



Testimony of
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Provided to the Joint Legislative Budget Hearing on 2023 Executive Budget Proposal:
Health/Medicaid

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Reject the Recalibration of Health Homes Proposal Cuts

The New York Health Home Coalition represents 25 Health Homes across every region of New York State with CNYSHH member Health Home enrollees totaling over 155,000 adults and children/youth including those with the highest medical, behavioral health, and social care needs in the state. The CNYSHH seeks to improve the health and lives of all individuals served in the Health Homes by enabling providers to deliver the highest quality, most cost-effective complex care management to all.

The NYS Care Management Coalition represents thousands of Care Managers statewide serving adults, children and families with complex medical, behavioral health and social determinants of health needs.

iHealth is a statewide coalition of New York Community-based non-profit organizations providing care management services within the Medicaid Health Home program. Our member agencies are focused on improving the lives of people living with chronic health care challenges.

We would like to thank Chairs Amy Paulin and Gustavo Rivera and all the members of the Assembly and Senate Committees for holding this hearing on the health-related proposals in the Governor's Executive Budget for the State Fiscal Year 2023-24.

We are testifying to express our extreme concern over the Executive Budget proposal to "Recalibrate the Health Home Program". The Governor's Executive Budget contains a misleading and harmful administrative proposal to "Recalibrate the Health Home Program to Improve Care Management for Vulnerable Populations." When in fact, this proposal will do the opposite and create significant disruption to the continuum of mental health and health care. This valuable infrastructure is being marginalized to make room for more fragmented interventions that will further silo the healthcare system and waste valuable healthcare and taxpayer dollars. In addition, this proposal will hinder access to mental health and health services for our most vulnerable adults.

The Governor's Executive Budget proposal outlines a program cut of \$30 million in 2023 and \$70 million in 2024. The Department of Health's proposal seeks to **disenroll 70,000** of the 139,00 Health Home enrolled New Yorkers with mental illness, active substance use disorders, significant chronic health conditions, including those with HIV/AIDS, which would create disruption in the continuity of care causing an increase in emergency department utilization, in-patients stay and completely ignores the social care needs of these New Yorkers.

A Health Home is a network of community-based Care Management agencies that work with more than 180,000 high-risk, high-need adults and children with serious and complex physical health, mental health, and substance use disorders in their local community to achieve better health outcomes, member satisfaction and overall cost reduction to the system. Care managers work with adults, children and their families who enroll in a Health Home to develop an individualized comprehensive plan of care, and then help them navigate the health care delivery system, schedule appointments, obtain housing and benefits, support social determinants of health needs, arrange transportation, and communicate between health care providers. Care managers also provide education about how to manage chronic conditions, taking medications properly, and understanding often complex discharge plans, and follow-up after a hospitalization.

The DOH proposal outlines "stepping down" Health Home members after 9 or 12 months of enrollment into a "softer touch" form of care management such as Patient Center Medical Homes (PCMH), Managed Long Term Care (MLTC), Medicaid Managed Care Plans (MMCP), or Certified Community Behavioral Health Clinics (CCBHC) and a new model of service – Community Health Worker. These services are not, nor have ever been, easily accessible or appropriate for members enrolled in HHCM. Approximately 55% of these members to be disenrolled from are in the Health Home High Need/High Risk 1874 rate code are HARP enrolled, meaning they have a significant Behavioral Health utilization and need. Over 69.2% of these members in the 1873 and 1874 rate codes have a mental health diagnosis.

11% of these members have been HUD defined homeless in the last 6 months. 7% of these members are living with HIV/AIDS. 16% of these members have a substance use disorder diagnosis.¹ At least 77% of these members identify as BIPOC.² The Health Home program and care manager has been key for this population to seek the treatment and assistance in addressing social determinant needs that are necessary for positive whole health outcomes, including keeping this population out of the Emergency Room and other more costly settings.

Health Homes play a critical role in improving population health management across NYS by being the primary provider of Medicaid Complex Care Management and demonstrate positive health outcomes that have resulted in cost savings. **It would be wasteful and inefficient to discard the infrastructure that has been built in Health Homes and Health Home Care Management rather than to continue to improve and enhance these services.** We strongly recommend that any investment of future funding be made into enhancing what is currently in place instead of trying to duplicate a model of CHW's without proven outcomes. **Disregarding this infrastructure to stand up a new program in lieu of absorbing into an existing program would be wasteful and careless.**

This proposal would cripple many of these community-based organizations providing not only Health Home services but a full array of many other community-based services. Care Management Agencies across the state have decades of experience providing thousands of individuals with mental health services and addressing social determinants of health. The HHCM program has successfully achieved better outcomes while simultaneously saving costs to the overall health care system. There is no such thing as a “softer touch” of care management. This evidenced informed model has proven outcomes for adults, children, and families for over a decade. The PCMH, MLTC, CCBHC, and MMCP are not positioned, nor do they have the workforce, to manage the influx of referrals for this complex population which would further destabilize the healthcare continuum in an already fragile healthcare delivery system.

The proposed 1115 Waiver Amendment (NYHER) outlines a significant commitment to care management, health equity, and highlights the vital role that care management plays in addressing the social determinants of health and medical needs of the Medicaid population with complicated life and health care challenges. The Health Home program already has the infrastructure in place to help facilitate the goals of the Waiver Amendment and connect individuals with the social services they need. To significantly modify and change the Health Home program in advance of federal approval of the 1115 Waiver seems premature and counterintuitive.

CONCLUSION

Recalibrating the Health Home program with the significant budget cuts proposed in the Governor's Executive Budget would cripple the healthcare continuum as we know it resulting in significant adverse effects for the most NYS members most in need. Providers will have trouble remaining fiscally viable, workers will be laid off and most importantly, adults with significant health and mental health needs will

¹ Based on a February 2023 analysis of 104,677 members in Foothold Care Management and the HHUNY Health Home Network representing 11 lead Health Homes and 75% of total Health Home serving adult enrollment.

² Based on a February 2023 analysis of 78,267 members in the 1873 and 1874 rate codes in Foothold Care Management.

be disrupted in their services. HHCM outcomes have consistently demonstrated a positive impact on our members and communities, as well as reducing hospitalizations and ER visits achieving great savings to the overall systems. Health Home Care Management continues to be the crutch that holds together a fragmented system and the most important component in connecting those most at risk to integrated care. Without this valuable resource the future success of New York in many waivers, efficiencies and value-based payment initiatives is at risk.

We respectfully ask you to **Reject the Recalibration of Health Homes Proposal Cuts.**

Sincerely,

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