



January 29, 2013

Marilyn Tavenner
Acting Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Acting Administrator Tavenner:

On behalf of the nation's Medicaid Directors we are writing to respectfully request a 30 day extension of the comment period for the U.S. Department of Health and Human Services' Notice of Proposed Rulemaking, "Medicaid, Children's Health Insurance Programs, and Exchanges: Essential Health Benefits in Alternative Benefit Plans, Eligibility Notices, Fair Hearing and Appeal Processes for Medicaid and Exchange Eligibility Appeals and Other Provisions Related to Eligibility and Enrollment for Exchanges, Medicaid and CHIP, and Medicaid Premiums and Cost Sharing" (CMS-2334-P). Such an extension aligns with the 60 or 90-day comment period afforded to proposed rules of similar import.

Medicaid Directors welcome information and guidance that allows them to advance both their long-term programmatic goals and plans to streamline operations based on the Health Insurance Marketplace model adopted in their state. The proposed rule contains information that Directors consistently have indicated would be essential for proceeding with not only the new optional Medicaid eligibility expansion, but also existing Medicaid operations and processes. Further, regardless of a state's decision to take up the new Medicaid expansion option, all states must consider the rule's myriad policy and technical issues in advance of the launch of Health Insurance Marketplaces and related health coverage changes scheduled to take effect in 2014.

Given the magnitude, complexity, and policy significance of issues contained in this rulemaking, we believe an extension of the comment period is warranted. Notably, this rulemaking joins a steady stream of other guidance released or scheduled for release since the latter part of 2012. It is simply not feasible for the vast majority of states to thoroughly analyze, comment, and make recommendations on the proposed regulation within the abbreviated 30-day comment period. We are concerned that states will need to divert staff resources from existing projects and operations for the next several weeks in order to meet this timeline.



In addition, as the Medicaid Directors' national organization, NAMD provides important perspectives for the federal level conversations. This brief comment period also effectively prevents our Association from fully engaging our members to develop consensus-based comments.

We understand and agree with the need to move expeditiously to finalize regulations. However, establishing an abbreviated comment period jeopardizes states' ability to submit constructive feedback and ultimately our shared goal of developing sound policy. We hope you will consider other tools available to you, including extending the comment deadline and issuing interim final rules, to ensure states have sufficient time to thoroughly review and provide comment on the issues contained therein.

On behalf of the nation's Medicaid Directors, we appreciate your consideration of this request, and look forward to your timely response given the current deadline. If you have any questions or concerns about this request, please do not hesitate to contact Matt Salo, NAMD's Executive Director.

Sincerely,

A handwritten signature in black ink, appearing to read "Darin J. Gordon".

Darin J. Gordon
TennCare Director
Department of Finance and Administration
State of Tennessee
President, NAMD

A handwritten signature in black ink, appearing to read "Thomas J. Betlach".

Thomas J. Betlach
Arizona Health Care Cost
Containment System Director
State of Arizona
Vice President, NAMD

Cc:

Cindy Mann, Director
Centers for Medicaid and CHIP Services
Centers for Medicare & Medicaid Services