



**NEW YORK CITY DEPARTMENT OF  
HEALTH AND MENTAL HYGIENE**

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*Acting Health Commissioner*

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**Gotham Center**  
**42-09 28th St.**  
**Long Island City, NY 11101**

**via electronic submission: [stateinnovationwaivers@chs.hhs.gov](mailto:stateinnovationwaivers@chs.hhs.gov)**

**Re: New York Section 1332 State Innovation Waiver**

Dear Centers for Medicare & Medicaid Services (CMS) Administrators, Department of Health and Human Services (HHS), and Department of the Treasury,

The NYC Health Department appreciates the opportunity to comment on New York State's request to modify the terms of its 1332 State Innovation Waiver.

The original waiver request, effective April 2024 through December 2028, expanded income and immigration eligibility for the State's Essential Plan program. The latest amendment permits the use of passthrough funding to establish subsidies for individuals enrolled in Qualified Health Plans (QHP); this provision will be effective for four years, from January 1, 2025, through December 31, 2028.

The NYC Health Department supported the original waiver's intent to broaden affordable insurance access for low- and moderate-income New Yorkers. The Essential Plan offers year-round enrollment, and coverage comes at minimal cost to the consumer, with no deductibles and \$0 premiums for those who qualify. The scope of covered services is more comprehensive than most other affordable plans on the market, and in 2022, both dental and vision were added as permanent benefits, with no cost-sharing.

The latest amendment, approved September 25, 2024, took additional steps to increase affordability for consumers who do not qualify for Essential Plan coverage under the expanded eligibility terms of the original waiver. Under this amendment, individuals earning up to 400% of the Federal Poverty Level (FPL) are eligible for cost-sharing reductions (CSR), with additional CSR eligibility for birthing people and individuals with diabetes.

The NYC Health Department understands the proposed change of the amended waiver's provisions to be important for the overall success of the program. A unified five-year timeline will facilitate technical implementation undertaken by the State and assist with consumer navigation of program changes. The amended timeline will also allow the waiver's innovative reforms to remain in effect for the full five years

typically afforded such types of demonstrations. For these reasons, the City supports the State's request to modify the timeline of the original waiver to extend for the full five-year term authorized by Section 1332(e).

The City is strongly committed to expanding insurance access and eliminating barriers to care for all New Yorkers. We thank HHS, CMS, and the Department of the Treasury for the opportunity to comment and look forward to working together to improve the health of all New Yorkers.

Sincerely,



Michelle Morse, MD, MPH  
Acting Health Commissioner  
New York City Department of  
Health and Mental Hygiene