

# Understanding Mobile Integrated Healthcare (MIH)



Why should EMS agencies only be paid for providing the most expensive service, by ambulance, to the most expensive place, a hospital emergency department?

## What is MIH?

- MIH, also called Community Paramedic Services (CP) are lower acuity healthcare-related services provided by EMS agencies in the field (often a home or business) using a wide range of clinicians, including community paramedics, nurses, advanced practice nurses, physician assistants, behavioral health specialists, and others. CPs:
  - Frees up ambulances to care for more acute and critical patients.
  - Are state-licensed Community Integrated Healthcare Services (CIHCS).
  - Programs focus on enhancing access to care, especially to marginalized populations and rural areas, improving services provided and patient outcomes, and lowering overall healthcare costs.

## What kinds of services and care do MIH/CP programs provide?

- Focused on individual community needs.
- Engage in a wide range of services, including behavioral health and Mobile Crisis Response.

Re-inventing physician house calls using MIH/CP clinicians to perform assessments and diagnostic services and engage physicians via telehealth, receiving diagnoses, prescriptions, and other care instructions—all at a lower cost!

## How do MIH/CP services lower costs?

- **Improve system efficiency** by more effectively utilizing available resources.
- Treating patients where they are instead of transporting them by ambulances to emergency rooms.
- **Decreasing unnecessary ER visits.**
- MIH/CP programs also **target at-risk populations** such as people experiencing homelessness, homebound persons, and immigrant populations.
- MIH/CP service's **direct costs are less than half of ambulance costs.**

Requiring payment for MIH/CP programs would NOT cost more money but instead change how current monies are spent!

## Primary takeaways:

- Even though MIH/CP programs are significantly less expensive, **we are not being paid** for it!
- MIH/CP must be **included in HCPF and DORA, DOI patient care payment programs** that enhance access to care, improve patient care and outcomes, and lower cost – including telehealth services.
- **Legislation needed** to require Medicaid and commercial payments for MIH/CP programs.

**MIH/CP programs provide the right care at the right time and place at a significantly lower cost!**

# Emergency Medical Services Association of Colorado

