



July 27, 2021

Chiquita Brooks-LaSure
Centers for Medicare & Medicaid Services
Department of Health and Human Services
7500 Security Boulevard
Baltimore, MD 21244

Submitted via www.regulations.gov

Re: Patient Protection and Affordable Care Act; Updating Payment Parameters, Section 1332 Waiver Implementing Regulations, and Improving Health Insurance Markets for 2022 and Beyond Proposed Rule (CMS-9906-P)

Dear Administrator Brooks-LaSure:

The Alliance of Community Health Plans (ACHP) appreciates the opportunity to submit comments in response to the proposed Updated Payment Parameters, Section 1332 Waiver Implementing Regulations and Improving Health Insurance Markets for 2022 and Beyond.

ACHP represents the nation's top-performing non-profit health plans improving affordability and outcomes in the health care system. ACHP member companies are provider-aligned health organizations that provide high-quality coverage and care to more than 24 million Americans across 36 states and D.C. They are leading the industry in practical, proven reforms around primary care delivery, value-based payment and data driven systems improvement. In 2021, three ACHP member organizations entered the Marketplace increasing consumer choice of high-quality, affordable health coverage.

ACHP is committed to a highly functioning and stable individual and small group market, expanding consumer access to high quality, affordable health care. Consumers deserve a robust market with fierce competition and broad choice. ACHP offers recommendations to ensure consumers are informed on the coverage and care options available to them. ACHP values the opportunity to expand and strengthen the Marketplaces following a time of heightened vulnerability for millions of Americans and the Administration's recent efforts to build upon the foundation of the Affordable Care Act.

Open Enrollment Period

ACHP recommends an adjustment to the Open Enrollment Extension proposal to provide additional stability by allowing the coverage period to begin on January 1. We support the proposal to extend the open enrollment period by 30 days providing consumers with additional time to make informed plan choices and increase access to

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health coverage. However, we recommend a minor adjustment: ending the open enrollment on December 31.

The current proposal would push enrollee coverage start date to February 1, resulting in a consumer having just 11-months of coverage. A January 1 start date provides more stability, less consumer confusion and fewer Marketplace operational burdens. CMS could maintain the length of the extended open enrollment period, while incorporating a January 1 start date, by moving the open enrollment period start date back to October 15 and ending the open enrollment period on December 31. This would ensure as many Americans are offered a full 12-month coverage period, which is the basis of plan benefit actuarial design and pricing.

Special Enrollment Period

ACHP supports the proposed addition of a Monthly Special Enrollment Period (SEP) for consumers with household incomes up to 150% of the Federal Poverty Level. The addition of a special enrollment period in response to the pandemic will ensure that countless Americans obtain pivotal coverage. ACHP requests that the Administration consider the potential risk pool implications of such an SEP.

Standardized Options

ACHP does not support mandating the inclusion of Standardized Options for the 2023 Payment Notice. When considering the diversity of plans across the country, a one size fits all approach does not work. Plans can be more responsive to their customers and incorporate more innovations such as the incorporation of telehealth without a mandate for Standardized Options.

Navigators

ACHP strongly supports CMS allocating funds toward Navigator grants. We strongly endorse CMS' decision to issue the 2021 Navigator Notice of Funding Opportunity, making \$80 million in grant funding available to Navigators in states with a Federally Facilitated Marketplace for the 2022 plan year. ACHP has continued to advocate for funding independent navigators that aid consumers in selecting affordable health care coverage options. We further continue to support expanding the duties of Federally Facilitated Navigators to offer additional help to consumers enrolling in plans.

Direct Enrollment Provisions

ACHP supports CMS' decision to eliminate the Direct Enrollment (DE) option. The Marketplace DE option would harm consumers by fracturing enrollment processes, creating consumer confusion and disrupting coordination of coverage with other insurance affordability programs, Medicaid and CHIP. The Administration's other actions, such as increasing Navigator funding, expanding enrollment opportunities and increasing enrollee

tax credits and eligibility will be significantly more beneficial to consumers than the Marketplace DE option.

Thank you for consideration of ACHP's comments and recommendations. Please contact Michael Bagel, Director of Public Policy at mbagel@achp.org or 202-897-6121 with any questions or to discuss these recommendations further.

Regards,

A handwritten signature in cursive script that reads "Ceci Connolly". The signature is written in black ink and is positioned below the "Regards," text.

Ceci Connolly
President and CEO