



June 18, 2015

Andy Slavitt, MBA
Acting Administrator
Centers for Medicare and Medicaid Services
200 Independence Avenue, SW
Washington, DC 20201

Re: Iowa Health and Wellness Plan's Non-emergency Transportation Waiver Extension Request

Dear Administrator Slavitt:

On behalf of the American Congress of Obstetricians and Gynecologists (ACOG), representing 56,000 members nationally, and the Iowa Section of ACOG, representing 225 practicing ob-gyns in the State, we would like to thank you for the opportunity to comment on this waiver extension request for the Iowa Health and Wellness Plan (IAHWP) 1115 Demonstration Waiver. As physicians dedicated to providing quality care to women across the country and the State of Iowa, we appreciate Governor Branstad's commitment and efforts to date to expand Medicaid and ensure ongoing access to health insurance for low-income residents.

However, we are concerned that the request to extend the waiver to provide non-emergency transportation will jeopardize women's access to care. Any improvements in the number of people covered should not be achieved by eroding essential services. We are apprehensive that the amendment application would jeopardize coverage for beneficiaries, particularly those enrolled in the Iowa Wellness Plan. We encourage the Centers for Medicare and Medicaid Services (CMS) to partially deny the State's request and only allow non-emergency medical transportation (NEMT) to be waived for participants in the Marketplace Choice Plan.

The request seeks to continue waiving the requirement to provide NEMT for all new beneficiaries who are not medically exempt for an additional eighteen months. We are concerned that this provision would severely limit participants' access to care. Women cite lack of transportation as a barrier to accessing health care, and this barrier is reported much more frequently among low-income women compared to their higher income peers.¹ Participants without transportation coverage may forgo care, thereby exacerbating preventable health conditions and leading to higher health care spending on acute incidents. Furthermore, Iowa currently ranks 49th out of all states and the District of Columbia in the number of ob-gyns per capita.² Placing another obstacle in women's way to seeking necessary gynecological, preconception, and interconception care is irresponsible when access to

¹ Kaiser Family Foundation. (2014). Women and health care in the early years of the Affordable Care Act: Key findings from the 2013 Kaiser Women's Health Survey.

² Rayburn, W. F., Klagholz, J. C., Murray-Krezan, C., Dowell, L. E., and Strunk, A. L. (2012). Distribution of American Congress of Obstetricians and Gynecologists Fellows and Junior Fellows in Practice in the United States. *Obstetrics & Gynecology*. (119): 1017-1022.

care is already constricted for the women of Iowa. We cannot provide care to our patients and ensure their health if they cannot get to our offices.

In Iowa's supporting brief to the waiver extension request, researchers from the University of Iowa's Public Policy Center found that a statistically significant number of participants in the Wellness Plan usually or always needed help getting to health care visits compared to participants receiving traditional Medicaid state plan services. Almost one quarter of respondents in the Wellness Plan reported always or usually having difficulty getting to care.³ This is not a trivial figure and demonstrates a real need among this covered population. Continuing to waive the requirement to provide NEMT to all of the people in the IAHPW could jeopardize this sub-populations' health and ultimately drive up health care costs.

In contrast to the early experience of Wellness Plan participants, those enrolled in the Marketplace Choice program did not need the same degree of assistance getting to health care visits as Medicaid state plan participants did. While the brief submitted by the State does demonstrate that there is still some unmet need for NEMT, it is as not as widespread as in the Wellness Plan. Therefore, it may be appropriate to continue waiving NEMT for this IAHPW sub-population, provided that there is continued oversight and ongoing evaluation of participants' ability to access care in a timely manner in the most appropriate setting.

ACOG Recommendation: Approve an extension for waiving the requirement to provide non-emergency medical transportation to Marketplace Choice participants, but deny the request for waiving transportation services to Wellness Plan enrollees.

Ultimately, we applaud Iowa's effort to expand coverage to low-income Iowans. However, we are looking to CMS to exert its authority to modify the request in order to ensure that the neediest participants are able to access care in a timely manner. Thank you again for the opportunity to comment on the waiver request. If you would like to discuss this recommendation further, please contact Elizabeth Wieand, ACOG Health Policy Analyst, at 202-863-2544 or ewieand@acog.org.

Sincerely,



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Iowa Section, American Congress of Obstetricians and Gynecologists



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³ Damiano, P. C., Bentler, S. E., Pooley, M. J., McKernan, S. C., and Momany, E. T. (2015). Non-emergency transportation services for IHAWP members: The early experience of Iowa Health and Wellness Plan members. University of Iowa Public Policy Center.