

**House of Representatives Finance Subcommittee on Health  
and Human Services**

Ohio Commission on Minority Health  
2020-21 Budget Testimony

Monday April 8<sup>th</sup>, 2019

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Good afternoon Chairman Romanchuk, Ranking Minority Member West and esteemed members of the House Finance Subcommittee on Health and Human Services. My name is Mark Redding; I am the Co-Developer of the Pathways Community HUB model and a primary care pediatrician in Mansfield.

I appreciate the opportunity to provide information to support increasing funding to the Ohio Commission of Minority Health to help bring the Certified Pathways Community HUB Model to scale in Ohio communities that are experiencing disparities and significant infant mortality rates.

It is very exciting that Ohio has given birth to a model moving across the country and in the process of being implemented in 13 states. The Certified Pathways Community HUB Model is demonstrating some of the most profound impacts on both birth outcomes and cost savings. This model belongs to Ohio and Ohio should own it, deploy it, and improve it to achieve national impact.

The Pathways Community Hub model is a nationally Certified, evidence-based, peer-reviewed, pay-for-performance, care coordination model.

This model has received recognition from the Center for Disease Control and Prevention, Agency for Healthcare Research and Quality, the National Institutes of Health as well as the Center for Medicaid and Medicare. In addition, the HUB model has gained national recognition as evidence model with a transformative approach to improving health outcomes while controlling costs.

The Pathways Community HUB Model is designed to specifically target the most at-risk individuals in a community. Pathways are the tools used to track each identified health, behavioral health or social issue through to a measurable completion or outcome.

This model provides infrastructure in communities to link together care coordination agencies and eliminate duplication of services. The HUB uses existing community resources more efficiently and effectively to improve health outcomes. Payment is based on value and not volume or activities, and the five Medicaid managed care plans currently contract with HUBs for payment for Pathways.

The Pathways Community Hub Institute promotes accountable care through the certification of Hub organizations. The Hubs are required to use formal and standardized processes in the delivery of community-based care coordination services.

Infant mortality is a significant cost driver in Ohio. In 2013, the Department of Medicaid expended \$596 million dollars in prenatal and delivery care with two-thirds of this cost, or \$373 million dollars, related to the 13.79% preterm birth rate.

Your continued partnership in improving Ohio's birth outcomes and reducing related expense is needed.

Rigorous scientific research is now proving the health impact and the cost savings to Ohio taxpayers. The first publication in the Journal of Maternal and Child Health demonstrated a \$3.36 short term 5.59 long term return on investment for every dollar placed in the program. This scientifically published report demonstrated that there was a 60% reduction in low birth weight.

In 2018, Buckeye Health Plan conducted a retrospective cohort study of over 3,700 deliveries from 2013-2017 in the Toledo HUB service area. This study identified a 236% return on investment with per member /per month savings for high, medium and low risk members. This doesn't even consider the cost savings to the educational system by having a child born healthy and ready to learn. In addition, the study highlighted that high-risk pregnant women in the Hub's area who did not participate in the Hub's services had a 1.55 times greater likelihood of having an infant that needed Special Nursery Care or Neonatal ICU Services. According to the March of Dimes, the average cost of a NICU admission is \$76,000 with charges exceeding \$280,000 for infants born prior to 32 weeks gestation.

In the HUB model a comprehensive assessment of risk is completed, and each medical, social, or behavioral health risk is tied to a specific nationally standardized Pathway. The Hub is focused on pay for performance. In fact, until an identified risk factor is assessed, and a Pathway is confirmed, payments can't be processed. This accountability is critical. HUBs don't provide the direct intervention or service. Our CHWs identify the risk factors and assure the connection to established prenatal and postpartum care, housing, adult education, medical care for mom and baby, employment and many resources to meet the identified needs.

The latest research supports that if we want real improvements in birth, chronic disease, education or employment outcomes a whole person approach is needed. We can't break people and families into parts and only treat the parts. A significant component of this model is the relationships of the CHWs you are deploying from the community to work with those at greatest risk.

For example, Brenda is a 20-year-old expectant mother who does not have medical care, housing, lacks a high school diploma and is experiencing depression, what are your outcome priorities? Clearly the primary focus is on the birth outcome of the baby, however there are significant risk factors for the infant's survival if the mother can't obtain stable housing, employment, obtain adult education or receive treatment for her depression. No matter what your priority is, if your system of care takes an isolated single item approach to helping her, we most likely will not address or achieve her multiple risk factors that impact

her infant. Let's say we get her housing but has not medical care and is depressed and unemployed. She gets medical care yet remains homeless etc. In remarkable way if we embrace her complexity, assisting her with each of these risks, the evidence demonstrates we are not only more likely to get the healthy baby. The family situation begins to stabilize, she gets her education, employment and parenting education (which has evidence to improve her baby's future education success) and suddenly we are effectively working toward multiple highly beneficial outcomes for health and economic wellness.

The Community Health Workers taught us to look beyond just medical care and the science is proving they are right. Kim works as a CHW from Mansfield that Rep Romanchuk had the opportunity to meet. Kim lives in an at-risk community. She can drive down the street with you in the most struggling part of town and tell you the names of who lives in what house. She recently found a young mother who was using the creamers from Circle K to feed her baby, afraid if she got help someone would take her baby away. Kim enrolled her in the HUB, ensured that she had formula, helped her to sign up for WIC prenatal care and has linked her to education and employment services. Many weekends, you will find Kim in the local grocery store buying formula, with her own money, for a neighbor that ran out or on a holiday weekend ensuring that an infant being discharged from the hospital has the necessary car seat.

Most of the risk factors that must change to improve outcomes are related to behavior changes. When Kim is at a client's home, she can deliver a clear and direct message to the Grandmother and Mother to stop smoking and explain the negative impact the infant. This message has a much more powerful impact to that family than the same request given by me as a physician during a 10 min office visit.

When you support HUBs, you are supporting local regional networks of most often small community-based agencies in neighborhoods that need that economic investment.

Thank you Representative Romanchuk for your many years of leadership and support and Minority Leader West for your support to the Stark County initiatives.

We appreciate you and each member of this committee for your consideration to join the Ohio Commission on Minority Health who has helped us from the very beginning to get this program out to more families, high-risk pregnant women and to our future children so they can have a better chance of being strong and healthy Ohioans when they get here.