



Thank you for the opportunity to share our comments for review on the proposed 1115 Research and Demonstration Waiver.

After review of the Waiver proposal for renewal to CMS, it is clear that the state of RI has taken careful consideration to propose a comprehensive program that will serve all populations utilizing Medicaid benefits to meet their unique needs. The request to seek removal of the federal funding cap ensures that the program management will meet the needs of the recipients with adequate federal funding. This request is applauded and strongly supported by Rhode Island Parent Information Network (RIPIN).

RIPIN works directly with many populations served by the 1115 Waiver and would like to offer considerations and programming enhancements. Below are the recommended areas RIPIN feels would enhance the waiver options to meet the needs of Medicaid recipients. RIPIN listed considerations and suggestions provide increased potential for a successful demonstration period reducing barriers to healthcare, improved community capacity therefore resulting in better health outcomes and increased community based programming.

1. Stated on page 4;

“2 The ability to impact the long-term care system requires a broader, more comprehensive approach.”

### **Suggestions and Reasoning**

- In the process of improving systems that serve the target population, consideration should be given to provider community capacity which serves the populations identified in the Waiver.
- Considerations must be given to realistic expectations for the current available Home Health Agencies capacity to increase services in the community.
- Considerations to increase adult and children’s community providers.
- Implement criteria for sufficient direct service support hours in the community to be successful.
- Assess the need for workforce development for Home Health Aids, Certified Nursing Assistants, Personal Care Attendants, Registered Nurses that will provide services to reach said goal of increasing the number of individuals supported in the community.
- Consider workforce development that will advance Certified Nursing Assistant skills. Example; medication delivery (med tech certificate), enteral feedings and O2 operation and monitoring to reduce unnecessary RN expenses. Example. Parents and familial caregivers provide medication administration and operate listed clinical devices with appropriate training; extending training into listed clinical areas will reduce costs and advance the CNA profession.

## 2. Stated on page 6

“Ensure Medicaid financed services are responsive and appropriate to a person’s medical, functional and social needs.”

### Suggestions and Reasoning

- When determining social needs, **transportation** should be considered a fundamental need to access healthcare.
- **Transportation** continues to be a barrier to preventative care and for treatment of chronic mental health conditions for individuals, particularly who are economically disadvantaged.
- Commitment to reducing health disparities for the economically disadvantaged is a goal of the ACA.
- “ACA provides RI with the opportunity to implement additional options and tools that support the provisions and financing of MH and community-based services and improve consumer outcome” This may lend potential funding for the expansion of transportation benefits that will directly impact access to healthcare.
- Expand coverage for families with siblings to prevent additional resources needed for childcare.
- Enhanced transportation programming during medical crisis to ensure parents and primary caregivers are able to be present and assist in recovery.
- Explore funding cost sharing and or incentives with primary hospitals, health clinics and specialty care centers to establish transportation services for their patients.

This also can be considered under section III. Demonstration Benefits with response to Question #5

“Rhode Island will continue to use the additional flexibility afforded by the demonstration to further redesign the State’s Medicaid program to provide cost-effective services that will ensure beneficiaries receive the appropriate services in the LRE and most appropriate setting.”

\*Often times chronic usage of the ER is directly related to lack of adequate transportation to receive preventative treatment resulting in over utilization of the ER. The Emergency Room is not the LRE therefore addressing the barrier that is prohibiting the use of the LRE for medical care can be addressed.\*

Additionally, improved access, improved outcomes and promoting efficiency are listed as goals and objectives in Medicaid programming. Reducing barriers to healthcare access also aligns with decreasing health disparities for the economically disadvantaged which the ACA is committed to addressing. By directly targeting a systems barrier that drives increase costs and undermines improved health outcomes directly offers an innovative approach to reaching goals stated in Waiver furthers this National agenda. Lack of adequate transportation resulting in missed appointments, delayed care and increased acuity need and or ER utilization can be reasonably evaluated and tracked through the demonstration period. Avoiding undermining the core principals of Primary Care re-direction is a positive preventative

### Suggestions and Reasoning

- Include in all language that promotes and funds the Family Centered Care initiatives, Primary Care Initiatives and Medical Home initiatives should recognize Pediatric Providers.
- Communities of Care (COC) is a successful model, but it is not the only model and COC was built on the successful model of the PPEP (Pediatric Practice Enhancement Project).
- So as not to exclude any successful peer models, please include language to include other peer support models, Pediatric Practice Enhancement Project (PPEP), Early Intervention Parent Consultant Model etc.

#### 4. pg. 5 Clarity on the identified Consumer Assistance Program housed at EOHHS.

- Is this combined with the Exchange/Medicaid funding?
- Is this the designated Contact Center?

The 1115 Research and Demonstration Waiver goes to great lengths to improve and advance our medical systems of care. Section III titled **POTENTIAL NEW SERVICES UNDER CONSIDERATION** highlights the commitment and careful consideration our leadership has given to improving the health of our state. RIPIN strongly supports all services under consideration and are supportive of the efforts to institute and promote the standard of a Medical Home Model in our state and improved support to establishments that are aligned with the MHM and are actively transitioning to the MH.