



The Enrollment Coalition

The Honorable Chiquita Brooks-LaSure
Administrator
Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, D.C. 20201

Re: CMS 2442-P, Ensuring Access to Medicaid Services Proposed Rule

Administrator Brooks-LaSure:

The Enrollment Coalition appreciates the opportunity to comment on the Ensuring Access to Medicaid Services Proposed Rule. The Enrollment Coalition is a group of organizations across the health care community, including consumer advocates, patient advocates, health plans, health care providers, employers, and technology and data organizations. Our mission is to collaboratively identify, develop, and advance actionable policy recommendations for federal policymakers aimed at improving enrollment data, systems, and processes to foster the enrollment of uninsured Americans under age 65 into existing health coverage plans and programs for which they are otherwise eligible.

In order to increase transparency and accessibility, CMS is proposing a number of requirements for State Medicaid program websites, including that the websites use clear and easy to understand labels and the websites must explain that assistance in accessing information is available at no cost, including information on the availability of oral interpretation in all languages and written translation in each prevalent non-English language, alternate formats, auxiliary aids and services, and a toll-free TTY/TDY telephone number. CMS also proposes to require state websites to include information on enrollee handbooks, provider directories, and formularies, and quality related information. The Enrollment Coalition supports CMS' proposals to increase the accessibility of clear information to support enrollment. The Enrollment Coalition also supports the proposed requirement that state websites explain that assistance is available at no cost. Culturally and linguistically competent assisters provide important outreach, education, and enrollment assistance to consumers eligible for coverage.

As state Medicaid programs have resumed redeterminations, Enrollment Coalition members have heard of some states in which consumers are experiencing extensive wait times with call centers. Ensuring state websites provide easily understandable information for consumers is critical to preventing significant coverage losses.

The proposed rule also reminds states that they are required to have a Medical Care Advisory Committee (MCAC) to advise the state Medicaid agency about health and medical care services. The proposed rule renames the MCAC as the Medicaid advisory committee (MAC) and establishes a beneficiary advisory group (BAG). These groups would provide bi-directional feedback between stakeholders and the state on the administration of the Medicaid program. The proposed rule would require that at least 25 percent of the MAC's membership be comprised of BAG members with Medicaid beneficiary experience either as a beneficiary or as a caretaker of a beneficiary. The

Enrollment Coalition supports the requirement for the MAC to include participation from beneficiaries and caretakers. Inclusion of individuals with lived experience is critical to advancing health equity. MACs should seek information on enrollment processes from members with lived experience, including identifying barriers to enrollment and opportunities to reduce barriers.

Thank you for your consideration of these comments.

Sincerely,

The Enrollment Coalition