



October 1, 2018

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

The Honorable Seema Verma
 Administrator, Centers for Medicare and Medicaid Services
 U.S. Department of Health and Human Services
 P.O. Box 8010
 Baltimore, MD 21244 - 8010

Re: Maine’s Medicaid Expansion

Dear Secretary Azar and Administrator Verma:

The undersigned organizations represent millions of individuals facing serious, acute and chronic health conditions across the country. Our organizations have a unique perspective on what individuals need to prevent disease, cure illness, and manage chronic health conditions. The diversity of our groups, and the patients and consumers we represent, enables us to draw upon a wealth of knowledge and expertise as well as serve as an invaluable resource regarding any decisions affecting the Medicaid program and the people that it serves. We urge the Department of Health and Human Services (HHS) to make the best use of the recommendations, knowledge, and experience our organizations offer in the following comments.

Our organizations strongly urge HHS to quickly approve Maine’s State Plan Amendment (SPA) to expand its state Medicaid program to 138 percent of the federal poverty level (FPL). With the approval of the SPA, an additional 70,000 Mainers would have access to quality and affordable healthcare.

In November of 2017, Maine residents voted to expand the state’s Medicaid program to 138 percent of the federal poverty level or \$28,180 for a family of three. This coverage would provide access to cancer and diabetes screenings, immunizations, and other preventive services.ⁱ For example, in Kentucky, Medicaid expansion has been associated with more early diagnosis of breast cancer and some improvement in the quality of care.ⁱⁱ Another study found an association between Medicaid expansion and early stage cancer diagnosis, when the chance of survival is higher.ⁱⁱⁱ

Medicaid expansion not only improves the health of residents but also improves their financial well-being. For example, a study found a decrease in self-pay patients in California, an expansion state, compared to Florida, a non-expansion state.^{iv} There was not a shift in utilization associated with this change. In Ohio, Medicaid expansion enrollees reported that they were able to get treatment for previously untreated health conditions, which made finding work easier.^v Approximately 75 percent of the Ohio Medicaid expansion enrollees who are family caregivers reported that Medicaid made it easier for them to care for their family members.

Medicaid expansion enrollees are less likely to have medical debt than their non-enrolled counterparts.^{vi} States that expanded Medicaid experienced a significant reduction in uninsured hospitalizations for major cardiovascular events than non-expansion states.^{vii} Additionally, Medicaid expansion has helped state economics and has been associated with a reduced risk of hospital closures, especially in rural areas.^{viii}

Our organizations are optimistic that Maine’s low-income residents and hospitals would see similar results if the SPA is approved and the expansion is implemented. Governor LePage took the first step by submitting the SPA, but the voters’ decision will not be fully recognized until the expansion is implemented. Unfortunately, Governor LePage’s administration has delayed submitting the appropriate paperwork. The ballot initiative that was put in front of the voters required that people become eligible within 180 days of the Act taking effect, which was July 2, 2018. Our organizations ask that the SPA be approved, and that eligible individuals have retroactive eligibility dating back to July 2, 2018.

Thank you for the opportunity to provide this additional information. We strongly urge you to approve the SPA to expand the Medicaid program in Maine so that 70,000 low-income residents can obtain quality and affordable healthcare coverage.

Sincerely,

American Cancer Society Cancer Action
Network
American Diabetes Association
American Heart Association
American Lung Association
Cystic Fibrosis Foundation
Epilepsy Foundation
Global Healthy Living
Hemophilia Federation of America

Leukemia & Lymphoma Society
Lutheran Services in America
March of Dimes
National Alliance on Mental Illness
National Hemophilia Foundation
National Multiple Sclerosis Society
National Organization for Rare Disorders
National Patient Advocate Foundation
National Psoriasis Foundation

ⁱ Kaufman H., Chen Z., Fonseca V. and McPhaul M., "Surge in Newly Identified Diabetes Among Medicaid Patients in 2014 Within Medicaid Expansion States Under the Affordable Care Act," *Diabetes Care*, March 2015, <http://care.diabetesjournals.org/content/early/2015/03/19/dc14-2334.full.pdf+html>

ⁱⁱ Nicolas Ajkay et al, "Early Impact of Medicaid Expansion and Quality of Breast Cancer Care in Kentucky," *Journal of the American College of Surgeons*, epub ahead of print, February 2018, <https://www.sciencedirect.com/science/article/pii/S107275151830022X>.

ⁱⁱⁱ Aparna Soni, Kosali Simon, John Cawley, and Lindsay Sabik, "Effect of Medicaid Expansions of 2014 on Overall and Early-Stage Cancer Diagnoses," *American Journal of Public Health* epub ahead of print (December 2017), <http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2017.304166>.

^{iv} Barakat MT, Mithal A, Huang RJ, Mithal A, Sehgal A, Banerjee S, et al. (2017) Affordable Care Act and healthcare delivery: A comparison of California and Florida hospitals and emergency departments. *PLoS ONE* 12(8): e0182346. <https://doi.org/10.1371/journal.pone.0182346>.

^v The Ohio Department of Medicaid. 2018 Ohio Medicaid Group VII Assessment: Follow-Up to the 2016 Ohio Medicaid Group VIII Assessment. August 2018. Accessed at: <http://medicaid.ohio.gov/Portals/0/Resources/Reports/Annual/Group-VIII-Final-Report.pdf>.

^{vi} Ibid.

^{vii} Akhabue E, Pool LR, Yancy CW, Greenland P, Lloyd-Jones D. Association of State Medicaid Expansion With Rate of Uninsured Hospitalizations for Major Cardiovascular Events, 2009-2014. *JAMA Network Open*. 2018;1(4):e181296. doi:10.1001/jamanetworkopen.2018.1296

^{viii} Richard Lindrooth, Marcelo Perrailon, Rose Hardy, and Gregory Tung, "Understanding the Relationship Between Medicaid Expansions and Hospital Closures," *Health Affairs* epub ahead of print (January 2018), <https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.2017.0976>.