

From: Dan Strellner dstrellner@abbehealth.org
Subject: IHH letter to policy committee.docx
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To: Liz Mathis Liz.Mathis@legis.iowa.gov, Mark Costello Mark.Costello@legis.iowa.gov, Mark Chelgren Mark.Chelgren@legis.iowa.gov, Amanda Ragan Amanda.Ragan@legis.iowa.gov, Mark Segebart Mark.Segebart@legis.iowa.gov, Dave Heaton Dave.Heaton@legis.iowa.gov, John Forbes John.Forbes@legis.iowa.gov, Joel Fry Joel.Fry@legis.iowa.gov, Lisa Heddens Lisa.Heddens@legis.iowa.gov, Rob Taylor Rob.Taylor@legis.iowa.gov

Good afternoon Legislative Health Policy Oversight Committee Members:

Please find attached my comments related to the UnitedHealthcare decision to transfer Medicaid Integrated Health Home members to Primary Care Physician offices for care management.

I hope that you will consider advocating for an assessment of the serious implications this will have before allowing it proceed further.

We will have several staff available at Monday's Committee Meeting should you desire further information.

Thank you for your consideration.

Dan Strellner

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- Neither IHH members, IHH professionals and staff, ACOs, nor primary care providers were notified of this decision prior to implementation.
- IHH members did not have a choice to move to the IME Fee-for-Service option.
- This is a fundamental change in the State's definition of IHH, its structure and payment methodology.
- Primary care offices provide a significantly different service than IHH's, as their focus and expertise is to provide preventive care and management of physical health conditions to populations of patients.

- IHH services are not a duplication of those provided in primary care offices, as the focus is on a team of professionals working together to provide whole-person, patient-centered coordinated care in community settings for adults with SMI ^{upon mental illness} and children with serious emotional disturbance enrolled in the Medicaid program. IHH services are designed to provide an accessible, single point of coordination across behavioral, medical and social services and supports.
- IHHs are better suited to provide these services as they include specially-trained mental health professionals, peer support specialists and staff that are equipped to connect members to programs and services that address social determinant needs, e.g., poverty, substance abuse, homelessness, transportation to primary care appointments and monitoring members' medications, including antipsychotic drug regimens, among others. The ability to collectively manage IHH members' behavioral, social, and medical issues in a coordinated manner allows tens of thousands of Iowans with SMI to live in community-based settings while improving their overall health.
- IHHs provide peer support services as required by definition and the focus is on the whole person's

health-including medical/physical, mental and social health.

- IHHs provide community based in-home services and coordination, not office-based care management. IHH mental health professionals and staff deliver care and services to members in their homes, hospitals, work sites, medical offices, and wherever the member lives and socializes, whenever they need them.
- IHHs have had a very positive impact on the healthcare outcomes for this population and have helped to reduce emergency room visits and inpatient admissions significantly. According to a recent State Medicaid report, Integrated Health Home Care Coordination contributed to a 19 percent reduction in emergency room visits and a 17 percent reduction in hospital admissions.

IHHs are a great example of population health management that works. We truly believe that Integrated Health Homes are the best resource for adults with Serious Mental Illness and transitioning them to Primary Care Offices will be a disservice to this vulnerable population. It is simply not the same service.

We believe in this model of service and would be more than happy to work with UnitedHealthcare to address how it can become even more efficient and cost-effective.

We hope that you will consider advocating for an assessment of the impacts of this decision before allowing it to proceed further

Thank you for your consideration.

Dan Strellner

President

AbbeHealth