



**BEFORE THE COUNCIL OF THE DISTRICT OF COLUMBIA
COMMITTEE ON HEALTH
B22-1001, "HEALTH INSURANCE MARKETPLACE IMPROVEMENT ACT OF 2018"
Wednesday, November 7, 2018
Testimony of Katie Nicol, Senior Manager of Public Benefits and Insurance Navigation
Whitman-Walker Health**

Good morning, Chairman Gray and distinguished members of the Committee. My name is Katie Nicol, the Senior Manager of the DC Health Link Assister and Navigator program at Whitman-Walker Health (WWH). I am here to present testimony in support of this legislation that protects District residents from the risks of short-term limited duration health plans and association health plans.

As background, WWH provides high quality, affirming health care to more than 16,000 individuals, including nearly 12,000 DC residents – approximately 3,000 of whom are living with HIV and 60% of whom are members of the city's gay, lesbian, bisexual, and transgender communities. Providing consumers with integrated care by offering primary medical, behavioral health, dental, legal services, insurance navigation, health education and wellness services, WWH serves consumers from every Ward in the City at our five sites – WeWork Manhattan Laundry in Ward 1; our northwest clinical site, "1525", in Ward 2; our Research and Evaluation offices in Ward 2; Youth Services in Ward 6; and the Max Robinson Center, our Southeast clinical site, in Ward 8. We are proud to be a front line provider for the District of Columbia's health care system.

As a community health center with a 40-year history of caring for the LGBTQ community and people with HIV and AIDS during the AIDS pandemic, and now open and welcoming to everyone, WWH understands the real barriers that District of Columbia residents face to secure affordable and comprehensive health insurance in order to access health care services that are comprehensive and free from discrimination and stigma. That understanding is deepened from our public benefits and health insurance team's day-to-day interactions with WWH patients and other un- and under-insured District residents – many of whom are living with serious health conditions. The Affordable Care Act (ACA), and DC's strong commitment to coverage, have had a profound and positive impact on our patients' ability to secure and maintain health coverage and receive the health care services that they need.

We applaud the District's unwavering commitment to offering affordable and comprehensive insurance coverage through DC Health Link. Providing robust inclusive coverage options has

been transformative for District residents; over 96% of all DC residents now have health insurance.

WWH is proud to have served as a DC Health Link Assister organization and an enrollment center for all of the DC Health Link open enrollments since 2013, the inaugural year of the ACA exchanges. We are heading into our sixth open enrollment period, where our Assister staff will continue to work tirelessly to provide outreach and education to uninsured and vulnerable consumers and to help consumers understand their insurance options; enroll in insurance; and, troubleshoot challenges. We work hard to ensure consumers not only understand the coverage they are enrolling into and receive their insurance card, but also understand how to use their insurance to access medical care and stay healthy.

Through our work as DC Health Link Assistants we understand the consumer experience when going through plan selection, the questions asked through this process, and the challenges people encounter when utilizing their insurance to access health care services. The current federal government Administration continues to attempt to undermine the ACA and has taken steps to administratively dismantle the law – including expanding rules for short-term limited-duration health plans and association health plans – which could have a significant, harmful impact on our patients and District residents more broadly. Prior to the passing of the ACA, many of our patients were unable to get insurance coverage, were denied coverage for services relating to a pre-existing condition, were unable to access gender affirming care, and faced many care challenges imposed by penalties like annual and lifetime limits, pre-existing condition exclusions, and limited benefit plans. This legislation seeks to prohibit “junk” insurance plans – short-term limited-duration health plans and association health plans – which too often contain little transparency as to what they actually cover.

The patient protections and expanded coverage options created by the ACA – childless adult Medicaid and the creation of DC Health Link as a consolidated marketplace – have been life-changing for many DC residents, but have been especially important for our patient population who have chronic health issues and have too often faced stigma and other unique access issues. The premise of the ACA was to standardize the insurance market to regulate health insurance plans by including minimal essential benefits and ensuring that all policies sold through the exchange are free from discrimination, regardless of age, sex, sexual orientation and pre-existing condition. Short-term limited-duration health plans often provide none of these protections. Unless such offerings are regulated as to their duration, extent of coverage and other critical terms, they would very likely have a detrimental effect on District residents, our patients, and the stability of the insurance market.

Whitman-Walker Health, therefore, fully supports the Council’s action to restrict short-term limited-duration and association health plans.

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Thank you for the opportunity to share our experience. If you would like additional information, or if we can assist the Committee or the Council in any other way, please contact me at (202) 939-7692, knicol@whitman-walker.org or Erin Loubier, Senior Director for Health and Legal Integration and Payment Innovation at (202) 939-7662, eloubier@whitman-walker.org.