



Testimony

of

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Chairman Romanchuk, Vice Chair Huffman and Ranking Member Liston, members of the committee, thank you for allowing me to testify today on Am. Sub. H.B. 96. My name is Pamela E. Zipperer-Davis, and I am the President and CEO of CareStar.

CareStar is proudly headquartered in Cincinnati, Ohio in the State of Ohio, with three other Ohio locations. CareStar has provided conflict-free Case Management to Ohioans since 1988, ensuring objective, high-quality care coordination, meeting Individual's needs, while diligently safeguarding fiscal responsibility. Our work goes beyond administrative oversight. Serving over 21,000 Ohioans annually, we have a proven track record of managing complex clinical, behavioral health, developmental disabilities and social needs across diverse populations. We improve lives, empower Individuals to thrive in their communities and support sustainable Medicaid practices, all while lowering institutional admissions and stays. We have maintained a satisfaction rating of over 96% from Individuals we have served throughout 2024, and we plan to continue this positive trend for years to come. As you work to ensure Ohio's Medicaid Programs remain cost-effective, while delivering vital services to the State's most vulnerable residents, we urge you to consider the profound impact of the Ohio Home Care (OHC) Waiver Program and the Specialized Recovery Services (SRS) Program. These programs, which have been instrumental in providing essential care to individuals with severe and complex medical conditions and disabilities, exemplify the cost advantages of Home and Community-Based Services over institutional settings, and therefore must be maintained, while Medicaid Budget Reductions are recommended and considered.

Since its inception, the OHC Waiver Program, through the Ohio Department of Medicaid, has demonstrated remarkable success in helping individuals transition from institutional settings to community living, enhancing their quality of life, while reducing costs to the State and healthcare systems. Likewise, the Specialized Recovery Services (SRS) Program has proven its effectiveness in stabilizing Individuals with serious mental health and chronic conditions by ensuring access to necessary services.

The average annual cost of providing institutional care for an individual is \$94,900, whereas the average annual cost of Home and Community-Based Care, such as under the OHC and SRS Programs, is less than half of that (\$44,208), for a total savings of \$50,692 per year per individual. Further, CareStar is the market leader in transitioning Individuals from institutional care to community care, achieving an annual estimated cost savings of \$24 million in 2024 with a 99.6% success of maintaining individuals in the community, and a rate of 99+% for children's access to primary care. Please see Figure 1 below demonstrating these cost savings.

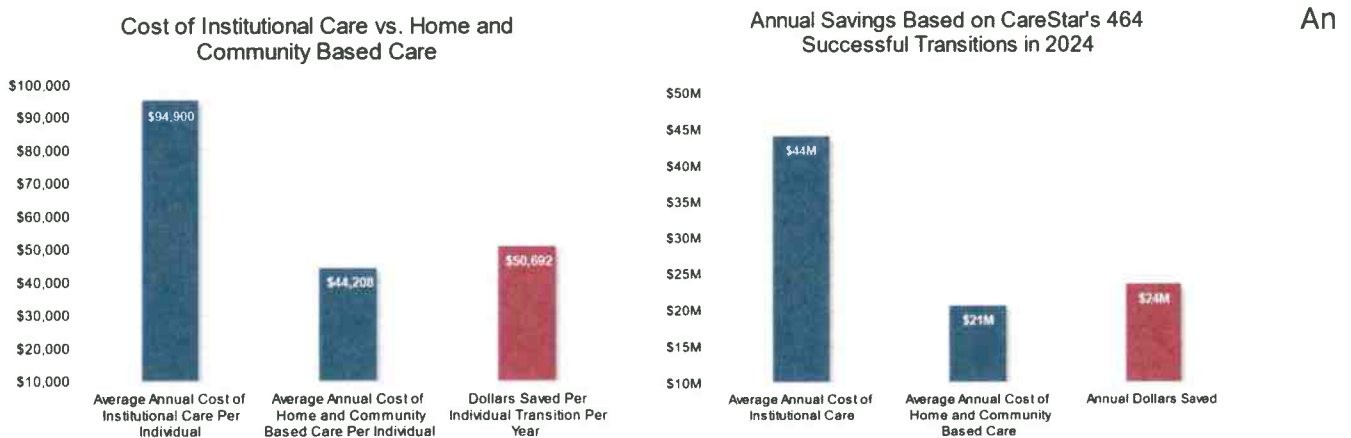


Figure 1. Cost savings from home and community-based services.

example of our ability to contain program costs can be seen with just one of the individuals we currently serve, "Mr. H." After enrolling in the OHC Program, Mr. H required a high level of nursing support, approximately 112 hours per week. The typical cost for this level of nursing care is \$20,301 per month or \$243,615/annually. Our Case Manager, through skilled interviewing and assessment, determined Mr. H had access to nursing through a private insurance policy. The CM partnered with Mr. H, advocating for coverage from the third-party insurer. The insurer approved coverage for most of his necessary care, making the Waiver cost for his services \$814/month and the Medicaid cost \$2,332/month. Just this one case represents a \$205,860 (84.5%) reduction in potential Medicaid healthcare expenses. If not for the coordinated care provided through the Home Care Waiver Program, these types of savings would not be realized.

Delivering measurable outcomes, such as the one for Mr. H, as well as many other Ohioans on Department of Medicaid funded Programs, has been a source of pride for CareStar. We have greatly impacted countless lives and have improved Ohio communities for many years. CareStar, through a continued partnership with the State of Ohio, can continue and increase its impact far into the future. Please see Figure 2 below demonstrating CareStar's vast array of Quality Metrics and the outcomes delivered to Ohioans receiving services.

CareStar Quality Metrics	Q4, 2024	Q1, 2025
Patient Satisfaction	95.9%	96.4%
Annual Assessments Completed in Prescribed Timeframe	97.5%	98.3%
Case Management Initial Contact completed in Prescribed Timeframe	98.1%	98.4%
Rate of Maintaining Individuals in the Community	99.7%	99.6%
Rate of unplanned Hospital Readmissions for <u>CHF</u>	13.8%	10.4%
Rate of unplanned Hospital Readmissions for <u>COPD</u>	11.8%	15.0%
Rate of follow-up visit, within 30 days, post hospitalization for a Mental Illness Diagnosis: Ages 18+	51.6%	54.8%
Rate of Comprehensive Diabetes Hemoglobin A1c Poor Control: > 9.0%	20.3%	30.0%
Rate of Children's Access to Primary Care Practitioners	99.2%	99.9%
Adults 18-75 years of age with diabetes that had an Eye Exam annually.	54.3%	61.3%
Rate of adult acute, behavioral health, inpatient and observation stays followed by an unplanned acute or behavioral health readmission for any diagnosis within 30 days after discharge (Plan All-Cause Readmissions).	12.9%	11.8%

Figure 2. CareStar Quality Metrics serving vulnerable populations.

Beyond our direct service impact, CareStar is an integral part of Ohio's workforce, employing professionals in all 88 Counties, maintaining physical offices statewide, and strengthening local economies.

Our employees are Ohio taxpayers, and like all residents, we share the frustration of witnessing fraud, waste, and abuse. We are actively involved with the Ohio Attorney General's Office in investigating, prosecuting and eradicating fraud, waste and abuse. We wholeheartedly support responsible Medicaid reform to eliminate inefficiencies, while ensuring budget reductions do not inadvertently harm vulnerable individuals who rely on these programs for survival, dignity and quality of life. We urge you to think strategically as you consider the Medicaid budget and preserve programs such as the Home Care Waiver. Funding for these Programs saves money by meeting the needs of Individuals without resorting to institutional care.

CareStar is passionate about caring for these Individuals and passionate about our partnership with the State of Ohio, and all the Agencies with which we have the great fortune to work. We welcome our continued partnership with the State Agencies overseeing Medicaid Services, sharing our expertise to build a Medicaid System which is both fiscally responsible and available for all Ohioans who need it most.

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