

## Joseph Tagliaferro, III, DO, FACEP Assistant Professor of Emergency Medicine, Case Western Reserve University Associate Director of Clinical Operations, Department of Emergency Medicine The MetroHealth System H.B. 270 – Proponent Testimony House Insurance Committee

Chair Brinkman, Vice Chair Lampton, and Ranking Member Miranda, thank you for the opportunity to testify in support of House Bill 270, a bill that would strengthen the definition of emergency services and update payer responsibilities for coverage and reimbursement of such services. The bill would add protections for vulnerable patients and reduce uncompensated care costs for safety-net health systems in Ohio.

My name is Joseph Tagliaferro and I am an Emergency Medicine Physician at MetroHealth in Cleveland. We are the safety-net health system for Cuyahoga County, caring for the most underresourced members of our community. MetroHealth's more than 7,800 employees provide care at four hospitals, four emergency departments, more than 20 health centers and 40 additional sites throughout Northeast Ohio. In the past year, MetroHealth has served 300,000 patients at more than 1.4 million visits, with 40% of outpatient visits for primary care, while delivering over 2,500 babies. Seventy-five percent of our patients are uninsured or covered by Medicare or Medicaid and we provide \$231 million in Community Benefit.

House Bill 270 would make important changes to the prudent layperson standards that protect patients in vulnerable situations. The bill updates the definition of emergency medical conditions and emergency services. Many patients visit the emergency department because they believe they are in an emergent situation. The distinction between different levels of emergency care is not something the average patient thinks about when faced with an immediate crisis. Pregnant women or individuals with a mental illness are often disproportionately impacted by current rules about what is or is not an emergency event. The bill protects patients from facing significant out-of-pocket expenses in situations where a third party rules that an immediate crisis doesn't fit neatly into the definition of emergency services. Such changes would also protect safety-net health systems, like MetroHealth, from additional uncompensated care costs.

Additionally, House Bill 270 would create standards and efficiencies when payers review reimbursement of emergency services for medical necessity. To be clear – we are not advocating for the removal of the medical necessity standard. However, the bill requires that professionals who are doing such reviews have a background and training in emergency medicine. The bill also creates a fair and predictable process for all payors in this market. Right now, we must navigate unclear processes for each payor, each of whom has its own internal clinical criteria and rarely overturns its original decisions. The process and guardrails proposed in the bill would reduce administrative costs for payors and uncompensated care for providers.



MetroHealth continues to invest in care alternatives to the emergency department. We have multiple express care locations in Cuyahoga County with extended hours — these sites expand our primary care system. Nurse hotlines, and telehealth options are also available to our patients and have been successful in keeping patients out of the hospital setting. We also participate in multiple value-based payment arrangements, which act as strong incentives for keeping the total cost of care low, while improving quality of care and population health. We will continue to invest in primary care transformation, so all our patients have access to a regular source of care that is affordable, convenient and patient-centric.

Mr. Chairman, members of the Committee, thank you for the opportunity to speak to this important legislation.



## **About The MetroHealth System**

The MetroHealth System is redefining health care by going beyond medical treatment to improve the foundations of community health and well-being: affordable housing, a cleaner environment, economic opportunity and access to fresh food, convenient transportation, legal help and other services. The system strives to become as good at preventing disease as it is at treating it.

The system's more than 600 doctors, 1,700 nurses and 7,800 employees go to work each day with a mission of service, to their patients and to the community. As Cuyahoga County's safety net health system, MetroHealth plays an essential role in the region, caring for anyone and everyone, regardless of an ability to pay.

Founded in 1837, MetroHealth operates four hospitals, four emergency departments and more than 20 health centers and 40 additional sites throughout Cuyahoga County. The system serves more than 300,000 patients, two-thirds of whom are uninsured or covered by Medicare or Medicaid.

MetroHealth is home to Cuyahoga County's most experienced Level I Adult Trauma Center, verified since 1992, and Ohio's only adult and pediatric trauma and burn center.

As an academic medical center, MetroHealth is committed to research and to teaching and training tomorrow's caregivers. Each active staff physician holds a faculty appointment at Case Western Reserve University School of Medicine. Its main campus hospital houses the Cleveland Metropolitan School District's Lincoln-West School of Science & Health, the only high school in America located inside a hospital.

Knowing that good health is about much more than good medical care, MetroHealth has launched the Institute for H.O.P.E.™ (Health, Opportunity, Partnership, Empowerment), which uses a coordinated, collaborative and strategic approach to help patients with non-medical needs such as healthy food, stable housing and job training.