

# 1332 Waiver Amendment - Implementation Update

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October 20, 2025

# Background (1/2)

- In 2024, the General Assembly passed the Access to Care Act (SB705/HB728)
  - Directs MHBE to apply for waiver amendment to allow all residents to enroll on-Exchange, regardless of immigration status (waiver of section 1312(f)(3) of the Affordable Care Act)
- On January 15, 2025, the Departments (HHS and Treasury) approved MHBE's request to amend its existing 1332 Waiver with an implementation plan specifying new eligibility rules launching Nov 1, 2025 for enrollment in 2026 plans
- Due to recent federal developments, MHBE asks the Board to approve submission of an updated implementation plan, delaying implementation of the new eligibility rules until open enrollment for 2028 plans

## Background (2/2)

- Federal actions, including H.R.1 and the Marketplace Integrity Final Rule, require systems changes for MHBE that could not have been foreseen when MHBE requested the waiver amendment
- MHC's integrated eligibility system means MHBE will be a key contributor in developing and implementing new federally mandated work requirements and other changes to Medicaid eligibility
- MHBE will implement earlier than January 1, 2028 if resources allow; in that case, MHBE will notify the Departments at least six months in advance

# Public Notice and Comment Period

- 30-day comment period: September 5 - October 5, 2025
- Any comments received will be included with the letter for submission
- MHBE received two comments (plus a third received after the deadline)

# Summary of Public Comments

Commenter	Comment	MHBE Response
American Cancer Society Cancer Action Network, American Lung Association, Asthma and Allergy Foundation of America, Blood Cancer United, Coalition for Hemophilia B, National Bleeding Disorders Foundation, Pulmonary Hypertension Association, Susan G. Komen, and The AIDS Institute	Understands the unexpected increase in federal requirements and urges MHBE to implement the amendment as soon as possible	MHBE does intend to implement the amendment earlier if resources allow
1199 SEIU United Healthcare Workers East	Opposes the delay, citing belief that implementing the amendment would reduce emergency care and the cost of uncompensated care	MHBE agrees that access to care is important and intends to implement the amendment as soon as resources allow, but emphasizes that the estimated enrollment due to the amendment is less than 300
CASA + 103 additional organizations	Opposes the delay, asserting that the amendment would have improved affordability for undocumented Marylanders and also mitigated enrollment impact due to HR1 provisions affecting lawfully present immigrants	The amendment will open another route to enroll in full-price coverage for undocumented Marylanders, but will not impact affordability for undocumented Marylanders or lawfully present Marylanders losing APTC

# Implementation Plan

	<u>Original Plan</u>	<u>Updated Plan</u>
Spring 2025	Exchange begins designing system changes	Between now and early 2027, exchange implements new QHP and Medicaid requirements in Marketplace Integrity Rule and H.R.1
Summer 2025	Finalize system updates and complete testing in advance of fall OE activities, to support waiver implementation for OE 2026	
November 2025	OE 2026 begins; waiver population eligible to purchase QHPs	
January 2026	QHP coverage begins for waiver population	
Summer 2027		Finalize system updates and complete testing in advance of fall OE activities, to support waiver implementation for OE 2028
November 2027		OE 2028 begins; waiver population eligible to purchase QHPs
January 2028		QHP coverage begins for waiver population

# Request for Approval to Submit Implementation Update Letter

MOTION: I move to [approve/defer/reject] submission of the 1332 Waiver Amendment Implementation Update Letter [as presented] *or* [as amended] to the Centers for Medicare and Medicaid Services (CMS) in the Department of Health and Human Services, and the Department of the Treasury.