



September 8, 2015

Honorable Sylvia Mathews Burwell
Secretary
U.S. Department of Health and Human Services
200 Independence Ave. SW
Washington, DC 20201

Dear Secretary Burwell:

We write today in strong support of Montana's proposed demonstration waiver, and we urge the Department to approve Montana's plan to provide access to affordable health care coverage to tens of thousands of Montanans. As a nonprofit research organization devoted to advancing economic policies to help low- and moderate-income families, the Montana Budget and Policy Center (MBPC) shares your commitment to providing affordable health care coverage through Medicaid expansion.

Montana's waiver – proposed in conjunction with the legislatively passed Health and Economic Livelihood Partnership (HELP) Act – comes under the backdrop of years of advocacy, intense political negotiations in the state, and federal actions that came before it. MBPC, together with a strong coalition of low-income advocates, business leaders, hospitals, providers, and policymakers, worked tirelessly over the past three years to get us to this point. Furthermore, CMS's approval of Indiana's waiver in the midst of Montana's legislative session, set the stage for the negotiations resulting in the bipartisan HELP Act.

While MBPC has concerns about the impact of premiums, we acknowledge that CMS has previously approved premiums and cost sharing. Like Indiana, Montana's waiver imposes premiums on newly-eligible individuals enrolled in the TPA plan, set at 2 percent of household income. The combination of premiums and copays will not exceed 5 percent of family household income, consistent with the current Montana Medicaid program.

Montana's waiver also ensures that failure to pay premiums by those below 100% of the federal poverty line will not result in loss or change in coverage. For individuals between 100% and 138% that fail to pay, they may be subject to disenrollment; however, they will be able to re-enroll once premiums are paid or when the Department of Revenue assesses the debt against the individual's income taxes.

Furthermore, Montana's waiver provides an outright exemption from the TPA-administered plan for American Indians, medically frail, and those who will require continuity of care that cannot be provided through the TPA's network. This population could represent one-third to one-half of Montana's newly eligible population. We believe this is an appropriate way to ensure these individuals are exempt from premiums and cost sharing.

MBPC strongly supports Fast Track Express Lane Eligibility Waiver, as well as, the proposal for 12-month continuous eligibility. This will streamline eligibility process by using the state's Supplemental Nutrition Assistance Program (SNAP) data, which is an efficient way to reach thousands of Montanans that we know are eligible.

MBPC appreciates the work of the Department on this critical matter to the tens of thousands left waiting for access to affordable health care coverage. Please let us know if we can assist in any way.

Sincerely,



Heather K. O'Loughlin
Co-Director
Montana Budget and Policy Center