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 with questions.

Coffee CAHC

118th Congress, 1st Session 131st Maine Legislature, 1st Session Tip Jar Donations Welcomed

Good afternoon, Coffee CAHC readers!

Today, we're revisiting Bruce Springsteen et al. (and there are a lot of artists on that stage!) covering Nick Lowe's (What So Funny 'Bout) Peace, Love, and Understanding, made famous in 1978 by Elvis Costello and Attractions! Enjoy.

National Level

KFF Health Tracking Poll. The latest Kaiser Family Foundation (KFF) <u>Health Tracking Poll</u> shows health care affordability remains a leading concern nationwide, with three in four adults saying they are "very" or "somewhat worried" about being able to afford unexpected medical bills or the cost of health care services. Those concerns are consistent among Democrats, Independents, and Republicans. Fifty-five percent have specific concerns about affording prescription drugs. Forty-eight percent worry about the cost of health insurance premiums.

Overall, the public has had a more favorable than unfavorable view of the Affordable Care Act since 2018 (one year after the latest Republican effort to repeal the law). At the same time, voters are divided as to the direction they want policy makers to take on the law: 77% of Democrats want to see the law expanded; 62% of Republicans want to see the law scaled back or repealed. Among independents, 48% prefer that the law be expanded, while 18% say it should be kept as is.

Interestingly, 61% of voters do not associate some of the law's most popular provisions, that carriers cannot exclude people with preexisting conditions from coverage or charge them more for premiums, with the Affordable Care Act. It's unclear what they believe the source of those prohibitions to be.

A news release that summarizes the other results of the poll is available here.

Patients Realize First Rx Savings Under IRA. In August 2022 President Biden signed the Inflation Reduction Act, which contained provisions intended to rein in the rising cost of prescription drugs. While the price negotiations under Medicare won't take effect until 2026, assuming they survive legal challenges, other provisions are benefitting consumers now. The cost of insulin is capped at \$35 per monthly prescription for Medicare Part D enrollees. Patients with high prescription drug costs are no longer required to pay out-of-pocket costs once they reach a certain level of spending known as the catastrophic phase of Medicare Part D. Finally, the Extra Help or Low-Income Subsidy Program, which helps with drug costs for Part D enrollees, is expanded to 150% FPL.

ICYMI: A ransomware attack at a tech unit of UnitedHealth Group continues to disrupt claims and payment processing, making things especially difficult for small providers. The Centers for Disease Control and Prevention recommends Americans 65 and older get a second dose of the updated COVID-19 vaccine made available in September. And, Elevance Health (formerly Anthem), which serves 117 million people, is looking to incorporate artificial intelligence to simplify and personalize the healthcare experience.

State Level

Public Hearings on Bills Aimed at Reducing Medical Debt. The Health Coverage, Insurance, and Financial Services Committee held public hearings on two bills yesterday that seek to strengthen consumer protections related to medical debt: LD 2115, *An Act Requiring Health Care Providers to Engage in Fair Practices When Selling Medical Debt* and LD 2174, *An Act to Protect Consumers from Predatory Medical Credit Card Providers*.

LD 2174, sponsored by Senate President Troy Jackson, would protect consumers from predatory medical credit cards by prohibiting providers from offering a medical credit card to a consumer that contains a deferred interest provision in its contract. The bill also prohibits providers from offering medical credit cards to consumers in healthcare settings. Additionally, LD 2174 requires a provider to screen a consumer for free care eligibility before accepting payment from a consumer using a medical credit card.

<u>Medical credit cards</u> are used to pay for medical, dental, and veterinary services. These cards were originally used to help pay for procedures insurance didn't cover, such as dental care or cosmetic procedures, but over the years, they've expanded to cover a wide array of medical services.

During the public hearing on LD 2174, the Committee heard <u>testimony</u> from Chuck Bell of Consumer Reports who shared that many clients they've heard from are "not screened or informed of alternative payment options, or offered an affordable payment plan as an alternative to a medical credit card. Others said that the staff described the terms of the medical credit card incorrectly, emphasizing that it carried 0% interest when in fact it charges deferred interest, and that interest charges are retroactive after a 6-24 month grace period."

The sponsor of LD 2174, Senate President Troy Jackson, explained, "While these credit cards may seem like a good deal on paper, I have serious concerns about how they may be used and marketed to people...I also want to ensure that no person eligible for charity care is ever charged on a credit card for care that would be free to them."

The second bill addressing medical debt, LD 2115, now amended, would protect Mainers from harmful collection agency practices that exacerbate negative impacts of existing medical debt or force consumers to incur more debt. The bill would prohibit collections agencies from charging interest and fees, litigating to collect on debt, and would prohibit them from reporting debt to credit agencies.

LD 2115 was introduced by Senator Mike Tipping. He shared that the purpose of the bill is to "mitigate the long term impacts medical debt can have on them [Mainers] and their families." Tipping said the bill would "make sure people are treated fairly and helps prevent medical debt from spiraling out of control through unchecked interest and fees."

Medical debt is unique in that it is not a good predictor of someone's ability to pay their debts. Research conducted by the CFPB found that <u>"medical billing data on a credit</u>

report is less predictive of future repayment than reporting on traditional credit obligations. Mistakes and inaccuracies are common and can be compounded by problems such as disputes over insurance payments or complex billing practices."

Although medical debt has little predictive value, it is still being included in credit reports and credit score calculations, with devastating effects for many people. LD 2115 would help protect Mainers by prohibiting collection agencies from reporting medical debt to credit agencies.

<u>The Health Coverage, Insurance, and Financial Services Committee</u> will hold work sessions on both bills next Wednesday, March 6th.

Need Health Insurance? You may qualify for a <u>Special Enrollment</u> <u>Period</u> at <u>CoverME.gov</u>. But don't wait. Many special enrollment periods only last for 60 days.

Mainers can apply for MaineCare anytime. Visit <u>CoverME.gov</u> for more information or apply online at <u>MyMaineConnection.gov</u>.

For questions or help enrolling in coverage, call our free confidential **HelpLine at 1-800-965-7476.**

Want to Know More?

A <u>universal antidote</u> to all types of snake venom may be in the offing. A <u>new species of anaconda</u> has been documented (thanks to some indigenous people of the Amazon). And, 125 million years ago, a "<u>burst of evolutionary innovation</u>" led to the diversity in snakes we see today.

Until next time.

The staff at CAHC





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