



ALLIANCE OF HEALTH INSURERS, U.A.
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Anthem Blue Cross and Blue Shield in Wisconsin
Delta Dental of Wisconsin, Inc.
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April 25, 2016, statement from R.J. Pirlot, Executive Director of the Alliance of Health Insurers, regarding the Department of Health Services' concept paper outlining the proposed creation of a new integrated care and service model, Family Care/IRIS 2.0:

"The Alliance of Health Insurers applauds the Department of Health Services for the stakeholder engagement and effort that went into the Family Care/IRIS 2.0 concept paper. We urge the Joint Committee on Finance to vote before the end of May to approve the concept paper as submitted by the department. The sooner the committee acts, the sooner reforms may be implemented, and the sooner both service recipients and Wisconsin taxpayers will reap the benefits of these needed, person-centered reforms."



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To: Co-Chairpersons Alberta Darling and John Nygren
Members, Joint Committee on Finance
From: R.J. Pirlot, Executive Director
Subject: **Support for Proposed Family Care/IRIS 2.0 Reforms**
Date: April 25, 2016

The Alliance of Health Insurers respectfully urges the Joint Committee on Finance vote before the end of May to approve the Department of Health Services' concept paper outlining the proposed creation of a new integrated care and service model, Family Care/IRIS 2.0.

As the State of Wisconsin and the Legislature seek to modernize Wisconsin's long-standing commitment to provide person-centered care for citizens with significant healthcare and support needs, AHI members appreciate the opportunity to collaborate with the Department of Health Services (DHS) and the members of the Joint Committee on Finance.

Specifically, AHI supports the concept proposal as a means to:

1. Enhance the quality of long-term services and supports to ensure participants' overall health care will now be better integrated and coordinated with services and supports to provide whole-person care.
2. Improve access to long-term services and supports throughout Wisconsin because now *all* Wisconsinites across *all* 72 counties will have access to the same level of care and services. Leveraging statewide provider networks will allow Family Care/IRIS 2.0 recipients access to centers of excellence.
3. Promote efficiencies in the provision of acute and long-term services.
4. Person-centered care models will be maintained because any-willing provider provisions mandate a three-year maintenance of providers while allowing the new IHAs to build strong relationships with the individuals they are serving. These new IHAs will be able to evaluate each member individually and make sure members are getting the right care and services in the right environment, at the right time.
5. Promote administrative efficiencies and decrease fragmentation through the use of three regions with three IHAs, which is needed for the program to be actuarially sound. This will allow the state to maintain consistent care and services statewide and will eliminate the solvency struggles some current MCOs face, which create uncertainty for members.

Additionally, we encourage the Joint Committee on Finance vote to approve the concept paper as submitted by DHS before the end of May. We believe the concept paper provides an appropriate and adequate level of detail for the committee to proceed. Of course, as DHS works with the

federal government on finalizing a waiver request for approval, additional details will be negotiated. 2015 Wisconsin Act 55, the 2015-17 state budget act, set parameters to which DHS must adhere when crafting a concept for committee consideration. DHS has done so, and we request the committee act so that DHS may submit a waiver request to the federal government. The sooner the committee acts, the sooner reforms may be implemented, and the sooner both service recipients and Wisconsin taxpayers will reap the benefits of these needed, person-centered reforms.

Finally, the concept paper before you represents a fair balance of the issues presented, and is the first step toward ensuring long term program sustainability with maximum member satisfaction and health outcomes. Once implemented, these reasonable reforms will help Wisconsin more efficiently manage its Medicaid dollars, provide individual choice, and will help participants live happy, healthier independent lives.

As long-term care costs continue to grow and market innovations are evolving, Wisconsin is clearly ready to implement the next generation of long-term care. AHI commends DHS for the stakeholder engagement and effort that went into the Family Care/IRIS 2.0 concept paper.

Thank you for your consideration.