

























September 25, 2024

The Honorable Janet Yellen Secretary Department of the Treasury 1500 Pennsylvania Avenue, NW Washington, DC 20220

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

Re: Nevada Section 1332 Innovation Waiver Request

Dear Secretary Yellen and Secretary Becerra:

Thank you for the opportunity to provide feedback on Nevada's Section 1332 Innovation Waiver 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 and the people that it serves. We urge the Department of the Treasury and the Department of Health and Human Services (the Departments) to make the best use of the recommendations, knowledge and experience our organizations offer here.

Nevada's waiver application seeks some pass-through funding to provide targeted premium subsidies to marketplace enrollees who would otherwise face higher premiums due to other features of the proposed waiver. The waiver further intends to use these funds to support an individual market reinsurance program. Our organizations support these proposed. Reinsurance does not make coverage cheaper for people — generally at lower incomes — who already qualify for federal subsidies. For this reason, our organizations are pleased to see that the state will be addressing marketplace affordability

with targeted premium subsidies, though we urge the Departments to work with the state to continue to address affordability for all enrollees. Additionally, as this waiver's programs are implemented, it is important that the state continues to affirm its commitment to safeguarding access to care for low-income residents and reducing health disparities.

Our organizations support the state's commitment to improving awareness and take-up of Battle Born State Plans (BBSPs) through improved marketing and outreach, emphasis on active shopping, and more thoughtfulness regarding plan display. These strategies are all likely to help consumers make more informed enrollment decisions and to meaningfully increase take-up in a manner that produces modestly lower net premiums for marketplace enrollees.

Finally, our organizations support the state's guaranteed pass-through funding for the carrier and provider incentive programs. We note, for example, that the state has signaled it will use these policy levers to ensure BBSP plans have adequate networks and to promote continuity of care. Uninterrupted access to a robust network of providers is essential for the patients we represent to get the primary and specialty care that they need to manage their health conditions. If well designed, the BBSP contracting process and these programs could help to increase access to providers. The state's application also emphasizes that it will use these initiatives to improve health equity, including for rural and historically marginalized communities. It is critical for the state to follow through with and expand upon these commitments. Our organizations encourage the Departments to work with the state to do this, and to ensure that the policy tools necessary to realize these gains are sufficiently funded.

Our organizations urge the Departments to work with the state to ensure that affordable and equitable access to care for all marketplace enrollees continues to be prioritized if this waiver is approved.

Thank you for the opportunity to provide comments.

Sincerely,

American Lung Association
Asthma and Allergy Foundation of America
CancerCare
Epilepsy Foundation
Hemophilia Federation of America
Lupus Foundation of America
National Bleeding Disorders Foundation
National Multiple Sclerosis Society
National Organization for Rare Disorders
National Patient Advocate Foundation
The Leukemia & Lymphoma Society
WomenHeart

<sup>&</sup>lt;sup>1</sup> This is because of how ACA premium tax credits are calculated. In practice, from a consumer standpoint, reinsurance functions as a premium subsidy for people who are otherwise unsubsidized: in general, it lowers

premiums for those who earn too much to qualify for a federal premium tax credit but does not improve affordability for those who, because they are at lower incomes, receive the premium tax credit.