

September 16, 2016

VIA ELECTRONIC SUBMISSION

Vikki Wachino
Director, Centers for Medicaid and CHIP Services
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244-1850

**Re: New Hampshire Health Protection Program Premium Assistance Section 1115
Demonstration Waiver**

Dear Ms. Wachino:

Planned Parenthood of Northern New England (“Planned Parenthood”) is pleased to submit these comments on the proposed New Hampshire Health Protection Program Premium Assistance Section 1115 Demonstration Waiver (“Health Protection Program”). As a trusted women’s health care advocate, Planned Parenthood supports the commitment of the Centers for Medicare and Medicaid Services (“CMS”) in seeking input from a cross section of stakeholders on this unique proposal.

Planned Parenthood is the largest provider of reproductive and sexual health care for women, men and young people in the State of New Hampshire and across the region. We serve New Hampshire residents through 6 health centers in Claremont, Derry, Exeter, Keene, Manchester and White River Junction, VT. Last year we saw nearly 12,000 patients at these sites.

We are disappointed that New Hampshire lawmakers conditioned the continuation of the Health Protection Program on the approval of draconian eligibility requirements. We strongly urge CMS to reject the work requirements and the identification verification requirements. In addition, we ask CMS to explicitly clarify that family planning services and pregnancy-related services are exempt from all cost-sharing.

I. We Urge CMS to Remove the Conditioning of Medicaid Benefits on the Mandatory Work Requirement.

As required under the statute to reform the Health Protection Program, in order to be eligible to receive benefits, newly eligible adults who are unemployed must engage in at least 30 hours per week of work-related activities. Individuals who fail to meet these standards will be ineligible to receive coverage.

Conditioning Medicaid for the newly eligible population on anything other than income and other eligibility requirements provided in federal statute and regulations (e.g., citizenship requirements) goes against the purpose of having a health protection program like Medicaid. In keeping with Congressional intent and the eligibility criteria laid out in statute, CMS has never approved any state waivers that condition eligibility on employment status. Accordingly, CMS should reject the work requirement proposal outright.

We support coordinating social services programs, as well as finding ways to broaden low-income individuals' access to educational and employment opportunities. However, educational and employment initiatives should remain incentives – not conditions on benefits. Moreover, we recommend that any educational or employment-based incentives be structured in a way that enables a high percentage of individuals to participate in programs. For example, offering evening and weekend classes in addition to daytime activities will enable more individuals to participate in such programs while also being able to actively search for employment.

II. CMS Should Remove the Requirement that Newly Eligible Adults Must Verify their Citizenship by Providing Two Forms of Identification in Addition to Proof of New Hampshire Residency.

The proposal seeks to prevent individuals from enrolling in or participating in the Health Protection Program unless they have verified their United States citizenship by providing two forms of identification and proof of New Hampshire residency. Improving the accuracy of the current Medicaid eligibility determination system is an important state interest, however, a greater state interest should be to ensure that otherwise eligible individuals are able to access the health care services that they need without delay or unnecessary barriers.

For many individuals, particularly those who are homeless, victims of domestic violence, or those with otherwise unstable living situations, acquiring the necessary documents to establish residency or obtaining multiple forms of identification are significant (if not impossible) barriers to overcome. The result of such a measure would be that the most vulnerable of our society would be forced to forgo critical health care access not because they do not qualify, but because they are unable to produce or acquire an extensive list of documents.

These additional verification measures go beyond what is necessary to protect program integrity and we strongly urge CMS to remove the requirement that newly eligible adults must verify their citizenship by providing two forms of identification in addition to proof of New Hampshire residency.

III. CMS Should Clarify that Family Planning Services and All Pregnancy-related Services, Including Abortion, are Exempt from Cost-sharing.

We urge CMS to clarify that the waiver of the comparability requirements for cost-sharing will not affect an individual's ability to access family planning and pregnancy-related services without cost-sharing. The Health Protection Program proposal intends to waive this requirement to allow the state to charge different copayments between the medically frail participants and the Health Protection Program participants. However, the waiver proposal does not clarify that cost-sharing will not be implemented with respect to family planning and pregnancy-related services.

Federal law expressly exempts family planning services and pregnancy-related services from cost-sharing so that Medicaid enrollees will not face access barriers to critical services like birth control, life-saving cancer screenings, and prenatal care. Notably, the family planning services and supplies cost-sharing exemption applies to both traditional populations and the new adult group.¹ Pregnancy-related services, including allowable abortions, must also be free from cost-sharing – regardless if a woman chooses to remain in the newly-eligible group after becoming pregnant.²

We ask CMS to explicitly clarify that the Health Protection Program enrollees will not be required to meet cost-sharing obligations when accessing pregnancy-related services and family planning services and supplies as a result of waiving the comparability requirements.

Thank you for the opportunity to comment on the proposed waiver. If you have any questions, please do not hesitate to contact me at 603.513.5334 or jennifer.frizzell@ppnne.org.

Respectfully Submitted,



Jennifer Frizzell
Vice President for Policy
Planned Parenthood of Northern New England

¹ 42 U.S.C. § 1396o(a)(2)(D), 1396o(b)(2)(D), 1396o-1(b)(3)(B)(vii); 42 C.F.R. §§ 447.53(b)(5), 447.56(a)(2)(ii).

² 42 U.S.C. §§ 1396o(a)(2)(B), 1396o(b)(2)(B), 1396o-1(b)(3)(B)(iii); 42 C.F.R. § 447.53(b)(2); 78 Fed. Reg. at 42311 (to be codified at 42 C.F.R. § 447.56(a)(1)(vii)).