March 2, 2016

Mr. Peter Lee, Executive Director
Covered California
1601 Exposition Blvd.
Sacramento, CA 95815

Via electronic submission to: 1332@covered.ca.gov

Re: Section 1332 State Innovation Waiver

Dear Mr. Lee:

The California Pan-Ethnic Health Network (CPEHN) appreciates the opportunity to provide comments regarding Covered California’s stakeholder process to develop a State Innovation Waiver as authorized by Section 1332 of the Patient Protection and Affordable Care Act (ACA). The 1332 waiver provides an important opportunity for Covered California to increase access to health coverage and improve the experience of enrollees.

We urge Covered California to move forward with the following proposals for submission in 2016:

- **Allow undocumented immigrants to purchase health coverage in the Exchange:** Under current law, undocumented immigrants can purchase health coverage for their eligible family members through Covered California but are prohibited from purchasing coverage for themselves in the exchange. As a result some “mixed immigration status” families have chosen to forgo purchasing coverage for their eligible family members. SB 10 (Lara) would allow undocumented immigrants to buy unsubsidized coverage through Covered California using their own money. The bill would specifically authorize non-qualified health plans that mirrored QHPs to provide coverage for undocumented in the exchange.

Additionally, allowing undocumented immigrants to purchase coverage in Covered California will help to dispel immigration enforcement myths and ensure all of California’s immigrant populations feel welcome to purchase coverage in the exchange. It would also allow mixed immigration status families to apply together, albeit with different subsidy levels. Because coverage would be unsubsidized the only cost to the exchange would be an administrative one.

- **Streamline enrollment and reduce churn by aligning coverage and other rules between programs, especially Covered California and Medi-Cal:** California, like several other states, has a lack of alignment between
the Medi-Cal program and state exchange rules. For example, differences in income eligibility for children and adults has resulted in a substantial number of mixed status families with kids in Medi-Cal and parents in Covered California. Additionally, women who become pregnant in Covered California with incomes up to 321% Federal Poverty Level (FPL) are eligible for zero cost Medi-Cal as well as Covered California. Rather than switching back and forth between programs, or continuing the status quo with families in different plans, Covered California could use this opportunity to align eligibility rules and improve continuity of care for these populations.

We are also supportive of additional proposals put forward by Western Center on Law & Poverty that would streamline enrollment and reduce churn for example, by allowing Newly Qualified Immigrants (NQIs) in state-only Medi-Cal to remain in Medi-Cal by bringing the premium tax credits they are eligible for to the Department of Health Care Services (DHCS), and providing a transition bridge month for Medi-Cal beneficiaries at risk of losing health coverage due to incompatible deadlines for applying for and gaining access to coverage through a transfer of one month’s premium tax credits to DHCS.

- **Additional proposals for 2017 and beyond:** Moving forward, we urge Covered California to start exploring, developing and modeling affordability improvements for submission in 2017 including proposals to provide premium and cost-sharing assistance to exchange enrollees, including undocumented immigrants, family members impacted by the “family glitch” and those over 400% FPL living in high-cost areas of the state. Additionally, we would encourage Covered California to explore opportunities to improve benefits by for example, by exploring the option of adding adult dental and vision as part of QHP benefit packages.

**Conclusion:** Covered California has an important opportunity to improve access to health care coverage for Californians through both short-term and longer-term waiver proposals. We urge Covered California to act swiftly to advance these landmark proposals.

Thank you for your time.

Sincerely,

[Signature]

Director Policy Analysis, CPEHN