



American Cancer Society
Cancer Action Network
www.fightcancer.org

August 31, 2022

The Honorable Xavier Becerra
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

**Re: Washington State Medicaid Transformation Project Section 1115 Demonstration Wavier
Renewal Request**

Dear Secretary Becerra:

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on the requested renewal of Washington's 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 critical to the fight for a world without cancer.

ACS CAN supports the Washington State Medicaid Transformation Project's goals of providing quality healthcare to members and ensuring access to care. We commend Washington's commitment to eliminating health disparities, maximizing coverage, and addressing the social determinants of health.

More than 42,620 Washington residents are expected to be diagnosed with cancer this year,¹ and there are more than 383,440 cancer survivors in the state² – many of whom rely on the Medicaid program. ACS CAN wants to ensure that enrollees have adequate access and coverage under the Medicaid program, and that specific requirements do not create barriers to care for cancer patients, survivors, and those who will be diagnosed with cancer.

Continuous Eligibility

ACS CAN wants to ensure that low-income cancer patients and survivors in Washington will have coverage under the Medicaid program. Establishing continuous eligibility for children under age 6 will allow more children to maintain access to quality coverage, increasing the number of Washingtonians who can access essential health care, including cancer prevention and treatment. Lapses in coverage can place a substantial financial burden on families and cause significant disruptions in care, particularly for individuals in active cancer treatment.

When individuals lose coverage due to small – often temporary – fluctuations in income (in this case, their parents' income), it could result in loss of access to health care coverage, making it difficult or impossible

¹ American Cancer Society. *Cancer Facts & Figures 2022*. Atlanta, GA: American Cancer Society; 2022.

² American Cancer Society. *American Cancer Society. Cancer Treatment & Survivorship Facts & Figures 2022-2024*. Atlanta: American Cancer Society; 2022.

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. The loss of coverage can be devastating to cancer patients and their families. *We urge CMS to approve this section of the waiver renewal request.*

Postpartum Coverage

ACS CAN supports the proposed expansion of Medicaid coverage to birthing parents in the postpartum period. 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.³

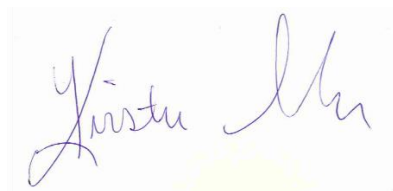
Unfortunately, some individuals are diagnosed with cancer during pregnancy – the most common malignancies being melanoma, breast and cervical cancer.⁴ Additionally, individuals who have had a full-term pregnancy have an increased risk of certain types of breast cancer in the postpartum period and beyond.⁵ Having Medicaid coverage continue into the postpartum period will help low-income birthing parents maintain access to and continuity of care. Additionally, many postpartum individuals need preventive services – like tobacco cessation treatments or the HPV vaccine – as well as cervical cancer screenings. *We urge CMS to approve this section of the waiver, adopting the 12-month postpartum coverage option as well as extending coverage to individuals who have been pregnant in the past year but were not enrolled in Medicaid during this time.*

Conclusion

We appreciate the opportunity to provide comments on the renewal request. The preservation of eligibility and coverage through the Medicaid program remains critically important for many low-income Washingtonians who depend on the program for cancer and chronic disease prevention, early detection, diagnostic, and treatment services. We commend the state’s commitment to maximizing coverage and addressing health disparities through investments in social supports and urge CMS to approve the request.

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 agency to ensure that all Medicaid enrollees are positioned to win the fight against cancer. If you have any questions, please feel free to contact Jennifer Hoque at jennifer.hoque@cancer.org or 202-839-3531.

Sincerely,



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

³ 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.

⁴ Andersson, T.M.-L., Johansson, A.L.V., Fredriksson, I. and Lambe, M. (2015), Cancer during pregnancy and the postpartum period: A population-based study. *Cancer*, 121: 2072-2077. <https://doi.org/10.1002/cncr.29325>.

⁵ American Cancer Society. *Breast Cancer Facts & Figures 2019-2020*. Atlanta: American Cancer Society, Inc. 2019.