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September 14, 2016

Jennifer Kostasich
Project Officer
Division of Medicaid Expansion Demonstrations
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

RE: Comments to Section 1115 Waiver Demonstration Amendment to the New Hampshire Health Protection Program Premium Assistance Project Number 11-W-00298/1

Dear Ms. Kostasich:

Thank you for the opportunity to provide comments on New Hampshire's Section 1115 Demonstration Amendment to the New Hampshire Health Protection Program Premium Assistance. Bi-State is a non-profit, two-state organization that represents 15 non-profit Community Health Centers (CHCs) with 32 locations in New Hampshire. Bi-State advocates for access to health care for all New Hampshire citizens, with a special emphasis on medically underserved areas. New Hampshire's CHCs serve nearly 110,000 residents annually, of which 17,000 are uninsured. The New Hampshire Health Protection Program (NHHPP) is invaluable to health center patients, and we look forward to its continuance.

New Hampshire's waiver amendment includes a verification of citizenship requirement that requires newly eligible adults to verify United States citizenship by providing two forms of identification and proof of New Hampshire residency. This will create an undue burden on NHHPP enrollees and the low income patients served by CHCs. In addition, there are three health care for the homeless programs in New Hampshire. Like many health center patients, patients served by these health centers have complicated socio-economic backgrounds and experience high rates of severe mental illness and substance use disorders, in particular alcohol related disorders. Studies indicate that citizenship and residency verification requirements create barriers to accessing necessary health care services and coverage, particularly for vulnerable populations.¹ We ask you ask that you deny the request to require proof of citizenship and residency.

The amendment before you asks to waive cost-sharing comparability requirements for the newly eligible adults to allow the state to apply the commercial cost-sharing requirements only to those NHHPP participants in the Premium Assistance Program (PAP). We urge you to support this

¹ See The Impact of Citizenship Doc. Req. on Access to Medicaid for Pregnant Women in Oregon, 2 (August 2011); States Reported that Citizenship Doc. Req. Resulted in Enrollment Declines for Eligible Citizens and Posed Admin. Burdens, 4-6 (June 2007).

request in order for those who are medically frail and covered by Medicaid managed care to be subject to the same requirements of other Medicaid managed care enrollees.

Lastly, we urge you to reject the state's request to mandate 30 hours of work per week for childless, able-bodied adults. The objective of Medicaid is to provide medical assistance to low income individuals, and the proposed work requirement is insufficiently related to providing that medical assistance. We believe this requirement will negatively affect individuals with substance use disorder, despite the exceptions included. Also, studies show that individuals eligible for Medicaid coverage under the Affordable Care Act (Medicaid expansion) live in a family with at least one full or part time worker or are working themselves.² The businesses that employ adults eligible for Medicaid have limited employer-based coverage for their employees.³ This requirement also unnecessarily increases the administrative burden on the state, whose capacity is arguably limited to implement and monitor this provision. We respectfully request you reject this request.

Please feel free to contact me if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Kristine E. Stoddard", with a long horizontal flourish extending to the right.

Kristine E. Stoddard, Esq.
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² See The Kaiser Commission on Medicaid and the Uninsured, *Are Uninsured Adults Who Could Gain Medicaid Coverage Working*, 1 (February 2015).

³ *Id.* at 2.