



PARTNERSHIP TO FIGHT CHRONIC DISEASE

January 7, 2022

Health Policy and Analytics Medicaid Waiver Renewal Team
Attn: Michelle Hatfield
Oregon Health Authority
500 Summer St. NE, E65
Salem, OR 97301

Re: Comments on Oregon Health Plan 1115 Demonstration Waiver Application for Renewal

Submitted online

Dear Ms. Hatfield:

We appreciate the opportunity to provide comments on the Oregon Proposed 1115 Medicaid Waiver (proposed Waiver). We applaud the intended focus to advance health equity mentioned throughout the proposed Waiver, but many changes proposed will have the opposite effect and pose serious risk of harm to highly vulnerable individuals. Accordingly, we write to share our serious concerns in opposition to the proposed Waiver. We urge to reject the highly controversial care limitations included within the proposed waiver and instead work to preserve the much-needed access protections for Medicaid beneficiaries afforded under federal law.

The Partnership to Fight Chronic Disease (PFCD) is an internationally recognized organization of patients, providers, community organizations, business and labor groups, and health policy experts committed to raising awareness of the number one cause of death, disability, and rising health care costs: chronic disease.

Six in ten adults living in Oregon have at least one chronic condition and many have more than one. The prevalence of chronic conditions is even higher among people covered by Medicaid



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than in the general population.¹ Those covered by Medicaid are among the state’s most vulnerable residents and depend upon affordable access to the care and treatments they need to maintain their health and independence. Medical and prescription drug coverage provided through Medicaid is a lifeline for thousands of individuals and families in Oregon. Protecting that coverage and the access to comprehensive medical services and treatment are of paramount importance and should dominate discussions of reforms that place that access at risk. For these reasons, we urge you to reject the proposed Waiver and instead work in favor of protecting Medicaid coverage and access while avoiding discriminatory practices that will exacerbate health disparities in the state.

Discriminatory Aspects of Waiver, Particularly Affecting People Living with Disabilities

We reassert, by reference here, the concerns expressed and recommendations made in the letter submitted to you by the Oregon Disability Rights Center, of which PFCD is a signatory. Accordingly, we limit our comments to additional concerns we have with the proposed Waiver.

The proposed Waiver represents a dangerous departure from the protections afforded Medicaid beneficiaries under federal law, particularly relating to access to medicines people depend upon to maintain their health.

Denying Coverage of Prescription Medicines Harms People Living with Chronic Conditions

The proposed Waiver includes provisions to limit adult beneficiary access to medicines severely by instituting “commercial-style” formularies with as few as one drug per class. Enabling Medicaid health plans to only cover one prescription drug per therapeutic class ignores the diversity and complexity of medical needs represented within the Medicaid population, the heterogeneity of treatment effects among different individuals, and the need for choices to promote optimal health among Medicaid beneficiaries. As such, the proposal if implemented disproportionately and negatively affects people living with multiple chronic conditions, those with complex treatment regimens, including many living with disease-related disabilities. The prevalence of multiple chronic conditions is almost twice that among adults aged 18-64 years on Medicaid—approaching 30 percent—than their peers on private insurance or uninsured.² The proposed Waiver cites to Medicare to support adoption of such restrictive formularies, but does not acknowledge the additional protections that of Medicare requiring comprehensive

¹ [Prevalence and Medical Costs of Chronic Diseases Among Adult Medicaid Beneficiaries - American Journal of Preventive Medicine \(ajpmonline.org\)](https://ajpmonline.org)

² [Prevalence of Multiple Chronic Conditions Among US Adults, 2018 \(cdc.gov\)](https://www.cdc.gov)



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drug coverage within six protected therapeutic classes of medicines or the availability of beneficiary choice among multiple, competing drug coverage options that enables people to choose coverage that best fits their needs.

Denying Access to Accelerated Approval Drugs Harms the Seriously Ill

New medicines approved through FDA's accelerated approval pathway have made novel therapeutics, developed in response to significant unmet medical needs, available to people with serious or life-threatening conditions. Without these treatments, people suffering from rare cancers, genetic conditions, or HIV/AIDS would face avoidable disease progression, preventable disability, and premature death. People living with serious or life-threatening conditions dependent on Medicaid for access to accelerated approval medications are arguably among Medicaid's most vulnerable populations and reforms aimed at restricting access to treatments should be viewed with those significant vulnerabilities foremost in mind. CMS has already rejected such a state waiver proposal³ and issued a letter to state Medicaid programs asserting the requirement to cover accelerated approval drugs⁴--for these important health reasons. Imagine if Oregon's waiver were adopted during the midst of the HIV/AIDS crisis and denied beneficiaries access to antivirals approved using accelerated approval that led death rates from HIV/AIDS to drop precipitously?

A recent economic analysis,⁵ found that access to accelerated approval drugs for the seriously ill has had very limited impact on Medicaid costs. Specifically, accelerated approval drugs accounted for less than 1 percent of Medicaid spending consistently every year 2007-2018 and amounted to 1.3% of the growth in total Medicaid spending over that timeframe.

Unfortunately, judgments of value often fail to consider the full benefits associated with health improvements – critically important considerations given the linkages between health and economic mobility and their combined impact on promoting economic opportunity, particularly for communities of color, people living with disabilities, and others facing discrimination that limit opportunities. Seven in 10 adults covered by Oregon Medicaid are working in the state.⁶ Preserving their access to the comprehensive coverage that federal law currently requires and Oregon provides will enable those adults to continue working while managing their health

³ [MA revised eval design \(vet annuity disregard\) approval letter Signed.pdf \(medicaid.gov\)](#)

⁴ [Medicaid Drug Rebate Program Notice \(Medicaid.gov\)](#)

⁵ [Limiting Medicaid Access to Accelerated Approval Drugs: Costs and Consequences](#)

⁶ [Medicaid in Oregon \(kff.org\)](#)



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effectively. Supporting upward economic mobility by promoting better health and affordable access to care is a foundational aspect of Medicaid coverage. The proposed Waiver violates that central tenant and puts seriously ill Oregonians at significant risk of harm.

We urge you to reject the proposed Medicaid waiver and preserve the access protections afforded low-income Medicaid beneficiaries in Oregon.

Respectfully submitted,

Candace DeMatteis, JD MPH
Policy Director