

Coffee CAHC is a weekly newsletter where we round up and comment on the latest health coverage policy developments both nationally and here in Maine. We hope you find these updates helpful!



Please email [policy@mainecahc.org](mailto:policy@mainecahc.org) with questions.

## Coffee CAHC

118<sup>th</sup> Congress, 1<sup>st</sup> Session

131<sup>st</sup> Maine Legislature, 1<sup>st</sup> Session

[Tip Jar Donations](#)  
[Welcomed](#)

In recognition of Women's History Month, we're featuring Alabama Shakes, [Hold On](#), this week. Story of our lives, right?

## National Level

**States Preparing for Public Health Emergency “Unwinding.”** Since the start of the COVID-19 pandemic, the federal government has provided states with enhanced Medicaid funding in exchange for a “continuous enrollment” requirement. That arrangement ends March 31, 2023. Beginning April 1, state Medicaid offices will begin reevaluating the eligibility of people enrolled in Medicaid.

Ideally, people who remain eligible for Medicaid will remain in the program. People no longer eligible can obtain health coverage through the Affordable Care Act Marketplace ([CoverMe.gov](#) in Maine) or an employer. However, the scale of the redetermination process, which will involve [91.3 million people](#) and approximately 380,000 Mainers, has [some health policy experts and advocates concerned](#) people will unnecessarily lose coverage.

Kaiser Family Foundation (KFF) has a [report on state plans](#) to implement the policy change and minimize the likelihood people lose health insurance coverage. These strategies involve outreach to consumers, *ex parte* renewals when possible, and using partners to amplify outreach. Read about the specifics of Maine's unwinding plan [here](#).

**Centers for Medicare & Medicaid Services Names 27 Drugs Subject to Rebate Penalty.** Under the Inflation Reduction Act (IRA), drug companies must pay a rebate to Medicare if prices for certain drugs exceed the rate of inflation. DHHS [released the first list of 27 drugs](#) on Wednesday. People with Medicare may see a decrease in out-of-pocket costs of between \$2 and \$390 per average dose. Drugs included on the list include: Humira, an immunosuppressive drug used to treat arthritis and Crohn's disease; Leukine, a bone marrow stimulant to make white blood cells; Rybrevant, used to treat non-small cell lung cancer that has metastasized and cannot be removed by surgery; and, Folutyn, for patients with relapsed or refractory peripheral T-cell lymphoma.

While the White House [celebrated the savings for seniors](#), Health Affairs published [an article](#) about how the IRA can be strengthened by predicting drugmakers' strategies in avoiding and gaming.

**Medication Abortion Hearing.** On Wednesday, U.S. District Judge Matthew Kacsmaryk heard arguments in a lawsuit anti-abortion activists brought in Texas to challenge the Food and Drug Administration's (FDA's) approval of mifepristone, one of two drugs used in tandem to terminate a pregnancy. The other drug, misoprostol, is taken within 48 hours of mifepristone. Together, the regimen is referred to as "medication abortion." The Guttmacher Institute reports that medication abortion accounts for more than half the abortions in the United States. Mifepristone is also used in miscarriage management.

The FDA is charged with protecting the public health by assuring the safety, efficacy, and security of drugs, biological products, medical devices, and other materials. It [approved mifepristone in 2000](#) to end a pregnancy through 10 weeks' gestation. Critics of the lawsuit note that [the judge would upend the FDA approval process](#) for other drugs if he rescinds approval of mifepristone.

News reports indicate [the judge seemed sympathetic](#) to the anti-abortion activists who brought the suit. They asked Judge Kacsmaryk for a preliminary injunction, which would block the sale of the drug nationwide while the suit makes its way through the courts.

**Maternal Deaths Spiked During COVID.** The Centers for Disease Control and Prevention [reported](#) that the maternal death rate increased from 23.8 deaths per 100,000 live births in 2020 to 32.9 deaths per 100,000 in 2021. The morality rate was highest among black mothers. In 2022, maternal mortality dropped, [according to AP](#). Eighty-four percent of pregnancy-related deaths in the U.S. were preventable, [NPR reported](#).

**ICYMI:** KFF [updated its report](#) on health and health care by race and ethnicity. The National Academy for State Health Policy produced [a webinar](#) on understanding Medicare's new rural emergency hospital designation. And the Center on Budget and Policy Priorities [issued a report](#) on how robust COVID relief bolstered the economy and reduced hardship for millions of Americans.

## State Level

### Hearing Scheduled for Bill to Close Eligibility Gaps for Immigrants in MaineCare

A hearing has been scheduled in the Health and Human Services (HHC) legislative committee for [LD 199](#), which is a bill that will ensure all Maine residents with low income have access to MaineCare, regardless of immigration status, and bring us one step closer to a health care system that is equitable and works for all of us. Learn more about LD 199, [here](#).

Governor Janet Mills and Maine's Legislature took the first step towards ensuring equitable access to MaineCare last year by closing eligibility gaps for children up to 21 years old and pregnant people, regardless of immigration status. This change in eligibility went into effect last July and has helped many children and pregnant people

access the preventive care and screenings, treatment for serious and chronic conditions, mental health services, prescription medicine, and other health care services they need. However, many of our immigrant friends, family, and neighbors who are over 21 continue to fall through the cracks due to discriminatory exclusions in MaineCare.

[LD 199](#), which is sponsored by House Speaker Rachel Talbot Ross, would close the remaining gaps in eligibility for adults and ensure all Maine residents with low-income can access MaineCare coverage, regardless of their immigration status. Recent polling, which will be released soon, found that the vast majority of Maine voters [believe that ensuring every Mainer has access to affordable health insurance should be a priority for the Maine lawmakers](#).

The public hearing for LD 199 has been scheduled in the Health and Human Services legislative committee for [Tuesday, March 28 at 2pm](#). Testimony can be presented live during the public hearing, either in-person in Augusta or remotely via Zoom. Written testimony may also be submitted online, [here](#).

**Changes Are Happening With MaineCare- Take Action to Stay Covered!** The Families First Coronavirus Response Act (FFCRA) made certain [temporary changes](#) to state Medicaid programs during the federal COVID-19 Public Health Emergency (PHE), which was first declared in January 2020. One of the biggest changes was a pause on Medicaid annual eligibility redeterminations and most coverage terminations. This means people who had or got Medicaid (MaineCare in Maine) coverage during the past three years, have not had to complete an annual renewal or provide updated information in order to keep their coverage. People also have been able to keep MaineCare coverage even if they experienced changes that otherwise would have made them ineligible.

However, Congress passed a year-end omnibus [spending bill](#) in December 2022 that [delinked the Medicaid continuous coverage requirement from the PHE](#). Regular MaineCare eligibility rules will go back into effect and DHHS will resume annual eligibility redeterminations beginning in April 2023.

**What MaineCare Members need to know:** DHHS will begin conducting renewal determinations in April. However, it will not conduct reviews for all MaineCare members right away. DHHS will maintain most MaineCare members' current renewal months. In other words, they will wait until the anniversary of the month that someone's coverage began, or the month they submitted their application. So, if someone's coverage began in August 2020, their redetermination would most likely be in August 2023.

**Stay connected to stay covered!** If you have MaineCare coverage, you should make sure your contact information is up to date by logging into your [My Maine Connection account](#) or calling 1-855-797-4357 to confirm or change your contact information. And don't forget to keep an eye out for letters or messages from DHHS.

DHHS will send you a reminder at least a month before your renewal and will send your renewal form at least 30 days before your renewal date.

- **If you get your MaineCare notices by mail:** You will have a renewal form mailed to you in a blue striped envelope. [If it's blue, it's time to renew!](#)

- **If you signed up for e-notices through My Maine Connection:** You will get an electronic message by e-mail or text when your renewal form is available in your [My Maine Connection](#) account.

If you are found no longer eligible for MaineCare after your redetermination, you may qualify for a special enrollment period through Maine's Marketplace, [CoverME.gov](#).

Learn more about DHHS's plan for resuming redeterminations, [here](#). If you have questions or need help completing an annual review or transitioning to a Marketplace plan, call our free confidential **HelpLine at 1-800-965-7476**.

**Need a COVID-19 Vaccine or Booster?** COVID-19 vaccine and booster shots are free. You can find a free vaccination site near you, [here](#). Note that not all sites offer vaccines to young children. When searching for a vaccination site, you can filter by age eligibility to find locations offering vaccines for the age group you're looking for.

You can also get tested for COVID-19 for free. Learn how to get a free COVID-19 test, [here](#).

### Want to Know More?

A [moon-forming cataclysm](#) could have also triggered Earth's plate tectonics. You can [watch an animation](#) of how the continents have shifted over the past 100 million years. And the Earth's [inner core may have its own inner core](#).

Until next time,

The staff at CAHC



Advocating the right to quality, affordable health care for every person in Maine.

**Consumers for  
Affordable  
Health Care**



Consumer Assistance HelpLine

**1-800-965-7476**

[www.maine cahc.org](http://www.maine cahc.org)

**Consumers for Affordable Health Care** is a Maine based, not for profit, private organization that works to advocate the right to quality, affordable health care for every person in Maine. We do this through our toll-free Consumer Assistance HelpLine, educational publications and trainings as well as bringing the voice of the Maine people to the legislature when health care or coverage issues arise.

Please consider making a donation to support this important work.

**[Donations Welcomed](#)**



Consumers for Affordable Health Care | PO Box 2490, Augusta, ME 04330 1-800-965-7476

[Unsubscribe consumerhealth@mainecahc.org](mailto:consumerhealth@mainecahc.org)

[Update Profile](#) | [Constant Contact Data Notice](#)

Sent by [consumerhealth@mainecahc.org](mailto:consumerhealth@mainecahc.org) powered by



[Try email marketing for free today!](#)