March 6, 2024



Chiquita Brooks-LaSure Administrator Centers for Medicare & Medicaid Services 200 Independence Avenue, SW Washington, DC 20201

## **Re: QUEST Integration Section 1115 Demonstration**

Dear Administrator Brooks-LaSure:

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on the Hawaii Department of Health and Human Service's request to renewits Section 1115 demonstration. 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 more determined than ever to end cancer as we know it, for everyone.

# ACS CAN supports this waiver request and urges the Centers for Medicare and Medicaid Services (CMS) to approve the following provisions:

### Providing Continuous Coverage to Children

Hawaii is newly requesting authority to provide continuous eligibility for children ages 0 to 6, and continuous 2-year eligibility from the time of first eligibility determination for children ages 6 to 19.

ACS CAN strongly supports this proposal. As the proposal notes, prior to the COVID-19-related continuous eligibility provisions, analysis of Hawaii's Medicaid and CHIP enrollment indicated that approximately one fourth of children who were disenrolled from Medicaid or CHIP re-enrolled within three months, indicating high levels of "churn" as a result of family income changes.<sup>1</sup> Providing continuous eligibility as proposed will minimize these disruptions for the indicated populations of children and remove administrative hasslefor the state.

It will also improve continuity of care for low-income cancer patients, survivors, and those who will be diagnosed with cancer. When individuals and families who do not have continuous eligibility lose coverage due to small – often temporary – fluctuations in income, it results in loss of access to health care coverage, making it difficult or impossible for those with cancer to continue treatment. For cancer patients who are mid-treatment, a loss of health care coverage could seriously jeopardize their chance of survival. Research also shows the detrimental impact of coverage gaps on Medicaid enrollees who have a history of cancer.

<sup>&</sup>lt;sup>1</sup> State of Hawaii, Department of Human Services, MED-QUEST Division. QUEST Integration Section 1115 Demonstration. Released for State Public Notice and Comment on October 16, 2023. <u>1115 Demonstration Application Public Comment FINAL 10132023.pdf</u> (hawaii.gov)

Individuals who had coverage disruptions in the previous year were less likely to report that they used preventive services, and more likely to report problems with care affordability and any cost-related medication nonadherence.<sup>2</sup> A 2020 systematic review of evidence found that among patients with cancer, those with Medicaid disruptions were statistically significantly more likely to have advanced stage and worse survival than patients without disruptions.<sup>3</sup>

Our country's recent experience with continuous Medicaid eligibility during the COVID -related public health emergency showed the value of this type of policy – both to individual Medicaid enrollees who used this critical safety net and did not have to fear coverage disruptions; and to the whole country by reducing the overall uninsured rate.<sup>4</sup> We urge CMS to approve this proposal.

#### Providing Pre-Release Services to Justice-Involved Individuals

Hawaii requests new authority to provide targeted services to eligible justice-involved populations 90 days pre-release from incarceration. Targeted services include care coordination as well as many medically necessary services like lab and radiology services and provision of prescription drugs.

ACS CAN supports this proposal. Research shows 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.<sup>5</sup> Cancer is the leading cause of mortality in incarcerated individuals older than 45 years and the fourth leading cause of mortality in the overall incarcerated population. Individuals who have been incarcerated are more than twice as likely to have a history of cancer than general populations.<sup>6</sup> ACS CAN supports taking steps like this one to prevent coverage gaps to help ensure all individuals have access to the care they need, including preventive services, cancer screenings and cancer treatment that can be lifesaving. We encourage CMS to approve this proposal.

<sup>4</sup> U.S. Census Bureau. Health Insurance Coverage Status and Type by Geography: 2019 and 2021. American Community Survey Briefs. September 2022. <u>Health Insurance Coverage Status and Type by Geography: 2019 and 2021 (census.gov)</u>

<sup>5</sup> Ward EM, Fedewa SA, Cokkinides V, Virgo K. The association of insurance and stage at diagnosis among patients aged 55 to 74 years in the national cancer database. Cancer J. 2010 Nov-Dec;16(6):614-21. doi: 10.1097/PPO.0b013e3181ff2aec. PMID: 21131794.
<sup>6</sup> Aziz H, Ackah RL, Whitson A, et al. Cancer Care in the Incarcerated Population: Barriers to Quality Care and Opportunities for Improvement. JAMA Surg. 2021;156(10):964–973. doi:10.1001/jamasurg.2021.3754.

<sup>&</sup>lt;sup>2</sup> Jingxuan Zhao, Xuesong Han, Leticia Nogueira, Zhiyuan Zheng, Ahmedin Jemal, K. Robin Yabroff; Health Insurance Coverage Disruptions and Access to Care and Affordability among Cancer Survivors in the United States. Cancer Epidemiol Biomarkers Prev 1 November 2020; 29 (11): 2134–2140. <u>https://doi.org/10.1158/1055-9965.EPI-20-0518</u>

<sup>&</sup>lt;sup>3</sup> K Robin Yabroff, PhD, Katherine Reeder-Hayes, MD, Jingxuan Zhao, MPH, Michael T Halpern, MD, PhD, Ana Maria Lopez, MD, Leon Bernal-Mizrachi, MD, Anderson B Collier, MD, Joan Neuner, MD, Jonathan Phillips, MPH, William Blackstock, MD, Manali Patel, MD, Health Insurance Coverage Disruptions and Cancer Care and Outcomes: Systematic Review of Published Research, JNCI: Journal of the National Cancer Institute, Volume 112, Issue 7, July 2020, Pages 671–687, <u>https://doi.org/10.1093/inci/djaa048</u>

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#### Conclusion

The goal of the Medicaid program is to provide health coverage and access to care for people who need it. These proposals meet this goal, and we support the Department's waiver renewal request because it will improve access to and continuity of care for people in Hawaii with cancer. If you have any questions, please feel free to contact Jennifer Hoque at jennifer.hoque@cancer.org.

Sincerely,

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Kirsten Sloan Managing Director, Public Policy American Cancer Society Cancer Action Network