

Hello Patty,

I am writing a short note to you letting you know that medicaid modernization, in its current format, is a losing proposition for Iowans and for small providers. Briefly, I want you to know that I am a small provider in southern Iowa. We care for 30 people 24/7. We have near perfect state surveys and reviews and we love what we do. Medicaid Modernization will do the following:

- 1) According to IME baseline rates I received, I will look at a 15% reduction in revenue next year. We will be expected to provide the same care to the same people for 15% less? How does that work when IME Provider Cost reporting already has us at our costs in figuring our rates? This methodology will put half the providers in the state out of business, including mine.
- 2) Patients have not received anything in writing about changes in their health insurance and its 11/11/15. We are six weeks away from the biggest change in medical insurance payments since I have been a licensed social worker (25 years) and Iowans have no real idea how it will effect them.
- 3) The saving from this process will go right into the managed care companies pockets. I have listed to all four companies and one of them stated they have rented the 18th floor of the Ruan building in Des Moines. That Iowa Medicaid money that will pay that exorbitant rent. IME is housed in a dumpy building on the south side of Des Moines and live out of cubicles. This is NOT an acceptable way to use tax dollars that have been collected for payments for medical care for our neediest citizens.
- 4) The case management component that has been internalized into each company is not an objective decision maker for each of our patients. They are gonna do what their company wants them to do, cut, cut, cut..... this will be without regard to anything other than money. How can that be good for Iowans?
- 5) When managed care gets done with the rate settings, they will be the ones giving the nod to their preferred services in Iowa. We will lose half our providers (small companies) the first year. From then on, the Des Moines companies will try to serve the rural communities, and we who live in rural Iowa know how that turns out. We live to far away, so we are forgotten.

I could write 20 reason why managed care is not good for Iowans, not good for rural communities that have already suffered and not good for patient care. If read, and can admit the above is true, the first five should be enough to stop this managed train wreck.

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Jackie Sharp, LISW  
Executive Director  
Centerville Community Betterment, Inc.