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August 10, 2017

The Honorable Tom Price, Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, S.W. Washington, DC 20201

Dear Secretary Price:

The American Lung Association appreciates the opportunity to comment on the Arkansas Works 1115 Demonstration Waiver amendment.

Arkansas Works provides a vital service to the poorest residents of Arkansas. Individuals and families depend on Arkansas Works for live-saving treatments. The Lung Association agrees with the goals of the waiver amendment: "increase the overall coverage of low-income populations in the state, improve health outcome for Medicaid and other low-income populations in the state, and increase access to, stabilize and strengthen the availability of providers and provider networks to serve Medicaid and low-income individuals in the state." However, the proposed waiver amendment would not achieve the stated goals and would harm patients, including lung disease patients.

The American Lung Association believes all Arkansans must have affordable, quality healthcare, especially low-income residents that depend on Arkansas Works. We encourage you to work with the state to develop a proposal that focuses on patients.

Income Eligibility

Reducing the income eligibility from 138 percent of the federal poverty level (FPL) to 100 percent FPL will harm both Arkansans and the Arkansas Works Program.

Reducing the income eligibility from 138 percent of FPL to 100 percent of FPL will result in the loss of health coverage for many low-income people in Arkansas. According to CMS, Arkansas has enrolled over 278,000 newly eligible individuals into the Medicaid expansion program. These patients were likely uninsured prior to the expansion and will return to that status if the income threshold is reduced. Between 2014 and 2015, when the state expanded Medicaid, the uninsured rate dropped fell from 19 percent to 11 percent. For lung disease patients in this group, losing health coverage could have deadly consequences.

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Lung disease patients need regular healthcare to breathe and live. Patients with asthma need daily maintenance medications to control their symptoms and reduce inflammation in the airways. Without proper treatment, these patients will have asthma attacks and seek treatment in the emergency department, which drives up premiums for those on private insurance. Lung cancer screenings for individuals at high risk, currently something that is covered for this Medicaid Expansion population, can catch this dreadful disease early and at a stage where it can be treated. Without health coverage, individuals at high risk will likely forgo this important screening, not catching diseases until it is too late for them to be successfully treated.

The Arkansas Works program is an innovative program that has allowed low-income residents to have healthcare through the existing private insurance infrastructure. This policy proposal - reducing the income eligibility for the Arkansas Works program - will result in the loss of funding as the program will no longer qualify for the enhanced FMAP that the newly eligible population receives. Without the enhanced FMAP, the entire program could be threatened. The Lung Association strongly encourages CMS to reject this proposal.

Removal of Non-Emergency Transportation Benefits

The proposed waiver would remove the non-emergency transportation benefit from Arkansas Works enrollees. This change will negatively impact lung disease patients enrolled in Arkansas Works. Non-emergency transportation benefits help patients get to appointments and get the treatments they need.

Lung disease patients often need frequent treatment and appointments with their doctors to maintain a normal life. Lung cancer patients need to get to chemotherapy infusions or radiation treatments. Patients with asthma need to keep regular doctor's appointments to ensure they are on the most appropriate treatment to control the symptoms of the diseases and COPD patients need to go to pulmonary rehabilitation appointments.

Non-emergency transportation benefits allow patients to get to their appointments- keeping them healthy and preventing more expensive disease in the future. The non-emergency transportation benefit helps ensure that appropriate treatment is received at the right time for the best health outcomes for Arkansans. Without this benefit, a patient may have to choose to use a bus fare for work or to their appointment, or forgo their regular appointments.

The American Lung Association urges CMS to deny the waiver amendment proposal. The Arkansas residents on Arkansas Works are disproportionately impacted by lung disease and need quality and affordable healthcare to manage their diseases. The proposed waiver amendment as written would not allow for that. Thank you for reviewing our comments. We appreciate the opportunity to provide feedback.

Sincerely,



Harold Wimmer, President and CEO
American Lung Association

