



May 1, 2019

Alex M. Azar II, Secretary
Department of Health and Human Services
Attention: CMS-9921-NC
P.O. Box 8016
Baltimore, MD 21244-8016

Dear Secretary Azar:

On behalf of the American Academy of Family Physicians (AAFP), which represents 134,600 family physicians and medical students across the country, I write in response to the [request for information](#) titled, "Increasing Consumer Choice Through the Sale of Individual Health Insurance Coverage Across State Lines Through Health Care Choice Compacts" as published by the Department of Health and Human Services (HHS) in the March 11, 2019, *Federal Register*.

In this RFI, the Department solicits comment on how to eliminate barriers and enhance health insurance issuers' ability to sell individual health insurance coverage across state lines, primarily through Health Care Choice Compacts. The AAFP continues to support efforts to improve patient access to affordable health insurance coverage. We offer the following comments to the RFI that most directly impact primary care physicians and their patients.

Among other things, HHS seeks comment on whether selling health insurance coverage such as short-term, limited-duration insurance; state-regulated farm bureau coverage; or insurance licensed by a state to individuals pursuant to such state agreements (Non-compliant Plans) would help facilitate the sale of individual health insurance coverage across state lines. **The AAFP has steadfastly called for policies that ensure all Americans have access to affordable, meaningful health insurance.** Federal and state policies should support patient-centered insurance reforms that prohibit insurers from selling plans that fail to provide meaningful coverage.

We recognize that Non-compliant Plans could expand affordable access to a minimal level of health coverage for certain individuals. **However, the AAFP is strongly opposed to these proposals since these plans do not provide meaningful insurance coverage for all, including, most notably, those with complex medical conditions or the very ill.** While these plans could increase the availability and affordability of services for some, we do not think doing so should come at the expense of meaningful insurance coverage for all.

The AAFP believes all commercial and private health insurance plans should adhere to the *Affordable Care Act's* essential health benefits (EHB) requirements to prevent insurance discrimination against any individual based on their health status, age or gender. The AAFP is concerned that the proliferation of Non-compliant Plans could destabilize the individual market by drawing young, healthy people away from meaningful, comprehensive coverage. As a result,

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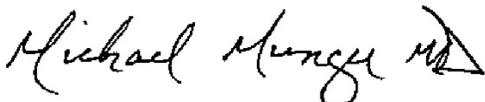
women, older, and sicker Americans would likely face higher costs and fewer affordable insurance options.

The AAFP is also opposed to actions which might reduce or eliminate certain EHBs to avoid vulnerable, expensive patients by excluding specific services. In doing so, insurers could potentially make plans more expensive for people with long-term chronic conditions or with sudden medical emergencies. Allowing younger and healthier individuals to gamble with low-quality insurance will raise the premiums of those with ACA compliant plans. This will have the detrimental effect of putting meaningful coverage beyond the reach of millions of the most vulnerable Americans.

The AAFP's concern for Non-compliant Plans is also shared by states. Many states have adopted regulations restricting access, duration, and renewability to short-term, limited duration plans. **Allowing states to sell these types of policies across state lines would pre-empt state authority, erode consumer protections.** Fostering the availability of these types of low-value insurance policies would undermine states' ability to regulate markets within their borders and, more importantly, subject patients to catastrophic medical bills and medical bankruptcy.

While the AAFP shares HHS' desire to lower health care costs for consumers and stands ready to work with the agency to promote health care options that address insurance cost, we are opposed to any proposals that would erode the consumer protections contained in the *Affordable Care Act*. We appreciate the opportunity to comment. Please contact Robert Bennett, Federal Regulatory Manager, at 202-655-4908 rbennett@aafp.org with any questions or concerns.

Sincerely,



Michael L. Munger, MD, FAAFP
Board Chair

About Family Medicine

Family physicians conduct approximately one in five of the total medical office visits in the United States per year—more than any other specialty. Family physicians provide comprehensive, evidence-based, and cost-effective care dedicated to improving the health of patients, families, and communities. Family medicine's cornerstone is an ongoing and personal patient-physician relationship where the family physician serves as the hub of each patient's integrated care team. More Americans depend on family physicians than on any other medical specialty.