



State of Vermont
Agency of Human Services
280 State Drive, Center Building
Waterbury, VT 05671-1000

Global Commitment Register

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GCR 24-063
FINAL

Changes to Transitional Medical Assistance

Policy Summary:

The Vermont Medicaid program is providing this notification of changes to the eligibility requirements and conditions for Transitional Medical Assistance. Transitional Medical Assistance (TMA) may be available for up to 12 months to families who become ineligible for Medicaid because a parent or caretaker relative has new or increased earnings. The TMA period begins with the month immediately following the month in which they become ineligible.

Vermont Medicaid has elected to extend the initial TMA period from 6 months to 12 months, effectively eliminating the reporting requirements for the 6-month extension period that follows the initial 6-month TMA period. Vermont has been applying this extension during its unwinding from the Public Health Emergency as one of its federally-recognized flexibilities.

Vermont Medicaid has also elected to expand eligibility for TMA to include any parent or caretaker relative eligible and enrolled in Medicaid, and any dependent child of such person eligible and enrolled in Medicaid, in at least one of the past 6 months. This effectively eliminates the requirement for TMA that eligibility and enrollment in Medicaid be in at least 3 of the past 6 months.

These changes were approved by the Centers for Medicare & Medicaid Services in State Plan Amendment 24-0002. They will be reflected in the following Health Benefits Eligibility and Enrollment (HBEE) rule sections in upcoming rulemaking, expected to commence later this year:

- HBEE Part 2, Section 7.03(a)(6)(i) – change Medicaid eligibility and enrollment requirement from 3 of the last 6 months to one of the last 6 months
- HBEE Part 2, Section 7.03(a)(6)(ii) – change initial extension from six months to twelve months
- HBEE Part 2, Section 7.03(a)(6)(iii) – eliminate additional six-month extension

Effective Date: April 1, 2024

Authority/Legal Basis:

[Medicaid State Plan](#)

Section 1925 of the Social Security Act

Population Affected:

Medicaid beneficiaries who meet the criteria for Transitional Medical Assistance as described in [SPA VT-24-0002](#).

Fiscal Impact:

This change is expected to be budget neutral.

Additional Information:

The currently adopted [Health Benefits Eligibility and Enrollment \(HBEE\) rules](#) can be found on the Agency of Human Services website.

To be added to the GCR email list, send an email to AHS.MedicaidPolicy@vermont.gov.