

Executive, Legislative & Regulatory  
**2018 AGENDA**



*Dear Policy Makers and Community Stakeholders,*

In the midst of tumultuous times, we bring you our 2018 State Legislative Agenda. We recognize how important our policymakers are to the communities we serve, our employees and the financial stability of our organization, and reaching you with our message is a top priority for us.

Most of you are already familiar with our organization, but I want to explain how UnityPoint Health makes an impact to the communities you represent—in terms of the economy, tax revenue and community benefit. We employ more than 30,000 team members and create over 20,000 types of other jobs. Through direct, indirect and construction dollars, we create an economic impact of \$7 billion dollars on a yearly basis. Our total tax revenue is around \$820 million between state and federal taxes paid. And, our 18 hospitals, 15 community network hospitals, 4 colleges and over 400 outpatient sites serve nearly 800,000 patients annually. In each of our markets, over 50 percent of those visits are made up of Medicaid and Medicare patients.

A lot of work needs to be done in health care in 2018. Our communities need access to high-quality, affordable health care options. Our agenda items are proactive and bold, and represent changes in our laws that are needed. The individual insurance market, the Medicaid managed care system, the mental health and Opioid crisis — none of these problems will fix themselves — so our agenda sets forth changes that will make progress on these issues. Making the health care system work for our communities is our responsibility... and yours. Thank you for your service, and we look forward to our work in the year ahead.



**Kevin Vermeer**  
Chief Executive Officer, UnityPoint Health



## Private Insurance Reform

### Individual Insurance Market

In 2018, an estimated 18,000-22,000 Iowans will be left without an affordable insurance offering through the Health Insurance Marketplace and will likely become uninsured. These Iowans have previously purchased health insurance through the Health Insurance Marketplace and have incomes that are at or above 400 percent of the Federal Poverty Level (FPL), making them ineligible to receive cost-sharing subsidies (CSR) or advance premium tax credits (APTC). As premium increases have risen exponentially in recent years and the Iowa market is now left with a single insurer offering insurance plans on the Health Insurance Marketplace, it is clear that alternative solutions must be implemented immediately to ensure Iowans have access to health care services.

To ensure the needs of these Iowans are met in 2018 and beyond, UnityPoint Health is supportive of market stabilization pilots that will allow such individuals access to affordable insurance while more permanent solutions can be developed. Further, UnityPoint Health supports federal and state regulatory changes that would allow small employers to come together through their association to offer affordable health care coverage to employees of members.

### Telehealth Payment Parity

Many states, including the states served by UnityPoint Health, provide payment parity for medical services offered to Medicaid patients through telehealth. Medicare payment policy also allows for providers to be paid for certain telehealth services. **Recognizing the need for alignment of payment policies across payors, 36 states and the District of Columbia have parity laws that cover private insurers and reimbursement to telehealth services.** Allowing providers to bill for telehealth services ensures patients' access to essential and specialized services, avoids the cost and burden of traveling and

lowers costs for federal and state governments. The patient convenience and access being realized by Medicaid and Medicare patients should be available to commercially insured patients.

**UnityPoint Health requests that Iowa and Wisconsin extend payment parity for telehealth services to private insurance companies to promote increased access to patients we serve.**

### All-Payor Claims Databases

States are facing increasing health care challenges, from variable quality of care to ever-increasing costs. Comprehensive information on disease incidence, treatment costs and health outcomes is essential to inform and evaluate state health policies and population health initiatives, but it is not readily available. **As of October 2017, 19 states have adopted legislation that requires that all-payor claims databases collect and make available unidentified patient data to government and providers through a centralized database.** For example, Minnesota has enacted a system that securely collects medical claims, pharmacy claims and eligibility and provider files from all private and public payors. The system enables data analytics to be performed by authorized users that can show health and cost trends by location of service, variations in service lines, clinical quality performance, information on chronic health conditions and cost transparency.

**UnityPoint Health supports the development of all-payor claims databases that would collect information from all private and public payors to promote transparency and increase the quality of health care provided to the patients we serve.**



## Behavioral Health

UnityPoint Health continues to see an increased need for behavioral health care and substance use disorder services in the communities we serve. From our emergency rooms to our outpatient clinics, it is an important aspect of our mission to ensure the patients we serve have access to the full continuum of resources they require. UnityPoint Health is proud to be a leading provider in behavioral health services by investing in infrastructure and personnel to help meet the acute, intermediate and long-term needs of patients who have behavioral health and substance use disorder conditions.

UnityPoint Health is the largest provider of acute care behavioral health services in the state of Iowa, with 210 licensed acute inpatient psychiatric beds located throughout the state, along with an additional 140 licensed beds located in Peoria, Illinois and the Illinois side of the Quad Cities. In addition to serving acute behavioral health care needs, UnityPoint Health is positioned to create a robust, integrated continuum of community-based mental health and substance abuse prevention, intervention and treatment services. Through formal affiliations with our five Community Mental Health Centers in the Cedar Rapids, Des Moines, Fort Dodge, Quad Cities and Waterloo regions and embedding behavioral health therapists in 65 UnityPoint Clinic primary care offices, UnityPoint Health is committed to offering solutions that meet the needs of our patients by providing access to the right care at the right place at the right time.

### Increase Access for Behavioral Health Patients with Long-Term Care Needs

Building a robust continuum of care for patients with behavioral health needs is imperative to ensuring proper access to all patients. The continuum of care encompasses every level of care, including outpatient care, crisis services, subacute care, home health and hospital care. More resources must be directed to these areas to help build an infrastructure where all varying acuity levels can be served. Investment in subacute care will help with the flow of patients in and out of hospital beds. Oftentimes, patients stay on an acute inpatient psychiatric unit well after their acute episode has ended because there is no “better” place with available bed or treatment space to transfer them — particularly those patients with complex, long-term care needs or those with a history of aggressive or assaultive behavior that cannot be treated in short-term, acute inpatient hospital settings.

A full continuum of care includes a sufficient number of beds to meet the acute, intermediate and long-term needs of those individuals with mental illness who require more intense or specialized services than are available in the community.

**UnityPoint Health requests restoration of additional inpatient beds in the state of Iowa’s two existing mental health institutes to create additional access to the most appropriate level of care for Iowans with complex, long-term behavioral health care needs that cannot be treated in community-based settings.**



## Address the Growing Opioid Epidemic

As national attention continues to focus on the prescription opioid and heroin epidemic, UnityPoint Health has taken a proactive approach to ensure our physicians, providers and staff have the tools and resources needed to combat this growing crisis.

UnityPoint Health has implemented a comprehensive, evidence-based platform for our physicians, providers and staff focused on responsible opioid prescribing, which incorporates the most recent Centers for Disease Control and Prevention prescribing guidelines. In addition, educational materials and trainings are available to our independent primary and specialty care provider organization partners participating in our accountable care organization, UnityPoint Accountable Care. These educational strategies focus on the use of non-medication options for treatment of pain as a first-line or routine therapy option for chronic pain, appropriate use of opioids for the treatment, and processes and tools for assessing, monitoring and evaluating patients with pain management needs. Additionally, select UnityPoint Health hospital locations are involved in a national pilot program through the Centers for Medicare & Medicaid Services' Hospital Improvement and Innovation Network to focus on appropriate and safe post-operative opioid pain management.

To enhance our focus on combating controlled substance abuse, new additions to our Epic electronic health record will be implemented in 2018 to assist our physicians and providers in capturing, assessing and monitoring patients. "Best practice alerts" in the health record will streamline the process to ensure that physicians and providers have easier access to their state's respective Prescription Monitoring Program and house the Pain Management Agreement between the patient and the physician or provider, among others. In addition, UnityPoint Health continues to implement a peer-to-peer auditing process to ensure standards of care are met.

**UnityPoint Health supports legislative actions to combat inappropriate opioid use and reduce regulatory burdens on physicians and providers who provide care for patients struggling with opioid and heroin addiction. UnityPoint Health supports the Iowa Board of Pharmacy's legislation to improve the Iowa Prescription Monitoring Program by requiring daily pharmacy reporting, proactive notifications and prescriber registration.**



A recent report by the *Treatment Advocacy Center* recommends a minimum of 50 public psychiatric beds per 100,000 people to provide minimally adequate treatment for individuals with severe mental illness. **Iowa is ranked last (51st) in the country, with just two public psychiatric beds per 100,000 people.**



## Medicaid

Medicaid programs throughout the country are facing significant regulatory and financial uncertainty that make it challenging for states and providers to prepare for the future environment.

In 2016, the State of Iowa contracted with three Managed Care Organizations (MCOs): Amerigroup Iowa, AmeriHealth Caritas Iowa and UnitedHealthcare Plan of the River Valley. These MCOs provided Medicaid beneficiaries with access to comprehensive medical and behavioral health services through the many provider and community organizations they contract with, including UnityPoint Health. As of December 1, 2017, AmeriHealth Caritas Iowa is no longer participating as an MCO in Iowa. All MCOs claim to have lost money in 2016 and 2017, and claim that the Medicaid rates paid by the State of Iowa are not actuarially sound.

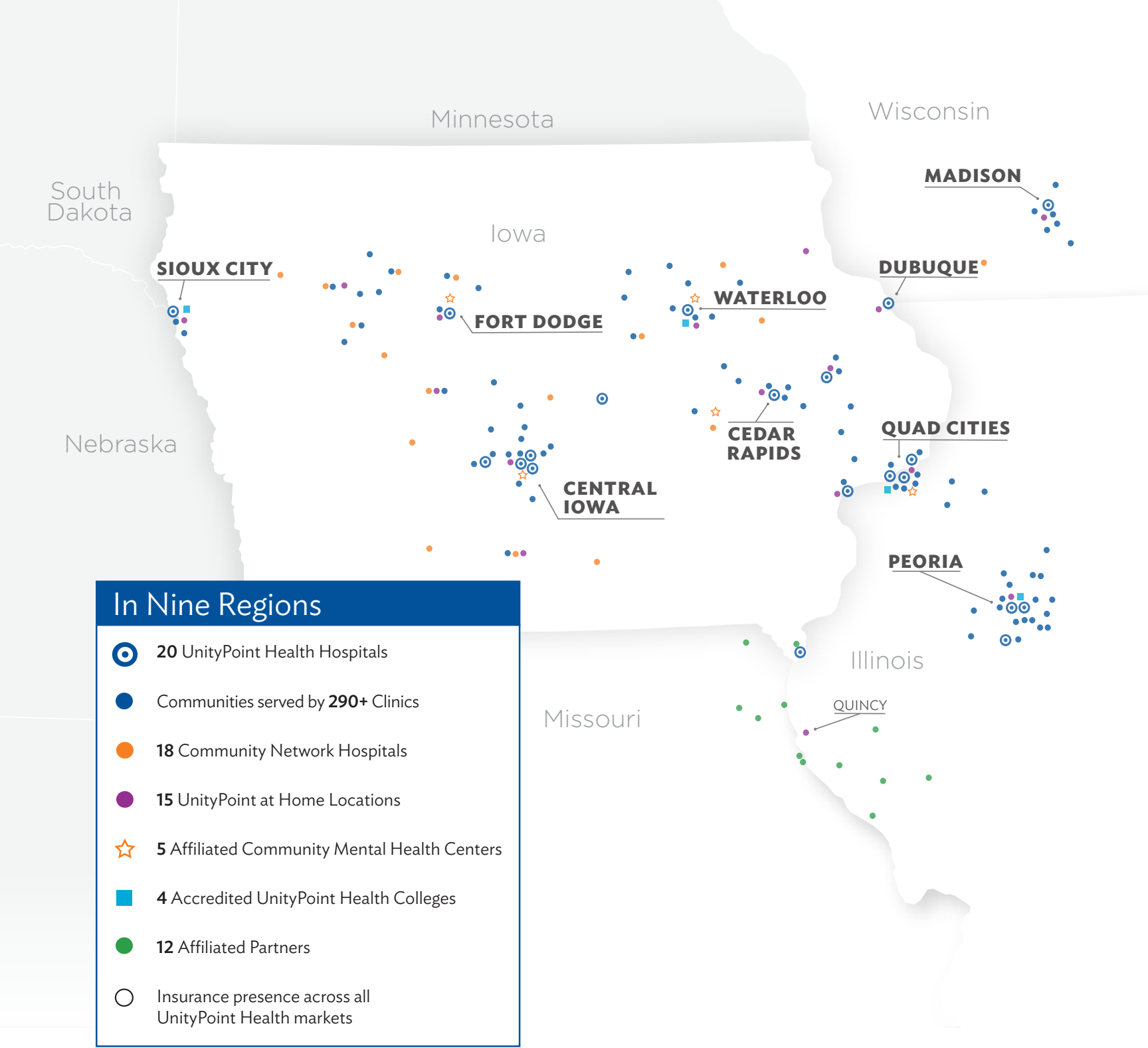
The shared losses on Medicaid business for UnityPoint Health was estimated at \$80 million in 2016, and is projected to be the same for 2017. **The current environment in Iowa for Medicaid business is not sustainable.**

**UnityPoint Health supports alternative approaches to financing Medicaid in Iowa that will improve the delivery of care to the Medicaid population while lowering costs. The preferred model would be a Provider Risk-Based model in which providers contract directly with the State to assume responsibility for Medicaid beneficiaries attributed to primary care providers for each health system.** It is also possible for the MCOs to delegate a number of functions to providers under their own risk-sharing arrangement with the State. The functions most frequently delegated by MCOs to providers are credentialing, utilization review, provider selection, provider payment and provider services. **UnityPoint Health advocates for these types of delegation arrangements to be mandatory in the state of Iowa.**







## Workforce

**Forgivable Loan and Graduate Medical Education (GME)** – With over 55 percent of our Iowa physicians at age 55 or older, it is necessary to ensure an adequate number of new physicians entering health care in Iowa. Therefore, UnityPoint Health supports the multiple Iowa Forgivable Loan programs and GME funding from the State of Iowa to address the great need for additional residency positions for those fields in greatest demand, such as psychiatry and family practice.





### In Nine Regions

-  20 UnityPoint Health Hospitals
-  Communities served by 290+ Clinics
-  18 Community Network Hospitals
-  15 UnityPoint at Home Locations
-  5 Affiliated Community Mental Health Centers
-  4 Accredited UnityPoint Health Colleges
-  12 Affiliated Partners
-  Insurance presence across all UnityPoint Health markets

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