

September 15, 2021

Jenifer Marsocci
EOHHS Rhode Island

Re: Accountable Entity (AE) Roadmap, EOHHS Rhode Island Proposal

To Whom It May Concern:

The Accountable Entity (AE) Roadmap as presented by the Rhode Island Executive Office of Health and Human Services (RI EOHHS) demonstrates an extensive plan to enhance the delivery system for Medicaid enrollees to achieve desired outcomes within their system of care.

Within the roadmap, RI EOHHS describes thoughtful planning for the Long Term Services and Supports (LTSS) as well as the Behavioral Health (BH) populations of Rhode Island residents. There is, however, a distinct oversight and missing population in adults and children with Intellectual and Developmental Disabilities (I/DD). This population has significant, long term chronic conditions which are not effectively managed.

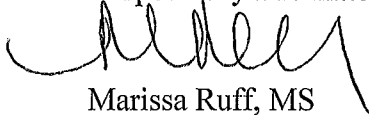
The Department of Behavioral Healthcare, Developmental Disabilities & Hospitals (BHDDH) supports approximately 5,000 adults with I/DD and Rhode Island Kids Count estimates 4,457 children under the age of 19 that receive medical benefits for special health care needs. Adults and Children with I/DD in the State of Rhode Island are overlooked within the AE program. While the overall population may not be as significant in numbers as other populations, their utilization of health care dollars is. For example, in a study conducted by Zubritsky, Abbott, Hirschman, Bowles, Foust and Naylor (2013), health-related quality of life domains have failed to take the particular needs of the IDD population into account. We know that adults with cognitive disabilities have a dramatically higher rate of chronic conditions than adults without disabilities, including being five times more likely to have diabetes than the general population (Reichard & Stolzle, 2011).

Rhode Island adults and children with special health care needs and/or I/DD face increased challenges in accessing appropriate healthcare to meet their complex needs. Rhode Island would benefit from a pilot program that includes this target population as a stand-alone AE to address the continuity of care challenges and obtain aggregate data to spotlight this area of need. The AE program has the opportunity to build on the current understanding of the social determinants of health as well as the knowledge gained from successful IDD medical homes and DSRIC projects nationally. Rhode Island's effort, if IDD is included, could reduce the cost of care for the IDD population while concurrently maintaining them within their communities of choice and reducing the need for expensive, long term care beds or long hospitalizations.

The supported individuals in the State of Rhode Island with Intellectual and Developmental Disabilities and Special Healthcare Needs are in desperate need of evidence-based options to decrease hospital/emergency room visits and to increase the overall quality of care provided in the

State of Rhode Island. Ultimately, their inclusion would reduce the need for expensive residential options while creating a more equitable quality of life.

Respectfully Submitted,

A handwritten signature in black ink, appearing to read 'Marissa Ruff', written in a cursive style.

Marissa Ruff, MS
Interim Vice President, Seven Hills Rhode Island