



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

May 14, 2018

The Honorable Alex Azar
Secretary
Department of Health and Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, D.C. 20201

Re: Arizona Section 1115 Waiver Draft Proposal to Waive Prior Quarter Coverage

Dear Secretary Azar:

The American Cancer Society Cancer Action Network (ACS CAN) appreciates the opportunity to comment on Arizona's Draft Section 1115 Waiver Amendment Request to waive retroactive eligibility. 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 help 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.

Nearly 35,000 Arizonans are expected to be newly diagnosed with cancer this year¹ - many of whom are receiving health care coverage through the Arizona Health Care Cost Containment System (AHCCCS), the state's Medicaid program. We are concerned that the proposal to waive retroactive eligibility for new AHCCCS members could adversely impact the ability of low-income Arizonans – including many cancer patients and survivors – to access timely, appropriate, and affordable health care. We strongly urge the Centers for Medicare & Medicaid Services (CMS) to address the concerns we and other stakeholders have or reject this waiver in its current form.

Medicaid currently allows retroactive coverage if: 1) an individual was unaware of his or her eligibility for coverage at the time a service was delivered; or 2) during the period prospective enrollees were preparing the required documentation and Medicaid enrollment application. Policies that would reduce or eliminate retroactive eligibility could place a substantial financial burden on enrollees and cause significant disruptions in care, particularly for individuals battling cancer.

¹ American Cancer Society. Cancer Facts & Figures: 2018. Atlanta: American Cancer Society, 2018.

Further, many uninsured or underinsured individuals who are newly diagnosed with a chronic condition do not receive recommended services and follow-up care because of cost.^{2,3} In 2016, one in five uninsured adults went without care because of cost.⁴ Waiving retroactive eligibility could delay necessary care in low-income populations, negatively impact patients with complex medical conditions that require frequent follow-up and maintenance visits to help control their disease process, and result in unnecessary costs.

We are pleased to see that the state intends to increase efforts to educate and encourage Arizonans to apply for AHCCCS coverage. However, we remain concerned that even with education, some Arizonans eligible for AHCCCS may not realize or be properly informed that they are eligible and could be stuck with large medical bills they are unable to pay, pushing them further into poverty.

Safety net hospitals and providers also rely on retroactive eligibility for reimbursement of provided services, allowing these facilities to keep the doors open. For example, the Emergency Medical Treatment and Labor Act (EMTALA) requires emergency departments (ED) to stabilize and treat individuals in their emergency room, regardless of their insurance status or ability to pay.⁵ Retroactive eligibility allows hospitals to be reimbursed if the individual treated is eligible for AHCCCS coverage. Likewise, Federally Qualified Health Centers (FQHCs) offer services to all persons, regardless of that person's ability to pay or insurance status.⁶ Community health centers also play a large role in ensuring low-income individuals receive cancer screenings, helping to save the state of Arizona from the high costs of later stage cancer diagnosis and treatment. Therefore, we urge the Administration to consider these providers and their contribution to Arizona's safety net, as well as the patients who rely on AHCCCS for health care coverage, when deciding whether to allow the state of Arizona to waive retroactive eligibility in AHCCCS.

Conclusion

We appreciate the opportunity to provide comments on Arizona's draft demonstration waiver amendment. The preservation of eligibility and coverage through AHCCCS remains critically important for many low-income Arizonans who depend on the program for cancer prevention, early detection, diagnostic, and treatment services. Upon further consideration of the policy to waive retroactive eligibility, we ask CMS to weigh the impact this policy may have on access to lifesaving

² Hadley J. Insurance coverage, medical care use, and short-term health changes following an unintentional injury or the onset of a chronic condition. *JAMA*. 2007; 297(10): 1073-84.

³ Foutz J, Damico A, Squires E, Garfield R. The uninsured: A primer – Key facts about health insurance and the uninsured under the Affordable Care Act. *The Henry J Kaiser Family Foundation*. Published December 14, 2017. Accessed April 2018. <https://www.kff.org/report-section/the-uninsured-a-primer-key-facts-about-health-insurance-and-the-uninsured-under-the-affordable-care-act-how-does-lack-of-insurance-affect-access-to-health-care/>.

⁴ The Henry J. Kaiser Family Foundation. Key facts about the uninsured population. Updated November 29, 2017. Accessed April 2018. <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>.

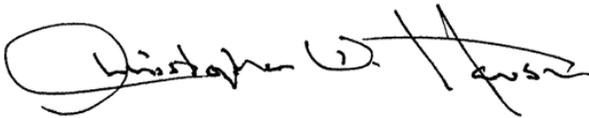
⁵ Centers for Medicare & Medicaid Services. Emergency medical treatment & labor act (EMTALA). Updated March 2012. Accessed February 2018. <https://www.cms.gov/regulations-and-guidance/legislation/emtala/>.

⁶ National Association of Community Health Centers. Maine health center fact sheet. Published March 2017. Accessed April 2018. http://www.nachc.org/wp-content/uploads/2016/03/ME_17.pdf.

health care coverage, particularly for those individuals with cancer, cancer survivors, and those who will be diagnosed with cancer during their lifetime.

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,

A handwritten signature in black ink, appearing to read "Christopher W. Hansen". The signature is fluid and cursive, with a large initial "C" and a distinct "H".

Christopher W. Hansen
President