



October 2, 2015

Submitted via www.medicaid.gov

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

RE: Comments on Michigan's application to amend the State's current Section 1115
Demonstration Program known as the Healthy Michigan Plan.

Dear Secretary Burwell:

The Michigan Primary Care Association (MPCA) appreciates the opportunity to comment on Michigan's application to amend the Healthy Michigan Plan, the State's current Section 1115 Demonstration Program.

MPCA is the voice for 40 Health Center organizations which provide quality, affordable, comprehensive health care for more than 615,000 Michigan residents, including nearly 320,000 Medicaid beneficiaries and growing, at over 250 sites throughout Michigan. MPCA's member Health Centers provide a full range of primary health care services, including primary medical, dental, and behavioral health services, either through direct care or through community referrals. Health Centers are uniquely equipped to provide coordinated, integrated care as well as enabling services such as outreach, translation, and transportation for vulnerable populations. Health Centers also make sure their patients receive important cancer screenings, such as mammograms and colonoscopies, both of which are easier to access with the implementation of the Healthy Michigan Plan.

As the statewide organization for Health Centers in Michigan, MPCA expresses its strong support for the second waiver and, most importantly, for continued access to health insurance coverage for nearly 600,000 Michiganders currently enrolled in the Healthy Michigan Plan. Because they now have coverage, Health Center patients with Healthy Michigan coverage are utilizing preventive services and making lifestyle changes, such as smoking cessation and weight loss. In the past, uninsured Health Center patients have been forced to make choices between paying for a medical visit and buying food for their family; with the Healthy Michigan Plan they can see their primary care provider, follow through on referrals, and engage in their own care without having to make painful choices.

Michigan Primary Care Association is a leader in building a healthy society in which all residents have convenient and affordable access to quality health care. Its mission is to promote, support, and develop comprehensive, accessible, and affordable quality community-based primary care services to everyone in Michigan.

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In addition to promoting access to health care, the Healthy Michigan Plan also supports robust Health Center programming. Specifically by ensuring payment for essential health care services otherwise provided by Health Centers at low or no cost, the Healthy Michigan Plan increases Michigan Health Centers' capacity to provide the integrated care and enabling services that further improve population and individual health. MPCA respectfully requests the Centers for Medicare & Medicaid Services (CMS) to approve Michigan's second waiver with appropriate terms and conditions to ensure continued access to health care for low-income adults.

A. MPCA urges approval of the second waiver to ensure continued health care coverage under the Healthy Michigan Plan for nearly 600,000 low-income Michiganders.

Though only a year and a half old, the Healthy Michigan Plan provides health care coverage to nearly 600,000 previously uninsured Michigan residents. The Healthy Michigan Plan has transformed these individuals' lives, creating opportunities for 455,000 enrollees to access primary care visits and 174,179 individuals to access preventive care visits. By enabling individuals to utilize primary care rather than emergency care and decreasing chronic illness through preventive screenings and treatment, the Healthy Michigan Plan is well on its way to improving the health and wellbeing of low-income adults across Michigan while decreasing short and long term health care costs to the state and nation. Equally important, the Healthy Michigan Plan is instrumental in increasing access to dental care and to specialty services requiring referral such as colonoscopies and mammograms. With the increases already seen in screening colonoscopies, for example, thousands of low-income adults will find cancers earlier, leading to better outcomes. This is just one example of the impact of the Healthy Michigan Plan. The importance of the Healthy Michigan Plan to our state and its most vulnerable citizens cannot be overstated.

Recognizing the need for access to care and the economic soundness of Medicaid expansion, Michigan legislators from both sides of the aisle championed the Healthy Michigan Plan in 2013, defying the partisan lines that shape reality in most states. To establish a sustainable foundation for expanding Medicaid in Michigan, lawmakers and stakeholders developed the Healthy Michigan Plan to incorporate many unique provisions that highlight bipartisan collaboration. As you are aware, several of these provisions are the subject of the second waiver application currently under consideration by CMS.

Michigan's second waiver proposes to increase cost-sharing and potentially shift individuals with incomes between 100% and 133% Federal Poverty Level (FPL) from Medicaid to the Health Insurance Marketplace after 48 months of enrollment. MPCA joins CMS and the Michigan Department of Health and Human Services (MDHHS) in expressing concern about the significant hardship imposed on individuals affected by the change. Notwithstanding these concerns, MPCA urges CMS to note that on a monthly basis, approximately 15–18 percent of enrollees have incomes over 100% FPL and could potentially be impacted by the second waiver, while 600,000 individuals—100% of enrollees—would lose health care coverage if the Healthy Michigan Plan does not continue. MPCA's priority is to maintain coverage for the nearly 600,000 vulnerable and newly insured adults currently protected by the Healthy Michigan Plan.

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MPCA also encourages CMS to review Michigan's waiver request with an eye towards the exemplary bipartisan negotiation that initially led to the program's passage as well as MDHHS's ongoing commitment to cooperating with CMS and Michigan stakeholders to achieve compromise. MPCA requests CMS continue to work with MDHHS to incorporate safeguards and protections into the Healthy Michigan Plan as further discussed below.

B. MPCA urges inclusion of safeguards and protections for beneficiaries in the terms and conditions of Michigan's second waiver to ensure continued access to affordable and accessible care.

MPCA has worked closely with MDHHS to address shared concerns about the Healthy Michigan Plan second waiver. MPCA encourages CMS to continue working with state officials to "find a path to approval" that meets the requirements of the state law, conforms to federal waiver authority, and continues the Healthy Michigan Plan while providing strong safeguards for enrollees to ensure affordable, accessible coverage. Moreover, given that the effects of the second waiver will not manifest until April 2018, MPCA submits that the intervening 28 months may be used, if needed, to further develop and refine appropriate protocols for implementing the second waiver.

First, as a condition of CMS approving Michigan's waiver request, MPCA recommends a hardship exemption, requiring a box be checked on a form to request the exemption (no documentation), as has been approved in Iowa, to protect this low-income population and to ensure access to needed services.

MPCA also recommends that in order to meet the provisions of the second waiver, a beneficiary must have not only 48 cumulative months of enrollment, but for each of the counted 48 months, the family/individual's income must exceed 100% FPL. This requirement would provide protection for those beneficiaries with fluctuating incomes at or near the poverty line.

MPCA further recommends expanding the types of "healthy behaviors" that may lead to reduced cost sharing for enrollees who wish to participate and increasing the associated incentive to offset the increase in the income-based payment. In addition to expanding the definition of "healthy behaviors," MPCA suggests adding to the list of chronic conditions for which co-pays for preventive services may be waived by Medicaid health plans as well as employing a broad definition of "medically frail" to identify individuals entirely exempt from the second waiver.

MPCA recommends that for those who elect coverage through the Marketplace, wrap-around services are provided by the state to ensure the full range of services included in the Alternative Benefit Plan are available to them. The wrap-around services would include those services in the Alternative Benefit Plan that are not included in the Essential Health Benefits provided in Health Insurance Marketplace plans, such as adult dental, non-emergency medical transportation, and enhanced behavioral health services.

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Finally, MPCA recommends that individuals who elect Health Insurance Marketplace coverage be allowed to return to the Healthy Michigan Plan at any time they determine the options and benefits of the Marketplace plans do not meet their needs, or Healthy Michigan Plan options or benefits are more advantageous to them.

Thank you again for the opportunity to comment and to express our support for the Healthy Michigan Plan. The program is critically important to low-income Michiganders and presents an incredible opportunity to improve population level health. Please don't hesitate to contact me at ksibilsky@mpca.net or 517-381-8001 if MPCA can provide further information.

Sincerely,



Kim Sibilsky
Chief Executive Officer
Michigan Primary Care Association

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