

via electronic submission

June 28, 2019 Seema Verma Administrator Centers for Medicare and Medicaid Services U.S. Department of Health and Human Services 7500 Security Boulevard Baltimore, MD 21244

Re: North Dakota Section 1332 Waiver Comments

Dear Administrator Verma:

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on the North Dakota Insurance Department's Section 1332 waiver proposal. ACS CAN is making cancer a top priority for public officials and candidates at the federal, state and local levels. ACS CAN empowers advocates across the country to make their voices heard and influence evidence-based public policy change as well as legislative and regulatory solutions that will reduce the cancer burden. As the American Cancer Society's nonprofit, nonpartisan advocacy affiliate, ACS CAN is critical to the fight for a world without cancer.

ACS CAN supports a robust marketplace from which consumers can choose a health plan that best meets their needs. Access to health care coverage is paramount for persons with cancer and survivors. Research from the American Cancer Society has shown that uninsured Americans are less likely to get screened for cancer and thus are more likely to have their cancer diagnosed at an advanced stage when survival is less likely and the cost of care more expensive.¹ In the United States, more than 1.7 million Americans will be diagnosed with cancer this year – an estimated 3,940 in North Dakota.² An additional 15.5 million Americans are living with a history of cancer – 35,390 in North Dakota.³ For these Americans access to affordable health insurance is a matter of life or death.

ACS CAN supports North Dakota's proposed reinsurance program. A well-designed reinsurance program can help to lower premiums and mitigate the plan risk associated with high-cost enrollees. We note that the Department expects the reinsurance program will reduce

¹ E Ward et al, "Association of Insurance with Cancer Care Utilization and Outcomes, *CA: A Cancer Journal for Clinicians* 58:1 (Jan./Feb. 2008), <u>http://www.cancer.org/cancer/news/report-links-health-insurance-status-with-cancer-care</u>.

² American Cancer Society. Cancer Facts & Figures: 2019. Atlanta: American Cancer Society, 2019.

³ American Cancer Society. Cancer Treatment & Survivorship: Facts & Figures 2016-2017. Atlanta: American Cancer Society, 2016.

premiums by 20 percent in plan year 2020.⁴ These savings could reduce federal government subsidy payments, and lower premiums for consumers who enroll in coverage through the exchange but are not eligible for subsidies.

The Department notes that in 2018, only one issuer offered plans in all counties in the state.⁵ A reinsurance program may encourage insurance carriers to enter the market. A reinsurance program may also encourage plans already in the market to continue offering plans through the exchange. Further, the expected maintenance or increase in plan competition due to the reinsurance program may help to keep premiums from rising. These premium savings could help cancer patients and survivors afford health insurance coverage and may enable some individuals to enroll who previously could not afford coverage. The Department estimates that enrollment in the individual market will increase 1 percent because of the reinsurance program.⁶

We are pleased that the proposal states the waiver would not adversely affect the comprehensiveness of enrollees' benefits or increase their cost-sharing. ACS CAN believes that patient protections in current law – like the prohibition on pre-existing condition exclusions, prohibition on lifetime and annual limits, and Essential Health Benefits requirements – are crucial to making the healthcare system work for cancer patients and survivors.

Conclusion

On behalf of the American Cancer Society Cancer Action Network, we thank you for the opportunity to comment on the proposed section 1332 waiver, which we believe will provide long-term viability of the individual market while not eroding important consumer protections. If you have any questions, please feel free to contact Jennifer Singleterry, Senior Policy Analyst at Jennifer.Singleterry@cancer.org or 202-585-3233.

Sincerely,

Jurstu Mh

Kirsten Sloan Vice President, Public Policy American Cancer Society Cancer Action Network

⁴ North Dakota Insurance Department. NORTH DAKOTA 1332 WAIVER APPLICATION. May 10, 2019. <u>https://www.nd.gov/ndins/sites/www/files/documents/Health%20Care%20Reform/Final%20North%20Dakota%20</u> <u>1332%20Waiver%20Application.pdf</u>.

⁵ Ibid.

⁶ Ibid.