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## **Written Testimony to the Ohio General Assembly's Joint Medicaid Oversight Committee**

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Chairman Romanchuk, Vice Chairman Patton, Ranking Member West and members of the committee, thank you for the opportunity to submit written testimony on behalf of my company, Community Based Coordination Solutions (CBC Solutions).

As a doctor with more than 20 years of clinical experience in Emergency Medicine, I've seen communities struggle to serve patients who are resistant to typical health care solutions. As a result, they utilize more health care resources and often fail to achieve long-term quality health outcomes, thus driving up costs across the system. After spending years in emergency departments watching the same individuals come to us for care that would have been better managed outside of the ED, I founded CBC Solutions to help achieve a goal shared by all of us working across the health care industry: improve health outcomes and realize cost savings.

### ***How We Work & Who We Serve***

CBC Solutions is a service organization that addresses the needs of complex care patients. We typically contract with a payer and/or at-risk entity (e.g., insurer, health system, managed care organization or health foundation) to support improved service delivery for the cohort of difficult to manage and/or high-cost clients ("high utilizers"). These high utilizers are typically identified by one or more of the following criteria:

- Frequency of ED visits or hospitalizations over a period of time.
- Top 1-2% of cost of members within a community.
- Identified by a community resource as a high utilizer of their services.

Most high utilizers of our health care system have unique medical conditions, often impacted by social circumstances, such as homelessness, substance use disorders, and behavioral health issues, making them resistant to typical care coordination services. While most have some sort of assigned care coordination, standard telephonic or off-site care coordination practices tend to fail with this group. The unique circumstances surrounding these individuals make them best served by staff available within the community, familiar with their unique needs and who have an intimate knowledge of community resources.

### ***Our Innovative Approach & Best Practices***

CBC Solutions successfully helps payers and providers improve health outcomes and control costs among high utilizers by staying focused on a few core priorities:

- We find and engage clients where they are.
- We coordinate with existing community resources.
- We provide 24/7/365 availability to clients.

Our key performance indicators (KPIs) are ED visit reductions, hospital admissions and length of stay reductions, decreased out-patient no-show rates, decreased emergent community resource use (EMS and law enforcement calls), increased patient/provider/resource satisfaction, decreased controlled substance use, decreased homelessness, and lower costs.

To achieve our target KPIs, CBC Solutions employs five best practices as the foundation of our service programs:

1. **We employ live staff in every community served.** This level of intense client resource management does make a significant difference. Within months of enrollment, community resources are used more effectively and crisis events decrease. Staff living within communities being served is *the* main differentiator of a successful high utilization program.
2. **We engage community resources**, such as hospitals, primary care offices, substance use rehabilitation centers, psychiatric care facilities and behavioral health facilities, EMS agencies, jail services, housing authorities, law enforcement agencies, food bank services, etc.
3. **We create individualized care plans** for each client enrolled. When updated regularly, and made readily available to pertinent community resources, customized care plans are an indispensable patient's treatment tool.
4. **We support community IT systems** to promote shared client information in a HIPAA-compliant fashion, all to ensure pertinent health information – including CBCS Care Plans – are made available to providers and community resources in an efficient and timely manner.
5. **We create an Immediate Access Fund**, which empowers staff by providing them with resources to deliver immediate unmet needs for enrollees, such as cell phones, transportation, clothing, food, medications, and housing.

Our unique approach to care navigation is driving improved health outcomes for our program enrollees and delivering significant cost savings to our partners across the country.

### ***Lessons from Another State: High Utilizers of Virginia Program***

To support the Joint Medicaid Oversight Committee in its efforts to identify innovative approaches that are improving health outcomes and reducing costs, below is a summary of a program CBC Solutions has underway with the state of Virginia.

In December 2021, CBC Solutions launched a partnership with the Virginia Department of Behavioral Health and Development Services (DBHDS) establishing the High Utilizers of Virginia

(HUV) program. Since its launch, the DBHDS has approved the program's expansion, from a pilot serving only Northern Virginia residents, to a statewide initiative.

To enroll, individuals must have a recent state psychiatric hospital admission and are then referred to the HUV program where they may opt into services. The HUV program seeks to:

- Improve care of enrollees.
- Decrease duplication of care efforts across the healthcare community.
- Reduce mental health admissions of enrollees.
- Reduce general hospital admissions of enrollees.
- Reduce ED visits of enrollees.
- Reduce cost of care.

The HUV program emphasizes in-person engagement with individuals at time of enrollment, as well as close engagement and coordination with local resources. Our CBC Solutions team provides 24/7/365 program access for program enrollees, including crisis availability. As we develop customized care plans for each enrollee, we share that data with providers and our team follows up with enrollees after each provider encounter.

**Since the HUV program's launch<sup>1</sup>, its 54 enrollees have demonstrated:**

- **97% reduction in state psychiatric hospital admissions.**
- **82% reduction in state psychiatric hospital admit days.**
- **31% reduction in ED visits.**
- **\$2.96M annual cost savings (based on admission and ED visit reductions).**
  - **~\$73,000 savings per enrollee per year.**
- **2,589 unique contacts with, or on behalf of, clients and referrals.**

Our work in Virginia is just one example of a successful, innovative partnership that is improving health outcomes while reducing costs.

### ***Thank You***

Thank you for allowing me to share CBC Solutions' story and our successes realized in another state. We hope the committee finds this information useful as you seek to achieve better health outcomes for the roughly 3 million Ohioans who rely on Medicaid, while also supporting public policies that aim to control costs for Ohio taxpayers.

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<sup>1</sup> All data December 2021 through November 2022.