

American Cancer Society Cancer Action Network 555 11th Street, NW Suite 300 Washington, DC 20004 202.661.5700 www.acscan.org

December 1, 2017

Eric D. Hargan Acting Secretary Department of Health and Human Services Hubert H. Humphrey Building 200 Independence Avenue, SW Washington, D.C. 20201

Re: New Hampshire Health Protection Program Section 1115 Demonstration Amendment

Dear Acting Secretary Hargan,

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on New Hampshire's 1115 demonstration waiver amendment application. ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. As the nation's leading advocate for public policies that are helping to defeat cancer, ACS CAN ensures that cancer patients, survivors, and their families have a voice in public policy matters at all levels of government.

Over 8,600 residents of New Hampshire are expected to be diagnosed with cancer this year¹ – many of whom rely on the New Hampshire Health Protection Program (NHHPP) for their health care coverage. It is imperative that low-income cancer patients and survivors in New Hampshire have adequate access and coverage under the NHHPP, and that specific requirements do not create barriers to care for low-income cancer patients, survivors, and those who will be diagnosed with cancer during their lifetime. We are concerned that the waiver's proposed work requirement as a condition of eligibility for NHHPP enrollees could adversely impact the most vulnerable New Hampshire residents enrolled in the program, particularly low-income cancer patients and survivors.

The requirement that all able-bodied NHHPP enrollees be engaged in 20 to 30 hours of work, education, and job training as a condition of eligibility could severely limit eligibility and access to care for lowincome New Hampshire residents managing complex chronic conditions, including cancer patients, recent survivors, and those women diagnosed with cancer through the state's *Let No Woman Be Overlooked* program. While we understand the intent of the proposal is to further encourage employment, many cancer patients in active treatment are often unable to work for periods of time or

¹ American Cancer Society. *Cancer Facts & Figures 2017*. Atlanta, GA: American Cancer Society; 2017.

American Cancer Society Cancer Action Network Comments on New Hampshire Health Protection Program December 1, 2017 Page 2

require significant work modifications due to their treatment.^{2,3,4} Research suggests that between 40 and 85 percent of cancer patients stop working while receiving cancer treatment, with absences from work ranging from 45 days to six months depending on the treatment.⁵ If this requirement is included as a condition of eligibility for coverage, many cancer patients could find they are ineligible for the lifesaving cancer treatment services provided through NHHPP.

The proposal's graduated hours of employment, based on the length of an enrollee's enrollment in NHHPP, disregards the complex nature of many chronic conditions and the toll these diseases have on individuals, such as cancer patients and survivors. Increasing the number of hours that an individual must be engaged in work, education, and/or training based on the cumulative length of their eligibility is arbitrary and will likely result in the most vulnerable NHHPP enrollees facing coverage disruptions that could adversely impact their management of complex conditions, like cancer.

We appreciate the State of New Hampshire's acknowledgement that not all people are able to work and its decision to include several exemption categories from the work requirement. However, we are concerned that the waiver does not go far enough to protect vulnerable individuals. We note that the State neglected to exclude those enrollees who gained eligibility for NHHPP through the *Let No Woman Be Overlooked* program from the work requirement, and cancer patients and recent survivors do not appear to be included under the exemption categories. If the Centers for Medicare and Medicaid Services (CMS) approves this requirement as a condition of eligibility, we urge the agency to require the State to utilize the federal medically frail designation (42 CFR §440.315(f)) that would exempt individuals with serious, complex medical conditions from the proposed work requirement – particularly those with cancer and recent survivors and including women diagnosed through the *Let No Woman Be Overlooked* Program. With respect to cancer, the definition of medically frail should explicitly include individuals who are currently undergoing active cancer treatment –including chemotherapy, radiation, immunotherapy, and/or related surgical procedures – as well as new cancer survivors who may need additional time following treatment to transition back into the workplace.

Conclusion

We appreciate the opportunity to provide comments on the NHHPP draft waiver amendment. The preservation of eligibility and coverage through NHHPP remains critically important for many lowincome New Hampshire residents who depend on the program for cancer prevention, early detection, diagnostic, and treatment services. We ask CMS to weigh the impact this proposed policy change could have on NHHPP enrollees access to lifesaving health care coverage, particularly those individuals with cancer, cancer survivors, and those who will be diagnosed with cancer during their lifetime.

² Whitney RL, Bell JF, Reed SC, Lash R, Bold RJ, Kim KK, et al. Predictors of financial difficulties and work modifications among cancer survivors in the United States. *J Cancer Surviv.* 2016; 10:241. doi: 10.1007/s11764-015-0470-y.

³ de Boer AG, Taskila T, Tamminga SJ, et al. Interventions to enhance return to work for cancer patients. *Cochrane Database Syst Rev.* 2011; 16(2): CD007569. doi: 10.1002/14651858.CD007569.pub2.

⁴ Stergiou-Kita M, Pritlove C, van Eerd D, Holness LD, Kirsh B, Duncan A, Jones J. The provision of workplace accommodations following cancer: survivor, provider, and employer perspectives. *J Cancer Surviv*. 2016; 10:480. doi: 10.1007/s11764-015-0492-5.

⁵ Ramsey SD, Blough DK, Kirchhoff AC, et al. Washington State Cancer Patients Found to be at Greater Risk for Bankruptcy then People Without a Cancer Diagnosis. *Health Affairs*. 2013; 32(6): 1143-1152.

American Cancer Society Cancer Action Network Comments on New Hampshire Health Protection Program December 1, 2017 Page 3

Maintaining access to quality, affordable, accessible, and comprehensive health care coverage and services is a matter of life and survivorship for thousands of low-income cancer patients and survivors, and we look forward to working with the Administration to ensure that all Americans are positioned to win the fight against cancer. If you have any questions, please feel free to contact me or have your staff contact Michelle DelFavero of our policy team at Michelle.DelFavero@cancer.org or 202-585-3266.

Sincerely,

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Christopher W. Hansen President American Cancer Society Cancer Action Network