



July 9, 2024

Michele Eberle
Executive Director
Maryland Health Benefit Exchange
750 East Pratt St., 6th floor
Baltimore, MD 21202

Re: Maryland Section 1332 State Innovation Waiver Amendment Request

Dear Director Eberle:

Thank you for the opportunity to provide feedback on Maryland's Waiver Amendment Request.

The undersigned organizations represent millions of individuals facing serious, acute and chronic health conditions. We have a unique perspective on what individuals and families need to prevent disease, cure illness and manage chronic health conditions. The diversity of our organizations and the populations we serve enable us to draw upon a wealth of knowledge and expertise that is an invaluable resource regarding any decisions affecting the Affordable Care Act, the marketplace, and the people that they serve. We urge the state to make the best use of the recommendations, knowledge and experience our organizations offer here.

Our organizations are committed to ensuring that Maryland's healthcare programs provide quality and affordable healthcare coverage. We believe that Maryland's proposal to use a Section 1332 waiver to allow all Marylanders, regardless of immigration status, to enroll in marketplace coverage will advance these objectives. Once implemented, this waiver amendment is expected to provide access to comprehensive marketplace coverage to thousands of Marylanders while satisfying the federal guardrail protections governing waivers.

Our organizations support Maryland's efforts to improve health equity by making affordable coverage available to all Marylanders, regardless of immigration status. Waiving Section 1312(f)(3) of the Affordable Care Act will make it easier for more Marylanders to access the care they need. This will enable more families with mixed immigration status to enroll in coverage together, and for uninsured individuals with no other options for health coverage to enroll in coverage as well. Those who enroll in coverage due to this amendment will also have access to other benefits available through the marketplace, including language interpretation services.

At the same time, the state represents that the waiver will not affect comprehensiveness of benefits or costs for existing marketplace enrollees, satisfying federal statutory guardrails. We appreciate the commitment to preserving affordability and access to comprehensive coverage for the more than 200,000 current enrollees of the program.

While Maryland anticipates that this amendment will gradually increase enrollment, the cost of marketplace plans may still be a barrier to accessing coverage for this population. Our organizations urge Maryland to establish a state subsidy program for the population that this amendment would impact. Research consistently shows that higher cost-sharing is associated with decreased use of preventive services and medical care among low-income populations.¹ A subsidy program would improve affordability of care and drive coverage enrollment in Maryland, while also bolstering health equity. Nationally, 18% of lawfully present immigrants and half of undocumented immigrants report being uninsured, compared to 8% of US-born citizens, and this population is also more likely to report facing coverage barriers and skipping care.² By expanding financial assistance for marketplace plans, the state can raise enrollment among underserved populations, improving health equity and reducing disparities in Maryland.

Our organizations support this proposal to expand access to quality coverage in Maryland and encourage the state to consider implementing a subsidy program that would improve affordability of coverage. Thank you for the opportunity to provide comments.

Sincerely,

American Lung Association
Child Neurology Foundation
Hemophilia Federation of America
National Organization for Rare Disorders
National Patient Advocate Foundation
The AIDS Institute
The Leukemia & Lymphoma Society

¹Artiga, Samantha et al. The Effects of Premiums and Cost Sharing on Low-Income Populations: Updated Review of Research Findings. KFF. June 1, 2017. Available at: <https://www.kff.org/medicaid/issue-brief/the-effects-of-premiums-and-cost-sharing-on-low-income-populations-updated-review-of-research-findings/>.

² Key Facts on Health Coverage of Immigrants. KFF. September 1, 2023. Available at: <https://www.kff.org/racial-equity-and-health-policy/fact-sheet/key-facts-on-health-coverage-of-immigrants/>.