



**Maine Hospital Association**  
*Representing community hospitals and the patients they serve.*

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September 11, 2017

Tom Price, US Secretary of Health and Human Services  
Office for the Secretary Health and Human Services  
The Hubert H. Humphrey Building  
200 Independence Avenue, SW  
Washington, D.C. 20201

**RE: State of Maine MaineCare 1115 Demonstration Project Application**

Dear Secretary Price:

Please accept this comment letter on behalf of the Maine Hospital Association regarding the State of Maine's Proposed Section 1115 Demonstration Waiver Application.

The Maine Hospital Association represents all 36 community- governed hospitals in the state including 33 general acute care hospitals, 2 private psychiatric hospitals, and 1 acute rehabilitation hospital. In addition to the acute hospital facilities, our hospitals represent 11 home health agencies, 18 skilled nursing facilities, 19 nursing facilities, 12 residential care facilities, and more than 300 physician practices employing thousands of medical professionals.

This proposed waiver would impose new work requirements, monthly premiums, and asset tests for MaineCare recipients. It is unclear how recipients would respond to these new requirements, but it seems safe to say that they are created and designed to further reduce the number of people receiving MaineCare coverage. By our latest count, there are approximately 76,000 fewer people receiving MaineCare today than there were five years ago. Certainly, some of these people are receiving employer-sponsored health insurance coverage which is a positive development. Unfortunately though, most of them are uninsured. Maine hospitals are still providing excellent care for these patients just as they did in 2010. The only difference is instead of receiving a MaineCare payment of 72% of the cost of this care, hospitals are receiving no payment at all. This is shown rather dramatically in that Maine hospital's uncompensated care grew by \$124 million during the past 6 years. We ask that The Centers for Medicare and Medicaid Services (CMS) reject and deny this waiver application because granting it would most certainly result in more people becoming uninsured in the State of Maine.

These new requirements would also likely delay the processing of new MaineCare applications resulting in fewer member days being covered. The processing of MaineCare applications is already quite lengthy, and we ask CMS to reject and deny any steps that would further lengthen that process.

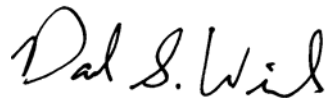
In this waiver, the Department is proposing to charge a significant co-payment for emergency department visits that are deemed non-emergencies by the Department. This step may cause some patients to seek care in a different setting but it will also result in many patients not seeking needed care at all. This likely wouldn't be good for the health of the patient and could result in additional longer term costs for hospitals and the MaineCare program.

We appreciate that the proposal states that these co-payments “will not result in a decrease to provider payments.” It is unclear, however, what will happen if the patient cannot or does not pay their bill. Would the patient be removed from MaineCare for nonpayment resulting in even further uncompensated care provided by hospitals? For all of these reasons, we ask that CMS reject and deny the proposal to charge a significant co-payment for emergency department visits that the Maine Department of Health and Human Services deems non-emergency.

The proposal eliminates retroactive eligibility for members and replaces it with a policy that “MaineCare coverage for an individual will begin on the first day of the month that an application for assistance is filed.” Although this proposed change would continue to allow for many new patient hospital visits to be covered, it is clearly designed to disallow payment for services delivered prior to an application being filed, resulting in a new financial burden on hospitals. We believe that the current MaineCare retroactive eligibility policy works well, so we encourage CMS to reject and deny any changes to MaineCare retroactive eligibility policy.

Thank you again for the opportunity to comment on the Section 1115 Demonstration Waiver Application and please feel free to contact me at (207)622-4794 or by email at [dwinslow@themha.org](mailto:dwinslow@themha.org) with any questions about this letter.

Sincerely,

A handwritten signature in black ink that reads "David S. Winslow". The signature is written in a cursive, flowing style.

David S. Winslow  
Vice President of Financial Policy