April 30, 2015

Victoria Wachino
Director
Center for Medicaid and CHIP Services
Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services

RE: Extension of Authority for “Strategy 3” for Enrolling SNAP recipients in Medicaid

Dear Director Wachino,

The undersigned are members and allies of the Coalition for Access and Opportunity, a broad network of practitioner, advocacy and research organizations founded to promote policies and practices that streamline access to multiple work support and safety net programs so that eligible people can receive the benefits they need to meet their families’ basic needs and succeed at work.

We appreciate the Administration’s leadership in promoting integration and interoperability of health and human service programs. As you know, the use of SNAP participation to identify and enroll people in Medicaid, sometimes known as “strategy 3,” has been highly successful. However, the CMS guidance announcing the “SNAP to Medicaid” strategy, released in May 2013, only provides states temporary access to the waiver option through 2015. Given that many states are still experiencing challenges and delays in fully transitioning their eligibility systems to meet the full requirements of streamlined eligibility under the Affordable Care Act (ACA), we believe that at a minimum it is appropriate that CMS extend this authority at least through 2018, and provide flexibility to the states that have adopted strategy 3 in re-determining eligibility of recipients. We also believe that CMS should explore steps states could take to permanently use SNAP participation as a basis for finding people eligible for Medicaid.

The Affordable Care Act (ACA) required significant changes to methods for establishing eligibility for many categories of Medicaid and the Children’s Health Insurance programs and set forth a vision for streamlined and simplified processes by which people are determined eligible for these programs. We believe that it is consistent with this vision to make the SNAP to Medicaid strategy permanent, given the overwhelming overlap of eligibility between these programs. This would reduce the burden of eligibility verification and paperwork on both states and customers, improve timeliness and efficiency, and improve the continuity of health care coverage. Using SNAP data for Medicaid determination is exactly the kind of efficiency and reliance on trusted electronic sources envisioned by the ACA’s requirement for a streamlined and simplified enrollment process.

At a minimum, the availability of the SNAP to Medicaid strategy should be extended through 2018. The original guidance assumed that the transition to new eligibility systems and processes would be virtually complete by 2015. However, the Administration has already recognized that the transition to new eligibility determination systems is taking longer than originally anticipated, and has extended the waiver of cost allocation requirements usually required under OMB circular A-87 through 2018. In some states, workers must now enter the same information into more than one eligibility system when people applying for both Medicaid and SNAP. This duplication of effort adds costs and burden, and has the potential to cause significant delays in processing eligibility.

In addition, we urge CMS to provide additional flexibility to those states that have already implemented the SNAP to Medicaid strategy. When Medicaid customers enrolled through this strategy are due for renewal, if they have been recertified as eligible for SNAP benefits, that recertification should be taken as
sufficient for a redetermination of income eligibility for Medicaid. Without this flexibility, people currently enrolled may be dropped from coverage if the state has not gotten through their processing backlog, even though their incomes have not changed.

Finally, we have heard that CMS has encouraged states seeking continuing authority for strategy 3 beyond 2015 to submit waiver requests indicating why they will continue to need this option beyond this time period. While this is a positive step, state agencies may well be reluctant to ask for waivers if they have not been given clear guidance that their requests will be considered favorably. Moreover, clear public guidance about a continuation of strategy 3 would also allow both legislators and advocates to hold states accountable for the opportunities that they adopt or pass on.

Thank you for your consideration of this matter. Please feel free to contact Suzanne Wikle at CLASP (swikle@clasp.org) with any questions.

Sincerely,

**National Organizations**
- Benefits Data Trust
- Center for Law and Social Policy
- Enroll America
- First Focus
- National Association of Social Workers
- National Health Law Program
- Single Stop
- Social Interest Solutions
- SfP (Solutions for Progress)
- The Children’s Partnership

**State Organizations**
- Alliance to Transform CalFresh
- California Association of Food Banks
- California Coverage & Health Initiatives
- California Food Policy Advocates
- California Pan-Ethnic Health Network
- California WIC Association
- Child Care Law Center
- Children Now
- Children’s Defense Fund – California
- Health Access
- United Ways of California
- Western Center on Law and Poverty