March 17, 2021

The Honorable Frank Pallone Chairman Committee on Energy and Commerce

The Honorable Anna Eshoo Chairwoman Subcommittee on Health The Honorable Cathy McMorris Rodgers Ranking Member Committee on Energy and Commerce

The Honorable Brett Guthrie Ranking Member Subcommittee on Health

*Subject: U.S. House of Representatives Committee on Energy and Commerce Hearing "Averting a Crisis: Protecting Access to Health Care in the U.S. Territories"* 

Dear Congressional Leaders,

As private medical providers in the Commonwealth of the Northern Mariana Islands (CNMI), we, the undersigned private health care providers are submitting this letter for two reasons.

First, we are writing in support of Insular Area Medicaid Parity Act HR 265 and ask for your support to ensure that the Americans living in the CNMI and other territories are afforded fair and equitable health care under the Medicaid program.

We further request Congress to treat the territories no different from the states in Title XIX. This may be achieved by defining "states" as "States, the District of Columbia, and Territories," eliminating the section 1108 caps, and enabling the Federal Medical Assistance Percentage (FMAP) to be calculated using the same methodology applied to the determination of the FMAP for States. The Medicaid program must be treated the same as the States so that the U.S. citizens of the CNMI are able to obtain the same level of health care benefits provided by Medicaid programs in the States.

Second, the private Medicaid health care providers in CNMI would also like to thank the U.S. Congress for responding to the needs of the territory in 2019 by passing P.L. 116-20 Disaster Relief Act, 2019 in June 6, 2019 and P.L. 116-94 Further Consolidated Appropriations Act, 2020 in December 20, 2019. If Congress is unaware, in 2019, when the Medicaid funding under the section 1108 caps and the balance from the Patient Protection and Affordable Care Act was completely depleted in <u>March</u> of 2019, <u>six months before</u> <u>the end of the fiscal year</u>, the Medicaid program directed the Medicaid beneficiary to seek care only to the Commonwealth Healthcare Corporation (CHCC), the public safety-net system. The Medicaid program made that recommendation because there was no money to pay for the services for the Medicaid beneficiaries; and, this included the CHCC, the public health care corporation that could not turn away patients seeking health care. The limitation created many issues and worries, not to mention the long waiting times for primary care and other services for the Medicaid beneficiaries.

The health care providers that are undesigned to this letter urge the U.S. Congress to address the inequities by passing an Insular Area Medicaid Parity Act that treats the Medicaid program in the Territories and the State the same, lifts the section 1108 caps, and applies the same FMAP formula used to calculate the federal/state share based on income levels among states.

Addressing the caps and the FMAP as part of the Insular Area Medicaid Parity Act will put territories on the same foundation as the States.

We understand that the Medicaid program will need to manage the program as any other state. In this regard, our policymakers and Medicaid has made clear that the CNMI is seriously and fully committed to management best practices, accountability, and compliance.

Further, please consider the following in your deliberations:

- Americans in the CNMI are no less American than those living in the U.S. States. All U.S. citizens must be treated fairly and equitably regardless of the location of their American home.
- The 1108 cap on federal contribution and low federal matching rate for territory Medicaid programs are arbitrary the funding disparity is not supported by fair or substantial cause.
- The territories will face the same Medicaid financial "cliff" for which a band-aid solution was made in 2019. A long-term solution is needed. Eliminate the cap, increase the FMAP.
- For the disaster-prone island territories, Medicaid financing must be responsive, becoming easier for Americans to access when they are most vulnerable without needing to wait for additional appropriations from Congress.
- Medicaid is built as a counter-cyclical program: its federal support expands to meet rising needs during an economic downturn. However, for the territories, Medicaid program funding is stagnant regardless of economic conditions. In the past five years alone, the CNMI has experienced three category-5 typhoons and a global pandemic.
- One out of three CNMI residents were enrolled in Medicaid before the pandemic, and roughly three out of four are enrolled now. The health of CNMI residents is dependent upon adequate Medicaid financing.
- Equal treatment for territory Medicaid programs would enable the CNMI to keep our health care system on its current positive trajectory.
- Medicaid reimbursement is a critical source of revenue for CNMI health care service providers. Adequate Medicaid financing has a direct impact on the availability of health care services for <u>all</u> residents in the CNMI.
- Medicaid provides coverage for essential services for beneficiaries who, due to social determinants of health, have conditions which needs access to preventative services.

Thank you very much for your prompt consideration of this important matter. We urge you to support the Insular Area Medicaid Parity Act HR 265 so that we may continue to provide the needed healthcare services our community deserves.

Sincerely,

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The Commonwealth Medicaid Providers from the Commonwealth of the Northern Mariana Islands:

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