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8
 9 IN THE UNITED STATES DISTRICT COURT
 10 FOR THE NORTHERN DISTRICT OF CALIFORNIA

11 **THE STATE OF CALIFORNIA; THE**
 12 **STATE OF CONNECTICUT; THE STATE**
 13 **OF DELAWARE; THE DISTRICT OF**
 14 **COLUMBIA; THE STATE OF ILLINOIS;**
 15 **THE STATE OF IOWA; THE**
 16 **COMMONWEALTH OF KENTUCKY;**
 17 **THE STATE OF MARYLAND; THE**
 18 **COMMONWEALTH OF**
 19 **MASSACHUSETTS; THE STATE OF**
 20 **MINNESOTA; THE STATE OF NEW**
 21 **MEXICO; THE STATE OF NEW YORK;**
 22 **THE STATE OF NORTH CAROLINA; THE**
 23 **STATE OF OREGON; THE**
 24 **COMMONWEALTH OF PENNSYLVANIA;**
 25 **THE STATE OF RHODE ISLAND; THE**
 26 **STATE OF VERMONT; THE**
 27 **COMMONWEALTH OF VIRGINIA; and**
 28 **THE STATE OF WASHINGTON,**

Plaintiffs,

v.

DONALD J. TRUMP, President of the United
States; ERIC D. HARGAN, Acting Secretary
of the United States Department of Health
and Human Services; UNITED STATES
DEPARTMENT OF HEALTH AND
HUMAN SERVICES; STEVEN T.
MNUCHIN, Secretary of the United States
Department of the Treasury; UNITED
STATES DEPARTMENT OF THE
TREASURY; and DOES 1-20,

Defendants.

Case No. 4:17-cv-05895-KAW

DECLARATION OF HANNAH DYER FRIGAND, ASSOCIATE DIRECTOR, HELPLINE, ENROLLMENT AND EDUCATION, HEALTH CARE FOR ALL ISO PLAINTIFFS' APPLICATION FOR A TEMPORARY RESTRAINING ORDER AND ORDER TO SHOW CAUSE WHY A PRELIMINARY INJUNCTION SHOULD NOT ISSUE

1 I, Hannah Dyer Frigand, hereby state the following:

2 1. I am the Associate Director, HelpLine, Enrollment and Education of Health Care For
3 All (HCFA). The facts below are based on my personal knowledge and my review of
4 documents kept in the ordinary course of business by HCFA, and are, to the best of my
5 knowledge, true and accurate.

6 2. HCFA is a Massachusetts nonprofit advocacy organization that has worked for 32 years
7 to improve the health care system through policy advocacy and direct service to consumers.
8 Since the passage of the Patient Protection and Affordable Care Act (ACA), HCFA has played
9 a major role in its implementation in Massachusetts. In my role at HCFA, I oversee its
10 consumer HelpLine that informs Massachusetts residents about their health insurance options
11 and assists with their applications for coverage. I started working at Health Care For All in
12 October of 2006 and have been managing the HelpLine since January of 2013. I have
13 personally assisted thousands of callers to apply for insurance coverage, and have since 2013
14 supervised up to six others in the same work. HelpLine Counselors complete applications for
15 consumers seeking coverage including Medicaid, CHIP, Qualified Health Plans with
16 Advanced Premium Tax Credits and Cost Sharing Reduction subsidies, as well as Qualified
17 Health Plans without subsidies. The HelpLine handles an average of 20,000 calls a year.

18 3. As part of my work at HCFA, I am in regular contact with dozens of other people
19 employed by public and private agencies to assist with insurance enrollment. My experience
20 at HCFA assisting individuals with insurance enrollment in publicly subsidized programs
21 makes me uniquely qualified to comment on the impact of proposed changes to consumers in
22 Massachusetts.

23 4. The ACA work involves assisting individuals to enroll in healthcare plans offered
24 through the Massachusetts Health Connector, Massachusetts' state-based exchange under the
25 ACA. We do so by screening families for their insurance options based on household size,
26 income and access to other insurance options, completing application as well as
27 troubleshooting issues with coverage. We assist eligible members with shopping for private
28 insurance options through the Health Connector if the family qualifies for marketplace

1 coverage. Since 2015, Health Care for All's HelpLine has helped over 3,500 people apply for
2 health care plans offered through the Health Connector and Massachusetts' Medicaid program.


3 5. In my experience, when premium rates for plans being offered through the Health
4 Connector have risen, fewer people have chosen to enroll. Instead, at least some people have
5 chosen to go without health care coverage instead of paying higher rates. Sometimes this has
6 been a matter of choice for callers I have encountered, but often it has been a matter of
7 economic necessity. In some cases, I have spoken with callers who have chosen to forego
8 health insurance in order to pay for other necessities, specifically on account of increased
9 insurance premium charges.

10 6. In my experience, when premiums for health care plans offered through the Health
11 Connector have risen, I have heard from individuals that choose not to purchase those plans
12 even if they are eligible for tax credits and other subsidies that would substantially reduce
13 those premiums.

14 7. In my experience, when premiums for health care plans offered through the Health
15 Connector have risen, at least some individuals decide not to purchase those plans even if they
16 will pay a tax penalty.

17 8. Therefore, based on my experience at HCFA assisting individuals, it is my opinion that
18 there is an inverse relation between increased premium charges and the rate of enrollment in
19 health insurance policies issued by the Connector pursuant to the ACA.

20 Signed under the pains and penalties of perjury this 18th day of October, 2017.

21
22  10/18/2017

23 Hannah Dyer Frigand

24 Associate Director, HelpLine, Enrollment and
25 Education

26 Health Care For All