

**From:** Mike Meyer  
**Sent:** Tuesday, June 09, 2015 2:44 AM  
**To:** KEELING Ryan W \* DCBS  
**Subject:** Public Input

Dear Mr. Keeling,

I am a licensed mental health and addictions counselor with a Trillium-funded agency who would like to comment on the proposed sale of Trillium to Fortune 500 health conglomerate Centene in addition to offering my perspective on the current Trillium situation. Our standards of care are largely guided by these for-profit agencies and I believe this model of administering medicaid through a for-profit entity is the most outrageously immoral and unethical process I know of. It has the current consequence and increasing potential to harm my clients and fellow providers unnecessarily.

Out of state corporations are poised to make hundreds of millions of dollars from our most vulnerable citizens while Trillium currently makes tens of millions of dollars off of them. This is not malicious intent but has effects they don't want. Administering Medicaid by skimming profits is guaranteed to further limit our services to people who often have no housing, little to no access to providers, educational barriers, low employment rates, and/or are victims of predatory financial institutions. Although these Trillium profits are funneled to "reserves" that would be unnecessary in a sane and efficient system, its CEO has seen just under six figures in bonuses and over six figures in raises, pushing his "compensation" to over 1/2 million dollars annually. An incentive of anyone to make financial gains by lessening or withholding the case management and medical services needed must be completely closed to maintain any semblance of humanity, ethics, and equality. These salaries and backwards incentives are simply too prevalent to trust compassionate care to be the priority. And that priority according to prevention principles will actually save taxpayers money and deliver more equality.

The far-reaching, multi-layered clinical consequences of this money grab is profoundly felt by providers. Diminishing access to clients including motivation for attendance, providers having decreasing influence in systemic administrative and clinical policies, less support for prevention, and greater demands for delivering services are among the effects of for-profit institutions that are unnecessary and already causing crisis. I know many hundreds of providers who are attending to increased administrative and environmental pressures rather than accessing needed joy, creativity and sustained support that mental health, physical health, and addictions facilities need.

Much of the high demand for medicaid services is borne out of a loss of community, personal trauma, isolation, and/or a dysfunctional relationship with natural habitat (including diet, spiritual crises, lack of availability/relationship to nature, and exercise). Continuing this unholy alliance with business dynamics in the health care field redirects preventative, holistic, community-oriented (including peer services) into the pockets of investors and managers. This poor business-model "treatment" that can include over-medication, individual hero-complex strategies, and lack of access to services including

basic needs. Providing basic needs is essential for other modalities including counseling and community reintegration to be effective.

The good news is that there is an increasing awareness that wellness-based, participant-empowering, prevention-related approaches are where our focus has the most benefit to Medicaid recipients. Trillium and other for-profit administrators are intelligent, caring people who have the same goals to find ways to honor this increasing knowledge, but are also denying their ethical responsibility to advocate for decentralized public policy. I strongly urge you to deny the acquisition of Trillium by Centene. Thank you for your attention to this and for returning Medicare disbursement to community control.

Sincerely,

Mike Meyer, LCSW, CADC I, QMHP