefully review CMS's proposals, understand their impact, and articulate the resources, systems needs, operational considerations, and other factors necessary to achieve success.

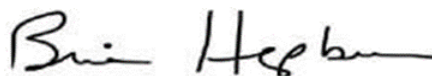
Without additional time for our members to conduct such assessments, CMS may not receive the level of policy and technical feedback that would best situate final regulatory action for successful implementation. We strongly encourage CMS to extend the comment period of these rules to ensure the strongest possible feedback from the state and territorial leaders who will be on the leading edge of implementation.

Our associations appreciate your consideration of this request, and we look forward to continued partnership to further strengthen Medicaid and CHIP.

Sincerely,



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