

Senate Finance Committee Testimony on Substitute House Bill 166

Linda Eckfeld

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Chairman Dolan, Vice Chair Burke, Ranking Member Sykes and members of the Senate Finance Committee, my name is Linda Eckfeld and I am here to speak today on behalf of perhaps the most vulnerable population in our communities. These are the medically complex children, those who rely on technology and medical expertise for their very lives. I have been working within the Medicaid system for over 30 years caring for these complex children. I was involved in the very early days of what was then the new Medically Fragile Waiver. Those 1st few years were a bumpy road as we work diligently to create Medicaid policies that were specific to the pediatric population.

Over the years there have been many changes to this program, I have endured all of these changes. I have to say that the most tumultuous change occurred when Medicaid went to managed care providers. As we have multiple children on several different managed care plans it has become increasingly difficult to know what will be considered allowable, what will be paid for, what will require prior authorization and so forth. It changes from one company to another and as a parent it makes it difficult when 1 company approves something whether it be a medication or medical equipment and another company will not cover that item or requires prior authorization or multiple hoops to jump through before getting approval. It's mind boggling to me that all of these HMO's are administering Medicaid plans and yet they each seem to operate with the different set of regulations.

Throughout the years I've had an opportunity to work with a variety of home health care companies providing medical necessities for children and it's been my experience that the large national companies were much more challenging to work with. When I have a child who has skin issues I need to be able to use appropriate incontinence supplies versus being told that this is the product we supply and we don't offer any other options. What I have learned is that cutting services will rarely cut costs and more than likely it will increase costs. Education and support will. In this case, if child has reaction to diaper provided it will require skin treatment, ointments, doctor visits, etc. to resolve. The few pennies saved on inferior product will end up costing hundreds of dollars to remedy.

Another example would be when I had ordered ventilator supplies from our large national home care company and when the supplies arrived a week later, they sent the wrong items. Had it not been for the fact that I had another child on the same vent and was able to borrow parts the first child would have ended up in the hospital until the new supplies arrived from

California. This is never an acceptable practice. That is why it concerns me greatly that some managed care plans want to use a one source provider. This will take away my ability to choose a company that's best for my children, and rather than choosing the provider who has the most knowledge, experience, and provides the support to serve my children, I will be at the mercy of the companies as discussed previously. It's especially concerning when I think about new parents who do not yet have the knowledge or expertise to recognize when situations could cause potential risk or harm to their child.

Some of the larger companies lack the customer service that is important to families, especially new parents. It takes a lot of time and education to help them acquire skills and knowledge necessary to keep their children safe and at home. When this type of support is missing the children often end up going into the hospital because the parents are not equipped to handle these situations as they arise. They have to be able to contact home equipment companies that have a knowledgeable support team available 24 hours a day, 7 days a week to answer questions, troubleshoot, encourage and comfort new parents. Without this level of ***local*** support families take their children to the hospital and give up out of fear. I know this to be true because some of these children live in my home.

In conclusion, my testimony today is not based on hearsay but personal experience over the last 30 years. Unfortunately, I would say that current Medicaid managed care companies seem to follow their own guidelines which is not always in the best interest of Ohioans. This makes a complex and complicated scenario that risks the health and well being of the medically fragile population. It creates the risk of returning to bygone days when these precious children lived their entire lives in medical institutions. I urge this committee to support language to provide Ohioans choice with DME providers and not allow sole source contracting.

Respectfully submitted,

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