



July 24, 2024

The Honorable Xavier Becerra
Secretary
U.S. Department of Health and Human Services
200 Independence Ave, SW
Washington, DC 20201

Re: New York Medicaid Redesign Team Waiver

Dear Secretary Becerra:

Thank you for the opportunity to submit comments on the New York Medicaid Redesign Team Continuous Eligibility Waiver.

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 Medicaid program and the people that it serves. We urge the Centers for Medicare and Medicaid Services (CMS) to make the best use of the recommendations, knowledge and experience our organizations offer here.

Our organizations are committed to ensuring that New York's Medicaid program provides quality and affordable healthcare coverage. We support multi-year continuous eligibility for children as a way to improve equitable access to care in New York. We urge CMS to approve this proposal and offer the following comments on New York's Continuous Eligibility Waiver Amendment:

Our organizations support New York's proposal to provide multi-year continuous coverage for children under six. Continuous eligibility protects patients and families from gaps in care and promotes health equity.¹ The state estimates that about 66,000 children will benefit from this proposal each year.² Research has shown that individuals with disruptions in coverage during a year are more likely to delay

care, receive less preventive care, refill prescriptions less often, and have more emergency department visits.³ Gaps in Medicaid coverage have also been shown to increase hospitalizations and negative health outcomes for ambulatory care-sensitive conditions like respiratory diseases and heart disease.⁴ Furthermore, studies show that children of color are more likely to be affected by gaps in coverage that continuous eligibility would address, rendering it crucial for increasing equitable access to care.⁵ Overall, multi-year continuous coverage would improve access to and continuity of care for children during the critical early years of life⁶ while promoting health equity.

Given the importance of this policy, our organizations urge CMS to work with the state to explore furthering its goals of expanding access to children in New York by providing two-year continuous eligibility to children ages 6 to 18, ensuring that all children have this protection. Additionally, we urge CMS to encourage the state to provide additional data on changes to utilization of care, particularly well-child visits, for children in the demonstration population to help evaluate the effectiveness of this policy.

Our organizations support continuous eligibility as a method to improve equitable access to consistent, quality healthcare in New York and we urge CMS to approve this proposal.

Thank you for the opportunity to provide comments.

Sincerely,

American Heart Association
American Lung Association
Child Neurology Foundation
Hemophilia Federation of America
Lupus Foundation of America
National Bleeding Disorders Foundation
National Organization for Rare Disorders
National Patient Advocate Foundation
National Psoriasis Foundation
The Leukemia & Lymphoma Society

¹ Chomilo, Nathan. Building Racial Equity into the Walls of Minnesota Medicaid. Minnesota Department of Human Services. February 2022. Available at: <https://edocs.dhs.state.mn.us/lfserver/Public/DHS-8209A-ENG>

² New York State Medicaid Redesign Team Waiver. Continuous Eligibility Waiver Amendment. June 10, 2024. Available at: <https://www.medicaid.gov/medicaid/section-1115-demonstrations/downloads/ny-medicaid-rdsgn-team-pa-06262024.pdf>

³ Sugar S, Peters C, De Lew N, Sommers BD. Medicaid Churning and Continuity of Care: Evidence and Policy Considerations Before and After the Covid-19 Pandemic. Assistant Secretary for Planning and Evaluation, Office of Healthy Policy. April 12, 2021. Available at: <https://aspe.hhs.gov/sites/default/files/private/pdf/265366/medicaid-churning-ib.pdf>

⁴ "Effects of Churn on Potentially Preventable Hospital Use." Medicaid and CHIP Payment Access Commission. July 2022. Available at: https://www.macpac.gov/wp-content/uploads/2022/07/Effects-of-churn-on-hospital-use_issue-brief.pdf

⁵ Osorio, Aubrianna. Alker, Joan, “Gaps in Coverage: A Look at Child Health Insurance Trends”, Center for Children & Families (CCF) of the Georgetown University Health Policy Institute, November 21, 2021. Available at: <https://ccf.georgetown.edu/2021/11/22/gaps-in-coverage-a-look-at-child-health-insurance-trends/>

⁶ Burak, Elisabeth Wright. “Promoting Young Children’s Healthy Development in Medicaid and the Children’s Health Insurance Program (CHIP).” Center for Children and Families, Georgetown University Health Policy Institute. October 2018. Available at: <https://ccf.georgetown.edu/wp-content/uploads/2018/10/Promoting-Healthy-Development-v5-1.pdf>