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**HB352 ACEs Study Commission Testimony**  
**Mark Grippi, Market President, CEO, AmeriHealth Caritas Ohio**  
**April 23, 2024**

Chairwoman Pavliga, Vice Chairwoman White, and Ranking Member Brewer, thank you for the opportunity to provide written testimony to HB352 ACEs Study Commission (Carruthers, Baker). My name is Mark Grippi, and I am the Market President and CEO of AmeriHealth Caritas Ohio, one of the Medicaid managed care organizations (MCOs) for the Next Generation program. I would like to thank you all for the opportunity to provide written testimony on this important topic.

AmeriHealth Caritas Family of Companies started almost 40 years ago when the staff at the Sisters of Mercy hospital in West Philadelphia noticed that many of its Medicaid patients were using the emergency room for their primary care. By working with local providers, advocates, and civic leaders, AmeriHealth Caritas created outreach programs that improved health care access and education for our members. We now operate in 13 states and the District of Columbia, serve approximately 5 million members, and employ more than 9,000 associates. Our integrated healthcare approach started more than 20 years ago and coordinates services across the care continuum, investing in programming aimed at reducing disparities and addressing root causes of poverty. Each of our markets provides value-add benefits that address economic and social disparities and are designed to help our members find a pathway to prosperity and independence.

Adverse childhood experiences (ACEs) are prevalent, disproportionately affect certain populations and have lifelong impacts to health and employment. ACEs are traumatic events and life situations experienced by children that fall into three primary categories which are: abuse, neglect, and household dysfunction.<sup>1</sup> It is estimated that 60-80% of adults in the United States have been exposed to at least one ACE and 1 in 6 U.S. adults said that they had experienced four or more ACEs.<sup>3</sup> According to the Health Policy Institute of Ohio (HPIO), nearly two-thirds of Ohioans have been exposed to ACEs. Ohioans of color, Ohioans with low incomes, disabilities and/or who are residents of urban designated counties and Appalachian designated counties are more likely to experience multiple ACEs. Children who experience ACEs can have lasting effects well into adulthood, affecting life opportunities such as education, job potential, and ability to form healthy and stable relationships.<sup>4,5</sup>

Ohio Medicaid cares for 1.3 million children ages 0-22 (CY23). One of the main focuses and greatest opportunities explained by Ohio Medicaid, are investing in prevention efforts and taking a population health approach. In the Joint Medicaid Oversight Committee (JMOC) hearing in March of 2024, ODM shared that screening for social determinants of health (SDOH) and ACEs are a part of the prevention strategy.<sup>8</sup> Medicaid Managed Care Organizations (MCOs)

are an important component within the Medicaid system that can help address ACEs. MCOs can drive positive outcomes for the betterment of children's health and can help to set a stronger foundation for a lifetime of wellness. MCOs take a population health strategy approach to member care, which includes addressing social factors/ drivers such as transportation and food security and can support individuals' health and wellness from childhood into adulthood. MCOs provide linkages with services and supports in areas such as: care coordination and behavioral health supports for multi system youth (OhioRISE).

AmeriHealth Caritas Ohio supports the creation of the ACEs Study Commission in Ohio and supports Amendment Number 1867-1, which would include a designee from a Medicaid Managed Care Organization (MCO).

Thank you for the opportunity to provide written testimony. AmeriHealth Caritas Ohio stands committed to helping all Ohioans go beyond healthcare and reach their American Dream.

Sincerely,



Mark Grippi

CEO and Market President, AmeriHealth Caritas Ohio

1. Centers for Disease Control and Prevention, 2021. <https://www.cdc.gov/violenceprevention/aces/about.html>
2. Multiple sources:
  - a. [https://www.ruralhealthinfo.org/toolkits/services-integration/3/considerations-for-child-programs#:~:text=The%20Adverse%20Childhood%20Experiences%20\(ACE,have%20four%20or%20more%20ACEs.](https://www.ruralhealthinfo.org/toolkits/services-integration/3/considerations-for-child-programs#:~:text=The%20Adverse%20Childhood%20Experiences%20(ACE,have%20four%20or%20more%20ACEs.)
  - b. <https://www.cdc.gov/violenceprevention/aces/fastfact.html>
  - c. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10503911/#:~:text=The%20pooled%20prevalence%20of%20the,for%20four%20or%20more%20ACEs.>
3. Centers for Disease Control and Prevention, 2019. <https://www.cdc.gov/vitalsigns/aces/index.html#:~:text=1%20in%206%20adults%20experienced,by%20as%20much%20as%2044%25.>
4. Adverse Childhood Experiences and Adult Mental Health Outcome, NIH, 2024. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10918580/#:~:text=Studies%20have%20consistently%20reported%20associations%20C%20anxiety%20and%20substance%20abuse>
5. Centers for Disease control and Prevention, 2023. <https://www.cdc.gov/violenceprevention/aces/fastfact.html#:~:text=Toxic%20stress%20from%20ACEs%20can,forming%20healthy%20and%20stable%20relationships>
6. Adverse Childhood Experiences (ACEs): A strategic approach to prevent ACEs in Ohio, Health Policy Institute of Ohio, 2021. <https://www.healthpolicyohio.org/our-work/facts-figures/adverse-childhood-experiences-aces>
7. Strategies to prevent Adverse Childhood Experiences (ACEs) in Ohio: Ensuring a strong start for children and strengthening economic supports for families, Health Policy Institute of Ohio, 2021. <https://www.healthpolicyohio.org/our-work/facts-figures/adverse-childhood-experiences-aces>
8. JMOC, March 2024. <https://www.jmoc.state.oh.us/assets/meetings/ODM-EPSTandPRS.JMOC.March2024.pdf>