



June 24, 2019

Re: Protecting Access to Medicaid in the House Bill 166, State Operating Budget

Dear House and Senate Leadership and Members of the Ohio Conference Committee:

On behalf of the Ohio Women's Public Policy Network, a coalition of more than 30 organizations working collaboratively to advance public policies that build economic opportunity for women and their families, I am writing to thank you for your work on the House Bill 166, the state operating budget bill for the FY 2020 - 2021 biennium, and to urge you to pass a budget bill that protects access to Medicaid.

The Ohio budget will wield vast influence on the lives of women and their families, and it is critically important that these policies reflect the realities facing Ohio women. The passage of the Healthy Ohio Program, in the state budget bill or as stand-alone legislation, would completely undermine women's ability to access health care and maintain financial stability.

We laud the House's decision to remove the Healthy Ohio Program from their version of the budget, and we commend the Senate Finance Committee for passing a budget without the inclusion of the Healthy Ohio restrictions. To ensure that access to Medicaid coverage is protected for Ohio women and families, we strongly urge you to stand by the decision to keep Healthy Ohio policy language out of the state budget bill and to refrain from passing stand-alone legislation that would cut access to this crucial program.

It is critical to women's health and economic security that Medicaid eligibility be protected and preserved in the state. Ohio's Medicaid program is a crucial resource for hundreds of thousands of Ohioans who depend on the program to access healthcare, and Medicaid has long been a lifeline for women, especially women in rural areas of the country.

In Ohio, women compose nearly 60 percent of the state's Medicaid population, and nationally, Medicaid covers more than half of births, playing a critical role in maternal care and health outcomes for babies. As a result of the systemic barriers to economic equality and structural

racism, women of color make up a disproportionate share of Medicaid enrollees, and they would be disproportionately affected by restrictions to the program.¹.

The Healthy Ohio Program would institute premiums for Medicaid recipients, pushing those who cannot afford premiums to be transitioned to a less comprehensive Medicaid program that offers inadequate coverage. Under this program, coverage for care such as prescription medications, oxygen, and mental health care would not be provided, among many others. This diminished care provision would have the greatest impact on Ohio's low-income women and families who may be unable to afford the financial burden of the premiums. The loss of coverage would affect preventative care, care for chronic illnesses, and emergency care, exacerbating health disparities.

The last time Ohio attempted to implement Healthy Ohio, it was rejected by the Centers for Medicare and Medicaid Services (CMS), exactly because of the effect the proposed change would have on coverage for low-income Ohioans. Experts estimated that nearly 150,000 recipients would have lost coverage under the previous Healthy Ohio plan. And, because women make up a greater proportion of the state's Medicaid recipients, we fear that women, particularly women of color, would be hit the hardest.

Implementing the Healthy Ohio Program would result in the loss of full, comprehensive Medicaid coverage for many Ohioans. While pregnant women are excluded from the HOP, infant and maternal health are critically connected long before a woman's first obstetrics visit. Overall health of women leads to better health outcomes if and when they have children. Ohio is already struggling with abysmal rates of maternal and infant mortality, and the risk posed to women and children will increase without the stability for health and well-being that Medicaid provides.

Comprehensive health care means that women and children lead healthier, more economically secure lives. Access to primary and preventative care, such as prescription drugs, including insulin, promotes the health and well-being of women, and helps to keep women active in the workforce. Access to Medicaid, health care that is not directly connected to employment, means that women can seek out better employment opportunities, without the fear of losing health insurance. Medicaid provides the necessary support for families' financial security and health, and cutting coverage will leave women and families vulnerable.

The Healthy Ohio Plan imposes a financial burden on low-income families, and it adds complications to the administrative logistics of Medicaid, creating more barriers to care. According to research by Policy Matters Ohio, ten percent of Medicaid recipients have no

¹ "Medicaid: Ensuring Basic Health Care for Millions of Women and Children" *National Partnership for Women & Families*, 2018, <http://www.nationalpartnership.org/our-work/resources/health-care/medicaid-ensuring-basic-health-care-for-millions-of-women-and-children.pdf>

income whatsoever, and would automatically receive the inferior tier of services². This is unacceptable, and would lead to unequal and unfair access to crucial health services for low-income Ohioans.

The complexity of managing the monthly payment program itself is a barrier. In fact, in other states where similar programs have been attempted, recipients listed confusion as a reason for missing payments and skipping care. Low-income populations already underutilize medical care, and these additional barriers to retaining comprehensive coverage would affect the ability to access necessary health care services and treatment.

Not only does the proposed Healthy Ohio Program result in financial insecurity and less comprehensive health care services for individual families, it is also bad fiscal policy for Ohio. The program would result in high administrative costs for the state, and it complicates the existing system, which would mean the development of separate management policies for the different tiers of Medicaid. The state will have to develop and maintain a system to handle premium cash payments, and spend millions of dollars on the establishment of the proposed point-tracking card system.

As a coalition, we are united by a collective vision for Ohio in which all women – particularly women of color, low-income women, and women in other marginalized populations – have the resources to achieve economic self-sufficiency and the opportunity to lead safe and healthy lives. We commend the House and Senate for protecting access to Medicaid and stand firmly in opposition to the implementation of a Healthy Ohio Program, in the final version of the FY 2020 - 2021 budget, or as a stand-alone bill. It will negatively affect the lives of thousands of Ohioans, particularly women and children, and result in worse health and financial outcomes throughout the state.

Thank you,



Erin Ryan
Managing Director
The Ohio Women's Public Policy Network

² “Nothing healthy about it: proposal would limit Ohioans access to Medicaid.” *Policy Matters Ohio*, June 2019, <https://www.policymattersohio.org/files/news/53019healthyohiobrief.pdf>