April 23, 2018

Ms. Seema Verma  
Administrator  
Centers for Medicare and Medicaid Services  
Department of Health and Human Services  
P.O. Box 8011  
Baltimore, MD 21244-1850

Submitted via: regulations.gov

Re: [CMS-9924-P] Short-Term, Limited-Duration Insurance

Dear Administrator Verma,

On behalf of the millions of Americans living with chronic, disabling, and life-threatening medical conditions, the undersigned patient and provider organizations have joined together as the Coalition for Accessible Treatments (CAT) to advocate for policies addressing one of the greatest obstacles standing between patients and the treatments they need: high out-of-pocket costs. We write you today regarding the Short-Term, Limited-Duration Insurance (STLDI) proposed rule.

Our coalition believes that health policy proposals should promote and protect access to adequate and affordable health insurance. We are concerned that if STLDI plans move forward as outlined in the proposed rule, the essential health benefits (EHBs) that are vital to individuals living with chronic diseases such as prescription medicines could be reduced or restricted to the detriment of patients. Offering these plans for the proposed extended period of 12 months with the option to renew makes them too closely resemble major medical plans that must be Patient Protection and Affordable Care Act (PPACA)-compliant. Therefore, we are concerned that individuals enrolling in these plans may easily confuse them with PPACA-compliant plans and may not end up with the coverage they need most. We recognize that extending coverage from 3 months up to 12 months may provide some individuals with more gap coverage than previously available, but we do not believe this coverage would provide benefits that most chronic disease patients need nor would they help to lower out-of-pocket costs for these patients.

The agencies have also similarly stated their concern that short-term, limited-duration insurance policies that provide coverage lasting almost 12 months may be more difficult for some individuals to distinguish from PPACA-compliant coverage, which is typically offered on a 12-month basis. Therefore, if this rule is finalized, at minimum we urge the agencies to change the 14-point type notice to consumers to include a notice that “this plan may not cover any of the below,” and include a list of PPACA required essential health benefits to alleviate confusion.

In addition, we note that the proposed rule mentions these policies could result in high out-of-pocket costs for individuals who are enrolled in them since they offer little coverage protection. As the
proposed rule states, “Depending on plan design, consumers who purchase short-term, limited-duration insurance policies and then develop chronic conditions could face financial hardship as a result.” According to the most recently available data, about half of all adults in the United States had one or more chronic conditions. If a patient finds himself or herself with a diagnosis of a chronic disease while enrolled in a STLDI plan, appropriate care and treatment would be extremely costly and difficult to obtain.

Even with the essential health benefit requirements of PPACA-compliant plans, there are still too many Americans who leave their prescriptions at the pharmacy counter due to cost—even in the face of disability or death. Our coalition would like to work with you and your colleagues to help develop policies that continue to protect patients with chronic or life-threatening conditions attain access to the treatments they need.

We urge you to work with us and our colleagues in the patient and provider communities to ensure that no patient is left without the ability to get the treatment that can improve or save their lives. Please contact Kayla L. Amodeo, Ph.D., Co-Chair, CAT Coalition, at kamodeo@rheumatology.org or (202) 210-1797 if you have questions or if we can be of assistance.

Sincerely,

Alpha-1 Foundation
American Autoimmune Related Diseases Association
American College of Rheumatology
Arthritis Foundation
Colorectal Cancer Alliance
Crohn’s & Colitis Foundation
Dystonia Advocacy Network
Dystonia Medical Research Foundation
GBS|CIDP Foundation International
Hemophilia Federation of America
Immune Deficiency Foundation
Lupus and Allied Diseases Association
Lupus Foundation of America
National Psoriasis Foundation
Pulmonary Hypertension Association
Sjogren’s Syndrome Foundation
Susan G. Komen
The US Hereditary Angioedema Association

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