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Dedicated to promoting the highest quality care for people with mental disorders and to serving the professional needs of Ohio's psychiatric physicians.

March 9, 2018

Barbara Sears, Director Ohio Department of Medicaid Bureau of Health Plan Policy Healthy Ohio Program 1115 Demonstration Waiver 50 W. Town St., 5th Floor Columbus, OH 43215

Dear Director Sears:

On behalf of the more than one thousand physicians, specializing in psychiatry, who are members of the Ohio Psychiatric Physicians Association (OPPA), we write to express our grave concern and opposition to the proposed "Work Requirement and Community Engagement 1115 Waiver." This waiver would impose work requirements on Ohioans who have enrolled in healthcare coverage through Medicaid Expansion. These rules, if enacted, would impose burdens on patients and practitioners alike, and would lead to an estimated 36,000 individuals losing access to health care coverage.

As psychiatric physicians, we work with Ohioans who appear to be "able-bodied" but have difficulty maintaining consistent employment at the level that would be required of them through the 1115 Waiver, due to mental illness or addiction disorders. Our patients desire work and we support them in their employment efforts as we work with them towards recovery. However, they are discriminated against in hiring practices and when hired, the symptoms of their illnesses often make it difficult for them to perform consistently and predictably in the work environment.

Mental illnesses and addiction disorders are chronic relapsing disorders. Therefore, despite their best efforts, many of our patients do not end up working 20-hours weekly, or they end up moving from job to job with intervening periods of being out of work, even in the volunteer sector. These hard-working Ohioans should not be dis-enrolled from Medicaid because their illnesses predispose them to inconsistent work histories. Without health care coverage their psychiatric care will be disrupted, leading to worsening mental illness, hospitalizations, and psychiatric disability. All of these outcomes would be more costly to the state of Ohio than providing Medicaid coverage to all of our patients, even those who are not fully disabled but have difficulty maintaining employment.

While we realize that an exemption has been created for individuals deemed "Physically or Mentally Unfit" for work, this is undefined in the Waiver. Determination of mental unfitness for work will place an undue burden on practitioners who are already working long hours caring for Ohio's citizens with mental illness and addictions. Additionally, it would discourage people from doing what work they can. The proposal to exempt individuals in addiction programming from the work requirement is also inadequate. It does not make sense to cut individuals off Medicaid while they are in the throes of their addictions, struggling in pre-contemplative stages of their illnesses. This will separate Ohioans suffering with addiction from their providers, and it will impede entry into addiction treatment in the midst of Ohio's opioid epidemic.

In conclusion, the OPPA opposes the current Medicaid 1115 Demonstration Waiver because it is not necessary, administratively burdensome, and problematic for psychiatric patients and their providers. Most enrollees in Medicaid Expansion already work. Efforts to find the small percentage of individuals who cannot do so consistently and dis-enroll them are misguided and have the potential to target, stigmatize, and harm our patients with mental illness and addiction disorders.

We urge the state of Ohio to withdraw this proposal. We know that continuous access to health care coverage improves outcomes for our patients with mental illness and addictions, reduces suffering for our most vulnerable Ohioans, and it saves Ohio money.

Sincerely,

Jamara M. Canybull ND Tamara Campbell, MD

President

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Megan Testa, MD Chair, Government Relations Committee