

TESTIMONY TO THE
HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

APRIL 30, 2009

Good morning. My name is John Lovelace and I am President of UPMC *for You*, Inc., which offers a Medical Assistance Managed Care program for Pennsylvania residents in the Southwest HealthChoices Zone. UPMC *for You* is a non-profit health plan, operated as a unit of the UPMC Health Plan and within the University of Pittsburgh Medical Center.

We have participated in the HealthChoices program since its inception in January of 1999 and currently enroll more than 110,000 recipients. I am pleased to note that UPMC for You is the number one-ranked Medicaid plan in Pennsylvania according to the findings of the National Committee on Quality Assurance and the US News and World Report rankings of Medicaid managed care plans nationally, and that all of Pennsylvania's current plans are in the top tier of quality rankings nationally.

I very much appreciate the opportunity to address the Committee this morning regarding Pennsylvania's managed care programs. The Committee has heard previously of the measurable and significant benefits that capitated managed care programs have brought to the citizens and the taxpayers of the Commonwealth since the inception of HealthChoices in 1997 in the Philadelphia area. Since that time, the

HealthChoices program has expanded to serve more than 1.2 million Medical Assistance recipients in 25 counties.

HealthChoices plans play a major role in improving access to and outcomes of health care in several ways, while controlling the growth of costs. Significant among these is the addressing of Special Needs of Medicaid recipients who are enrolled.

Across the Commonwealth, approximately half of all enrollees are children; approximately 25% of enrollees are people who are disabled, and they are poor. By definition, these are people who likely have little voice, and often few resources, to address daily living challenges; a role of a health plan is to address those issues as they have to do with access to health care, management of health and illness, and access to supportive services in the community.

In the operations of the HealthChoices programs, the term “Special Needs” Can refer to anything a an enrollee or the plan or an advocate identifies as a special need; there is no “Wrong” definition; and no bureaucratic requirement of “how special” the need has to be.

Special needs are often identified by a MA recipient when he or she enrolls; new enrollees are routinely asked at several points if there is any health issue they feel should have special attention:

- At enrollment, by the Independent Enrollment Assistance broker;

- At Plan enrollment, at which point we reach out by telephone to members to welcome them to the Plan as ask if they have any concerns about health care, or any special needs
- During the course of enrollment, as needs are identified by physicians, office staff, advocates, or members
- Through data analysis, through which a health plan may identify someone are possibly needing special assistance because of issues such as
 - Frequent emergency department visits
 - Failure to take prescribed medications
 - Presence of a complicated health condition, such as HIV
 - Pregnancy with potentially complicating factors, such as a history of premature birth, smoking, or other identified risk factors.

WHAT ARE SOME FREQUENTLY IDENTIFIED NEEDS?

Maternity care – women with special needs are identified by themselves sometimes, and often by the prenatal care provider. Preventing birth complications has long term gains for ths child, his/her family and for the health and education systems in many cases, so we all invest many resources in this effort. We work to engage new mothers

in programs to improve nutrition, address smoking and other high-risk behaviors, improve pre-natal care, and improve birth outcomes. As high risk moms are identified by high-volume OB practices, UPMC *for You* is able to connect women with supportive services, including doulas provided (with our financial support) by a large local Federally Qualified Health Center (East Liberty Family Health Care Center). Doulas are lay people, almost always women, who are trained to support women through pregnancy and delivery, to support the mom in childbirth and in adjusting to a new baby at home. They connect women with support services such as smoking cessation, addiction treatment, nutrition programs, “moral support” and a host of information resources on child birth and child rearing.

Behavioral Health and behavioral medicine – Medical Assistance is by definition a program for people who are poor; poverty and behavioral health disorders have a very high correlation. Although Physical Health Managed Care Organizations do not have direct responsibility for organizing the treatment of and payment for behavioral health disorders, we recognize their very profound impact on health care and work closely with our behavioral health MCO counterparts to assure that care is properly organized, coordinated and delivered. For example, UPMC *for You* is working on a pilot coordinated care project with DPW, Allegheny County, Community Care Behavioral Health Organization and other stakeholders in developing a Connected Care [™] project to better manage care for adults with serious mental illness in

Allegheny County. Keystone Mercy Health Plan, Magellan, DPW, and three Southeast counties are developing a similar program in that Zone. We will learn from these projects what works and what doesn't to improve care and those successful models will drive improvements across the Commonwealth.

Chronic Conditions – chronic conditions (asthma, hypertension, diabetes, sickle cell and other blood disorders, heart disease, etc.) are major cost drivers, and with successful patient, provider and plan interventions, much of the cost and loss of quality of life resulting from these conditions can be avoided. Health plans play a major role in identifying patients, in helping to organize clinical information for physicians treating patients, and in outreaching with education and engagement strategies to encourage Medical Assistance recipients to take a more active role in health care. We see encouraging and positive results from these efforts. Even though they take more resources now (compared with not providing care), the long term outcome is much enhanced.

UPMC *for You* uses health plan-funded nurse care managers stationed in primary care practices to reach out to both members and providers to better coordinate care. These nurses have access to both the doctors' medical charts, and the health plan's claims data, both of which are terrific sources of information on what people have had done, and what they need to have done, to address chronic health issues. In a

comparison of 2007 standardized health plan data to 2008, we see improvements of 8-10 percent routinely in the delivery of recommended health care. This will have significant impact on future health care costs, as experts estimate that 50-60% of health care costs are “Avoidable” if managed appropriately.

Children in Substitute Care – thousands of Pennsylvania children are removed from their families annually for reasons of safety and well-being. Without exception, children removed from their families become Medical Assistance recipients. Often these children have very transient lives, and access to health care is especially challenging. These children are, depending on county of origin, most often enrolled in HealthChoices programs, where plans play a critical role in coordinating health records and working with the Local Children and Youth Services agencies to coordinate health care. UPMC *for You* is now wrapping up a project in which we have, for Allegheny County CYS kids as a pilot. In this pilot, we have created an electronic health record for foster children, which is provided with regular updates to the CYS agency caseworkers, so they know which kids need routine care, which kids have on-going conditions (such as asthma or behavioral health issues) and which kids may need preventive care, such as immunizations and dental care. This project is one of 10 nation-wide to address health care issues for children in the child welfare system, and we believe it represents a wonderful opportunity to significantly improve care.

New Issues – each month, approximately three percent of the enrollment (more than 3,000 individuals) is identified with special needs of one sort or another. Our role as health plan is to address these issues and to resolve them. The record shows that we, the Medical Assistance Health Plans have done a commendable job in this area, while slowing the escalation of health care costs.

This is a model that is being replicated in other states. We have been pleased to have the opportunity to offer these services in the Commonwealth, and we look forward to the opportunity to continue to provide high-quality effective health care services to the citizens of Pennsylvania.

Thank you for the opportunity to speak with you this morning. I look forward to more opportunities in the future.