

February 5, 2021

Elizabeth Richter **Acting Administrator** Centers for Medicare and Medicaid Services 200 Independence Avenue Washington, DC 20002

VIA E-Mail

Dear Acting Administrator Richter,

Minnesota has long led the nation in progressive health reforms. In 2016, we again led the country. Recognizing that individual market premiums and participation were unstable at the time, Minnesota was one of the first states to create a reinsurance program to promote market stability. Through a Section 1332 waiver, Minnesota committed to spending hundreds of millions of dollars of state funds to support the individual market in this way.

State policymakers worked closely with federal officials to craft legislative language for our reinsurance program that would not negatively affect federal funding for Minnesota's health care programs. While reinsurance would artificially lower premiums for consumers in the individual market, and federal funding for BHP is calculated based on individual market premiums, CMS and Treasury recognized that this investment of state funds should not result in reduced federal funding overall.

Under the previous Administration, however, CMS and Treasury erred by not approving Minnesota's waiver request in full, which resulted in reduced federal funding for our BHP without compensating with increased funding via 1332 passthrough. This arbitrary decision has unfairly pitted stability in the individual market against federal funding for public problems, ultimately to the disadvantage of Minnesotans.

The federal government's decision to deny part of Minnesota's 2016 waiver request was based on a plainly flawed and inconsistent methodology that calculated our reinsurance payment with the existence of the BHP taken into consideration but independently calculated our BHP payment without the existence of reinsurance taken into consideration.

This was clearly a mistake four years ago, so what we are requesting now is for CMS and Treasury to quickly correct the mistake moving forward. This correction would be consistent with the parameters of Minnesota's original 1332 waiver request from 2016 and with the federal government's stated positions late that same year. In doing so, it would undo a harmful, arbitrary, and inconsistent position taken by the previous Administration.

We would welcome conversations with CMS and Treasury about the best way to accomplish this request.

Sincerely, Grace anda

Grace Arnold, Commissioner (Temporary)

Minnesota Department of Commerce

Jodi Harpstead, Commissioner

- Celi Cometral

Minnesota Department of Human Services

Cc: Jeff Wu, Christen Linke Young, Jeff Grant, Anne Marie Costello