



via electronic submission

July 26, 2019

Seema Verma
Administrator
Centers for Medicare and Medicaid Services
U.S. Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

Re: ACS CAN's Comments on Proposed 1332 Waiver

Dear Administrator Verma:

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on the Health Source Rhode Island's Section 1332 waiver proposal. ACS CAN is making cancer a top priority for public officials and candidates at the federal, state and local levels. ACS CAN empowers advocates across the country to make their voices heard and influence evidence-based public policy change as well as legislative and regulatory solutions that will reduce the cancer burden. As the American Cancer Society's nonprofit, nonpartisan advocacy affiliate, ACS CAN is critical to the fight for a world without cancer.

ACS CAN supports a robust marketplace from which consumers can choose a health plan that best meets their needs. Access to health care coverage is paramount for persons with cancer and survivors. Research from the American Cancer Society has shown that uninsured Americans are less likely to get screened for cancer and thus are more likely to have their cancer diagnosed at an advanced stage when survival is less likely and the cost of care more expensive.¹ In the United States, more than 1.7 million Americans will be diagnosed with cancer this year – an estimated 6,540 in Rhode Island.² An additional 15.5 million Americans are living with a history of cancer – 67,900 in Rhode Island.³ For these Americans access to affordable health insurance is a matter of life or death.

ACS CAN supports Rhode Island's proposed reinsurance program. A well-designed reinsurance program can help to lower premiums and mitigate plan risk associated with high-cost enrollees. We note that the Health Source Rhode Island (HSRI) estimates the reinsurance program will

¹ E Ward et al, "Association of Insurance with Cancer Care Utilization and Outcomes, *CA: A Cancer Journal for Clinicians* 58:1 (Jan./Feb. 2008), <http://www.cancer.org/cancer/news/report-links-health-insurance-status-with-cancer-care>.

² American Cancer Society. *Cancer Facts & Figures: 2019*. Atlanta: American Cancer Society, 2019.

³ American Cancer Society. *Cancer Treatment & Survivorship Facts & Figures 2019-2021*. Atlanta: American Cancer Society, 2019.

reduce premiums by 5.9 percent in plan year 2020 and 6.3 percent in 2021.⁴ These savings could reduce federal subsidy payments, and lower premiums for consumers not eligible for subsidies who enroll in coverage through the exchange.

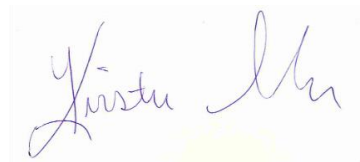
A reinsurance program may encourage insurance carriers to continue offering plans through the exchange or begin to offer plans. The expected maintenance or increase in plan competition due to the reinsurance program also may help to keep premiums from rising. These premium savings could help cancer patients and survivors afford health insurance coverage and may allow some individuals to enroll who previously could not afford coverage. HSRI estimates that enrollment in the individual market will increase by 0.9 percent in 2020 because of the reinsurance program.⁵

We are pleased that the application states that the waiver “will not impact the comprehensiveness of coverage in Rhode Island, except insofar as individuals with coverage have more comprehensive coverage than those without.”⁶ ACS CAN believes that patient protections in current law – like the prohibition on pre-existing condition exclusions, prohibition on lifetime and annual limits, and Essential Health Benefits requirements – are crucial to making the healthcare system work for cancer patients and survivors.

Conclusion

On behalf of the American Cancer Society Cancer Action Network, we thank you for the opportunity to comment on the proposed section 1332 waiver, which we believe will provide long-term viability of the individual market while not eroding important consumer protections. If you have any questions, please feel free to contact Jennifer Singleterry, Senior Policy Analyst at Jennifer.Singleterry@cancer.org or 202-585-3233.

Sincerely,



Kirsten Sloan
Vice President, Public Policy
American Cancer Society Cancer Action Network

⁴ Health Source Rhode Island. Rhode Island’s 1332 Waiver Application. July 8, 2019.
https://healthsourceri.com/wp-content/uploads/190708_FinalApplicationPackage.pdf

⁵ Ibid.

⁶ Ibid.



August 14, 2019

Honorable Alex Azar
Secretary
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC

Honorable Steven Mnuchin
Secretary
Department of the Treasury
1500 Pennsylvania Avenue, NW
Washington, DC 20220

Re: Rhode Island Section 1332 Waiver Application

Dear Secretary Azar and Secretary Mnuchin:

On behalf of people with cystic fibrosis, the Cystic Fibrosis Foundation appreciates the opportunity to support Rhode Island's 1332 State Innovation Waiver application to operate a reinsurance program.

Cystic fibrosis (CF) is a life-threatening genetic disease that affects 30,000 children and adults in the United States. CF causes the body to produce thick, sticky mucus that clogs the lungs and digestive system, which can lead to life-threatening infections. As a complex, multi-system condition, CF requires targeted, specialized treatment and medications.

People with CF benefit from insurance marketplaces that offer affordable health plans that cover their complex health needs. The Cystic Fibrosis Foundation supports Rhode Island's creation of a reinsurance program that will make coverage more affordable and expand plan choice by encouraging insurer participation in the marketplace.

Reinsurance is an important tool to help stabilize health insurance markets. These programs help insurance companies cover claims for high cost enrollees, keeping premiums more affordable for everyone. For instance, a temporary reinsurance fund for the individual market established under the Affordable Care Act reduced premiums by an estimated 10 to 14 percent in its first year.¹ A recent analysis by Avalere of the seven states that have created their own reinsurance programs through Section 1332 waivers also found that these programs reduced individual market premiums by an average of 19.9 percent in their first year.²

The Cystic Fibrosis Foundation appreciates the opportunity to provide input on these important policy changes. As the health landscape continues to evolve, we look forward to working with the state of Rhode Island to ensure high quality, specialized CF care and improve the lives of all with cystic fibrosis. Please consider us a resource moving forward.

Sincerely,

Mary B. Dwight
Senior VP of Policy & Patient Assistance Programs
Cystic Fibrosis Foundation

Lisa B. Feng, DrPH
Senior Director of Access Policy & Innovation
Cystic Fibrosis Foundation

¹ American Academy of Actuaries, Individual and Small Group Markets Committee. *An Evaluation of the Individual Health Insurance Market and Implications of Potential Changes*. January 2017. Retrieved from https://www.actuary.org/files/publications/Acad_eval_indiv_mkt_011817.pdf.

² Avalere. *State-Run Reinsurance Programs Reduce ACA Premiums by 19.9% on Average*. March 2019. Retrieved from <https://avalere.com/press-releases/state-run-reinsurance-programs-reduce-aca-premiums-by-19-9-on-average>.



American Heart Association.



AMERICAN LUNG ASSOCIATION®



Arthritis Foundation®



EPILEPSY FOUNDATION



LEUKEMIA & LYMPHOMA SOCIETY®



National Multiple Sclerosis Society



NORD®
National Organization for Rare Disorders



NATIONAL PSORIASIS FOUNDATION®

August 14, 2019

Honorable Alex Azar
Secretary
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Honorable Steven Mnuchin
Secretary
Department of the Treasury
1500 Pennsylvania Avenue, NW
Washington, DC 20220

Re: Rhode Island's 1332 Waiver Application

Dear Secretary Azar and Secretary Mnuchin:

Thank you for the opportunity to submit comments on Rhode Island's 1332 Waiver Application.

The undersigned organizations represent millions of individuals facing serious, acute and chronic health conditions across the country. Our organizations have a unique perspective on what patients need to prevent disease, cure illness and manage chronic health conditions. The diversity of our groups and the patients and consumers we represent enables us to draw upon a wealth of knowledge and expertise and serve as an invaluable resource regarding any decisions affecting state health insurance marketplaces and the patients that they serve. We urge the Departments to make the best use of the recommendations, knowledge and experience our organizations offer here.

Our organizations are committed to ensuring that any changes to the healthcare system achieve coverage that is adequate, affordable and accessible for patients. A strong, robust marketplace is essential for people with serious, acute and chronic health conditions to access comprehensive coverage that includes all of the treatments and services that they need to stay healthy at an affordable cost. Our organizations support Rhode Island's efforts to strengthen its marketplace by submitting this application to implement a reinsurance program, and we urge the Departments to approve the application.

Reinsurance is an important tool to help stabilize health insurance markets. Reinsurance programs help insurance companies cover the claims of very high cost enrollees, which in turn keeps premiums affordable for other individuals buying insurance on the individual market. Reinsurance programs have

been used to stabilize premiums in a number of healthcare programs, such as Medicare Part D. A temporary reinsurance fund for the individual market was also established under the Affordable Care Act and reduced premiums by an estimated 10 to 14 percent in its first year.¹ A recent analysis by Avalere of the seven states that have already created their own reinsurance programs through Section 1332 waivers found that these states reduced individual market premiums by an average of 19.9 percent in their first year.²

Rhode Island's proposal will create a reinsurance program starting for the 2020 plan year and continuing for five years. Based on the initial analysis commissioned by the state, this program is projected to reduce premiums by 5.9 percent in 2020 and 6.3 percent in 2021 and increase the number of individuals obtaining health insurance through the individual market by nearly one percent. This would help patients with pre-existing conditions obtain affordable, comprehensive coverage.

As states consider different ways to stabilize their marketplaces, our organizations are pleased that Rhode Island has submitted an application that is projected to improve coverage and affordability without compromising access to essential health benefits or jeopardizing other important protections that our patients rely on. We believe that this 1332 Waiver Application will help stabilize the individual market in Rhode Island and protect patients and consumers. Thank you for the opportunity to provide comments.

Sincerely,

American Heart Association
American Lung Association
Arthritis Foundation
Epilepsy Foundation
Hemophilia Federation of America
Leukemia & Lymphoma Society
National Multiple Sclerosis Society
National Organization for Rare Disorders
National Psoriasis Foundation

¹ American Academy of Actuaries, Individual and Small Group Markets Committee. *An Evaluation of the Individual Health Insurance Market and Implications of Potential Changes*. January 2017. Retrieved from https://www.actuary.org/files/publications/Acad_eval_indiv_mkt_011817.pdf.

² Avalere. *State-Run Reinsurance Programs Reduce ACA Premiums by 19.9% on Average*. March 2019. Retrieved from <https://avalere.com/press-releases/state-run-reinsurance-programs-reduce-aca-premiums-by-19-9-on-average>.



**National
Multiple Sclerosis
Society**

August 14, 2019

U.S. Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Re: Rhode Island Section 1332 State Innovation Waiver

Dear Administrator Verma,

The National Multiple Sclerosis Society appreciates the opportunity to submit comments on Rhode Island's Section 1332 State Innovation Waiver.

Multiple sclerosis (MS) is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain and between the brain and the body. Symptoms range from numbness and tingling to blindness and paralysis. The progress, severity and specific symptoms of MS in any one person cannot yet be predicted, but advances in research and treatment are leading to better understanding and moving us closer to a world free of MS.

The National MS Society believes that everyone should have access to quality, affordable healthcare. Since 2014, the Affordable Care Act (ACA) health insurance marketplace has been an extremely important avenue to affordable, quality coverage for people living with MS. A strong, robust marketplace is essential for people living with multiple sclerosis to access the coverage and care that they need.

However, insurance premiums are rising and will soon price people out of the healthcare system. The Society is committed to ensuring that people living with MS have reliable access to comprehensive health insurance plans with affordable premiums, deductibles, and out-of-pocket costs. Without market stabilization measures like reinsurance, Rhode Islanders who are currently relying on the marketplace for their health insurance could lose their only affordable coverage option. The Society supports Rhode Island's efforts to strengthen its marketplace by submitting this 1332 State Innovation Waiver to implement a reinsurance program.

Reinsurance is an important tool to help stabilize health insurance markets by covering a percentage of the claims of very high cost enrollees; it allows health insurers to remain in the health insurance market when their costs would typically be too high to continue to operate. This will help make premiums more affordable for all individuals who buy insurance on the individual market. Reinsurance programs help insurance companies cover the claims of very high cost enrollees, which in turn keeps premiums affordable for other individuals buying insurance on the individual market. Rhode Island's proposal will create a reinsurance program starting for the 2020 plan year and continuing for five years. This program is projected to reduce net premiums by 5.9-6.3% and increase the number of individuals obtaining



**National
Multiple Sclerosis
Society**

health insurance through the individual market by up to 1.0% percent. This program will undoubtedly help people who live with MS, an expensive pre-existing condition, to obtain and retain affordable, comprehensive coverage.

The Rhode Island 1332 State Innovation Waiver also implements the Shared Responsibility Payment Penalty, which would further fund the state's reinsurance program. The Society supports such policies that would require all qualified people to enroll in health insurance or face a penalty if they remain uninsured. Since the repeal of the federal mandate, known as the Shared Responsibility Payment, that was put in place by the ACA was repealed, several states are working to codify mandate language into law. By requiring health insurance coverage, a state-level individual mandate would potentially lower the average premium for plans sold in Rhode Island in addition to the expected lowering by the reinsurance program. People living with MS may potentially have more affordable options for coverage as a result. By requiring that more people are enrolled in an insurance plan, the risk pool would be increased leading to cost savings to the state.

The Society would like to make one other note on the insurance market in Rhode Island. Currently, the state of Rhode Island requires all insurance plans – even short term, limited duration (STLD) plans – sold in the state to follow various regulations, including the coverage of all essential health benefits. We appreciate Rhode Island being a leader on this issue and would hope to see it continue, as many STLDs in other states fail to meet these requirements. Should less regulated STLDs be allowed in the state and be made applicable to the reinsurance program, they would put at risk the plan's goal of providing greater financial certainty to consumers of health insurance in the state.

The National MS Society believes the 1332 State Innovation Waiver will help stabilize the individual market in Rhode Island and protect patients and consumers. Thank you for the opportunity to provide comments. Should you have any questions, please do not hesitate to contact Laura Hoch at laura.hoch@nmss.org or (860) 913-2550 X52521.

Sincerely,

Laura Hoch
Manager, Advocacy
National Multiple Sclerosis Society



August 13, 2019

Alex M. Azar, Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC. 20201

Emailed to: StateInnovationWaivers@cms.hhs.gov

Re: Rhode Island Section 1332 State Innovation Waiver

Dear Secretary Azar & State Innovation Waiver Program:

The New England Hemophilia Association (NEHA), and the New England Bleeding Disorders Advocacy Coalition (NEBDAC) appreciate this opportunity to submit comments on Rhode Island's Section 1332 State Innovation Waiver.

Since 1957, NEHA has served individuals and families with inherited bleeding disorders, who need information, education and support for their condition. NEBDAC was formed in 2016, as a volunteer advocacy coalition under NEHA. Both NEBDAC and NEHA provide advocacy and education about bleeding disorders in all 6 New England States.

NEHA and NEBDAC believe everyone should have quality and affordable healthcare coverage. A strong, robust marketplace is essential for people in the bleeding disorder community to access the coverage that they need, and our organizations support Rhode Island's efforts to strengthen its marketplace by submitting this 1332 State Innovation Waiver to implement a reinsurance program.

Reinsurance is an important tool to help stabilize health insurance markets. Reinsurance programs help insurance companies cover the claims of very high cost enrollees, which in turn keeps premiums affordable for other individuals buying insurance on the individual market. Reinsurance programs have been used to stabilize premiums in a number of healthcare programs, such as Medicare Part D.



Rhode Island's proposal will create a reinsurance program starting for the 2020 plan year and continuing for 5 years. This program is projected to reduce premiums by 5.9 percent and increase the number of individuals obtaining health insurance through the individual market by .9 percent. This would help patients with pre-existing conditions, including patients with bleeding disorders, obtain affordable, comprehensive coverage.

As always, we thank you for your willingness and openness to feedback on these important questions of access to healthcare. Again, NEHA and NEBDAC believe the 1332 State Innovation Waiver will help stabilize the individual market and increase access to care. We are happy to respond to any additional questions, comments or concerns that you may have.

Thank you for your work on these important issues,

A handwritten signature in black ink that reads "Richard Pezzillo".

Richard Pezzillo
Executive Director
NEHA



A handwritten signature in black ink that reads "Joseph Zamboni".

Joseph Zamboni
Advocacy Coordinator
NEBDAC

