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February 3, 2014

Marilyn Tavenner, Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Room 445-G, Hubert H. Humphrey Building
200 Independence Avenue SW
Washington, DC 20201

Dear Administrator Tavenner,

The Association of Community Cancer Centers thanks you for this opportunity to express our concerns to the Centers for Medicare and Medicaid Services (CMS) regarding a provision of the Patient Protection and Affordable Care Act (ACA) that may lead to decreased access for patients.

The Association of Community Cancer Centers (ACCC) represents about 20,000 cancer care professionals from approximately 1,900 hospitals and private practices nation-wide. It is estimated that 60% of cancer patients are treated by a member of ACCC.

ACCC remains committed to caring for patients in the most appropriate way. However, our membership is concerned about patient access to care when an individual purchases health insurance through the federally facilitated insurance exchange. Of particular concern to ACCC members is the extension of the time that services are deemed covered in the event of lapsed premium payment. The ACA provision extends, to 90 days, the grace period in which patients have to become current on any past payments prior to the insurance coverage being terminated.

The ACA replaces all existing state laws with this 90 day grace period. The rule applies to all consumers, in all states, who purchase subsidized coverage through the federal health insurance marketplace. After the first premium is made, patients have 90 days to pay the next premium. If the patient doesn't pay for the second month, the insurer can hold all claims. At the end of the third month, if the patient still has not paid, the insurer may terminate the policy. The rule requires insurers to reimburse providers during the first 30 days of the 90-day grace period. However, if a consumer still fails to make a payment after 90 days and his or her coverage is dropped, insurers will not be required to pay for claims incurred during the last 60 days of the grace period. If coverage is dropped for nonpayment, physicians must work directly with patients to collect payments for the balance incurred during days 31-90 of the grace period. In many cases, this ultimately leaves the provider unreimbursed for care already provided.

Current CMS guidance to insurers in federally-facilitated exchanges states that “issuers should notify all potentially affected providers as soon as practicable when an enrollee enters the grace period, since the risk and burden are greatest on the provider.” ACCC is concerned that the language, “as soon as practicable” is not well enough defined to guarantee companies are actually providing this critical information to providers in a way that ensures providers have up-to-date patient premium status information at the time of service.

ACCC urges the Administration to clarify this guidance by requiring insurers to maintain a real-time database of plan holder premium payments that is available to providers. Ultimately, we believe the full solution is to remove all financial risk from providers; however, this is a step in the right direction while we work to change the regulations already in place.

ACCC looks forward to continued collaboration with you to best meet the needs of patients and the providers who care for them. If you have any questions, please do not hesitate to contact Sydney Abbott at 301-984-5071 or sabbott@acc-cancer.org.

Sincerely,

A handwritten signature in cursive script that reads "Virginia Vaitones".

Virginia Vaitones
President