July 1, 2019

Dean L. Cameron
Director
Idaho Department of Insurance
700 West State Street, 3rd Floor
P.O. Box 83720
Boise, ID 83720-0043

RE: Coverage Choice Waiver Application

Dear Director Cameron,

The Global Healthy Living Foundation (GHLF) writes in opposition to Idaho’s Coverage Choice Waiver Application. GHLF believes that healthcare should be affordable and accessible and this waiver limits both affordability and accessibility.

By way of background, GHLF is a 20-year-old non-profit patient organization reaching millions of chronically ill patients and their caregivers across the country through social media, community events and online support and education. GHLF works to improve the quality of life for patients living with chronic disease by making sure their voices are heard and advocating for improved access to care at the local level. Our patients suffer from chronic conditions including arthritis, psoriasis, gastrointestinal disease, cardiovascular disease and migraines. Our patients rely on affordable and accessible healthcare coverage to manage their complex conditions in order to function in everyday life. It is on behalf of our patients that we urge Idaho to oppose the Coverage Choice Waiver Application.

In November 2018, Idaho voters approved a ballot initiative for a full expansion of Medicaid as allowed by the Affordable Care Act. However, the Idaho legislature subsequently imposed barriers on coverage, including a “work requirement” for enrollees. The Coverage Choice Waiver developed by the legislature would allow Idahoans with incomes from 100 percent to 138 percent of the Federal Poverty Level (FPL) the choice to enroll in Medicaid or enroll in private health insurance on the Idaho State Exchange. This would be accomplished through providing Advanced Premium Tax Credits (APTCs) to reduce premiums and cost-sharing reductions for private health insurance.

GHLF believes that accessibility of necessary health care treatments, which includes making the language accessible and comprehensible by patients, is paramount to achieving reduced health care spending and better health outcomes. As currently proposed, the Coverage Choice Waiver lacks clear explanations and protocols to provide the specific information that patients need to make informed decisions about their health care plans. It is also unclear that the choices will be put out in a clear, straightforward, and unbiased manner. The waiver seeks to preserve choice,
but instead it adds a layer of complication. While we encourage the expansion of coverage options available to patients, this waiver limits autonomy by requiring a level of health literacy that many patients lack.

Medicaid is significantly more affordable compared with private insurance, as Medicaid enrollees generally do not pay premiums and are faced with low cost-sharing. Even with the tax credits and cost sharing reductions, affordability remains an encumbrance for private insurance enrollees. Our patients with chronic conditions face high healthcare costs and should not be discouraged from seeking care as a result of affordability issues. It is not evident that coverage under the Coverage Choice Waiver would match Medicaid’s levels of affordability, especially for chronically ill patients who have constant encounters with healthcare.

In terms of adequacy, the Choice Waiver private insurance option does not provide the scope of coverage that Medicaid is required to cover. Under Medicaid expansion services such as home health care, medical transportation, and case management are covered. This type of coverage is not required under private insurance plans. These services are especially important in the chronic disease population that GHLF represents as they focus on coordinated care. Idahoans must be made aware of these discrepancies in coverage a clear manner when making enrollment choices.

Section 1332 requires that the coverage be at least as comprehensive and affordable as would be provided absent the waiver. Due to the expenses resulting from premiums and cost sharing and lack of wide-ranging services, the Coverage Choice Waiver does not fulfill these conditions.

Section 1332 requires that waivers be deficit neutral, however the Coverage Choice Waiver does not meet this requirement. The budget for the waiver is calculated assuming no Medicaid expansion; therefore, assuming those individuals between 100 percent and 138 percent of FPL would be uninsured. However, these individuals would be enrolled in Medicaid, once expansion is taken into effect in 2020, therefore reducing this coverage gap. The Coverage Choice Waiver would increase federal spending as it costs more to provide the tax credits than to provide Medicaid coverage. With the waiver, the individual market is expected to increase by 24,000 to 26,000 enrollees. Estimates indicate that the cost of Medicaid expansion for individuals between 100 percent and 138 percent of FPL is $3,822 less per person compared to the cost of providing APTC and cost-sharing reductions. Given this information, the Coverage Choice Waiver is not expected to be budget neutral.

GHLF opposes the Coverage Choice Waiver as it complicates the affordability, accessibility and scope of coverage for Idahoans. We respectfully ask that you oppose this waiver to ensure that our patients are able to receive the comprehensive coverage they need at an affordable rate. Thank you for the opportunity to comment. If you have any questions about our comments, please feel free to contact Corey Greenblatt at cgreenblatt@ghlf.org.

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Respectfully submitted,

[Signature]

Corey Greenblatt, MPH
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Global Healthy Living Foundation