

**Michael Dalton, Vice President, Executive Projects
The MetroHealth System
ResultsOHIO Proponent Testimony
HB 166, Operating Budget
Senate Finance Committee
May 23, 2019**

Chairman Dolan, Vice Chair Burke, Ranking Member Sykes and members of the Senate Finance Committee, my name is Michael Dalton and I serve as a Vice President at The MetroHealth System. Thank you for the opportunity to present testimony before you today in support of Treasurer Sprague's ResultsOHIO initiative, which was introduced as legislation by both Senator Wilson and Representative Manning and inserted in HB 166. This program creates an infrastructure within the Treasurer's office to pursue a pay-for-success approach to tackle the most pressing social and public health challenges facing Ohio.

The ResultsOHIO program protects taxpayer dollars by ensuring Ohio's resources are invested in pursuing positive outcomes. Private entities enlisted to address these important public policy challenges will bear the upfront costs of services provided during the duration of the project. Then, if the project is successful, public dollars reserved in the funds will be used to fulfill contractually obligated reimbursements of project costs only if the project has met the measurements for success that are agreed to prior to the start of the project. This process is notable in that there is transparency for all parties throughout the process in the form of expected outcomes, results and investment performance.

MetroHealth is supportive of this initiative and believe it is something that we will utilize to successfully address some of Ohio's most critical issues. As one of the largest and most comprehensive healthcare system in Northeast Ohio, we have a track record of tackling some of Ohio's biggest challenges and showing successful results. One such challenge is preterm delivery and infant mortality. Roughly one in six of the 3,000 babies we deliver each year is preterm and preterm delivery is the leading contributor to infant mortality. Racial, economic, educational and behavioral health disparities play a significant role in this outcome. To that end, African American babies in Cuyahoga County are 3.5 times more likely to die than white babies. To help address this crisis, MetroHealth chose to implement the nationally recognized, Nurse-Family Partnership program in 2016 to support a strong and healthy beginning for Northeast Ohio's babies and families.

Nurse-Family Partnership (NFP) is an evidence-based, community health program that serves low-income pregnant women with their first child. Each new mom is partnered with a registered nurse early in her pregnancy and receives ongoing home visits until the child reaches two years of age. NFP focuses on first-time mothers because it is during the first pregnancy when the best chance exists to promote and teach positive health and



development behaviors between a mother and her baby. NFP program goals are as follows:

- (1) Improve pregnancy outcomes by helping women engage in good preventive health practices;
- (2) Improve child health and development by helping parents provide responsible and competent care; and
- (3) Improve the economic self-sufficiency of the family by helping parents develop a vision for their own future, plan future pregnancies, continue their education and find work.

MetroHealth launched the NFP program for first-time mothers in OB/Gyn practices that serve some of Cuyahoga County's highest risk patients – health centers in neighborhoods that are home to a significant low-income minority population, have a high rate of births to teenage moms, have a high percent of low birth weight babies, and a low percent of women receiving prenatal care in the first trimester. Our program currently has 233 women enrolled and 167 babies born have been born. We are proud of the success of this program and the positive impact it has had on its babies and moms.

The ResultsOhio program and its pay-for-success framework would be a significant tool that MetroHealth could use to demonstrate the model's applicability to second-time mothers, where such an expansion has not been tested but is clearly needed as the average age of moms in NFP in Ohio is 18. The NFP program serves an important role in addressing infant mortality and assisting mothers and babies at a critical time in their child's development and will set these children up for future success.

I urge the Senate Finance Committee to maintain ResultsOHIO in the state budget bill. Thank you.