

Public Comment to Michigan Department of Health and Human Services on Provider Enrollment Fitness Criteria

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I am writing to you today as the Strengthening Flint Families research coordinator at the Flint Center for Health Equity Solutions based in the Michigan State University College of Human Medicine Division of Public Health under PI Dr. Debra Furr-Holden. Our mission is to make effective and evidence-based substance use prevention and treatment programs available to all Flint residents. This mission will be severely compromised by proposed policy changes to the Provider Enrollment Fitness Criteria. The Michigan Department of Health and Human Services (MDHHS) proposed additions to the federal and state mandated list of exclusions would result in the large scale termination of professional providers currently providing Substance Abuse and Recovery Support services within two months of President Trump identifying the opioid epidemic as a public health crisis.

These concerns are specifically directed towards itemized exclusions #5 and #6 and in regards to providers who have federal or state felony or misdemeanor convictions within the preceding 10 years. A list which includes:

- Assault, battery and domestic violence;
- Fraud, forgery, counterfeiting, embezzlement and tax evasion;
- Larceny, burglary, robbery, extortion, false pretenses, false representation, and conversion;
- Prostitution;
- Drug crimes including, but not limited to: possession, delivery, and manufacturing

The current guidelines released by the Michigan Department of Community Health, Behavioral Health and Developmental Disabilities Administration's Bureau of Substance Abuse and Addiction Services state that Peer Recovery Coaches "...should have between two to four years of stable recovery...", making the requirement of no convictions for the prior 10 years incongruent with the current mandate. This guideline will also predictably prevent many persons in recovery from joining the peer recovery workforce and even attempting to meet the other requirements since they will be ineligible because of criminal history. Potential newcomers as well as current peer recovery

coaches will have to apply for expungement. This will produce 2 possible non-optimal outcomes, including: 1) a massive number of applications to the courts for expungement of criminal records; and/or 2) the subsequent termination of the workforce if/when expungement is denied. We are concerned that the already overloaded courts do not have the time to address this volume of requests.

It appears to us that in the best-case scenario, a lengthy delay of this expungement process will cost the loss of work and loss of opportunities for recovery to a great number of Medicaid beneficiaries. In the worst-case scenario, the large-scale termination of providers would cost the lives of those who might have otherwise found recovery with the help of Peer Recovery Coaches. These providers are a unique and valuable asset to many in the community.

The proposed policy changes show a lack of foresight in how this proposed change in policy would affect the Medicaid recipients who are already substantially marginalized and stigmatized by our public health system. Please consider the following:

- In 2011, nearly 20% of Flint residents participating in a community-wide survey on health reported that they or a family member was a drug user or was addicted to drugs in the past 2 years (GCHD, 2012)
- In a 2005 study of 673 substance dependent people in treatment for their *first* time, 45% had contact with the criminal justice system, 36% had at least one criminal conviction, and 19% with a felony conviction (Theriot and Segal, 2005)
 - o Consider that this sample was *not* in a low-income area, and that these numbers would be substantially higher for economically depressed areas such as Flint
- One of the most effective resources the substance use treatment community has is its peer recovery support; People who have experienced substance use and its consequences and can help their clients navigate the often difficult path to recovery
 - o Local experts estimate that upwards of 80% of the Peer Recovery Workforce may need to be terminated if these policy changes were to take effect

I appreciate that the State Medicaid plan has the authority to set standards regarding the qualifications of providers and may define exclusions that the Director determines necessary to protect the best interests of the program and its beneficiaries. However, I am concerned that a wide spread cut in substance use service providers would pose undue hardship to Medicaid beneficiaries. These cuts would also significantly harm the workforce with which the state could otherwise put to effective use in providing substance use treatment and prevention programs.

The success of peer recovery support is dependent on the client's ability to relate to their peer recovery coach. If we can employ no peer recovery coaches with a criminal history, then we have no means with which to help the substance user seeking help who is involved with the criminal justice system (which many will be). The essence of this proposed policy change undermines the very meaning of the word "peer" as it relates to this population.

Lastly, the inclusion of prostitution in this policy change would have an even more detrimental effect on the female, gay, transgender and sexual minority populations. These groups consistently have their behavioral health vulnerabilities exploited to the gain of others and then are convicted of crimes because of it. These groups already experience a variety of additional barriers to success in substance use treatment due, in part, to the cultural insensitivity of providers. By terminating the portion of this workforce with whom this population can relate to, the state would be removing one of the only tools of recovery available to this population that they are comfortable utilizing.

It is our sincere hope that the Michigan Department of Health and Human Services (MDHHS) considers the potential risks this policy poses to beneficiaries who are in and or seeking Substance Abuse Services.

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