What makes us healthy or not?

- 20% - Access to and quality of health care services
- 30% - personal behavioral choices (do you smoke or not?)
- 10% - Environment (Is the air polluted? Is the water safe? Is the house toxic with lead? Is it safe to walk and get exercise in your neighborhood? Can you buy fresh produce locally?)
- 40% - everything else that impacts your life (work, education, social support, income, trauma, etc.)
What does the state budget have to do with it?

- **20% - Access to and quality of health care services**
  - Medicaid and other health programming in the budget.

- **30% - personal behavioral choices**
  - Tobacco cessation; gambling addiction; mental health and addiction services
  - Choosing to see a doctor; eating healthy; brushing teeth; sleep hygiene

- **10% - Environment**
  - Funds to address pollution of water in the state
  - Funding to abate lead in homes
  - Ohio EPA services; the Water Quality Development Authority

- **40% - everything else**
  - Living wage and family leave regulations
  - Affordable housing
  - Quality of schools, affordability of post-secondary education
  - Public safety and your personal sense of security
  - Access to food, commerce, recreation
  - Public transportation

Why Medicaid matters in Ohio

- **By the numbers -**
  - 7 of 10 of Ohio’s biggest job groups leave small family eligible for Medicaid
  - 2 of 3 Medicaid enrollees work; most others are disabled or caregivers
  - 1 in 4 low-wage workers get health coverage through their job.

- **A lot of Ohioans**
  - 26% - About a quarter of Ohioans, around 3 million people
  - 52% - Pays for more than half of the births
  - 62% - Pays for almost two-thirds of nursing home care

- **Big part of the economy**
  - Biggest health insurer in the state
  - Medicaid expansion alone supports 54,000 health care jobs
FY 2018 General Revenue Fund (GRF) by Category (State Funds Only)

- Medicaid is not the largest part of state $$ in the GRF
- It is the largest part if you include the federal dollars
- State + Federal Medicaid $$ = $14 to $16 billion a year

Medicaid vs. Medicare: What’s the Difference?

<table>
<thead>
<tr>
<th></th>
<th>Medicaid</th>
<th>Medicare</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration</td>
<td>State</td>
<td>Federal</td>
</tr>
<tr>
<td>Funding source(s)</td>
<td>State, federal, local</td>
<td>Federal</td>
</tr>
<tr>
<td>Population served</td>
<td>Kids, parents, adults, disabled and elderly</td>
<td>Elderly (65+) and some disabled</td>
</tr>
<tr>
<td>Income limits</td>
<td>Low-income</td>
<td>No limits</td>
</tr>
<tr>
<td>Coverage</td>
<td>Varies by state</td>
<td>Standard across nation</td>
</tr>
<tr>
<td>Care</td>
<td>Primary, acute and long-term</td>
<td>Primary and acute</td>
</tr>
</tbody>
</table>
Federal Poverty Level (FPL), 2019

<table>
<thead>
<tr>
<th>Family Size</th>
<th>100% FPL</th>
<th>138% FPL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$12,490</td>
<td>$17,236</td>
</tr>
<tr>
<td>2</td>
<td>$16,910</td>
<td>$23,336</td>
</tr>
<tr>
<td>3</td>
<td>$21,330</td>
<td>$29,435</td>
</tr>
<tr>
<td>4</td>
<td>$25,750</td>
<td>$35,535</td>
</tr>
<tr>
<td>5</td>
<td>$30,170</td>
<td>$41,635</td>
</tr>
</tbody>
</table>

Who is served by Medicaid?

Low-income people and families:

- Families and Children (“CFC”)
- Aged, Blind, and Disabled (“ABD”)
- Working- age adults (19-64) (“Group VIII”)
- Others – workers buy-in, foster care...
**Medicaid Caseloads**

FY 2008: 1.8 million  
FY 2018: 3.0 million

**Medicaid Spending & Enrollment**

**Aged, Blind, & Disabled (ABD), Group VIII, Covered Families & Children (CFC), FY 2018**

**Enrollment**  
- **Group VIII, 24%**  
  - 700,000  
- **ABD, 16%**  
  - 477,000  
- **CFC, 60%**  
  - 1,700,000

**Spending**  
- **Group VIII, 20%**  
  - $4.6 billion  
- **ABD, 55%**  
  - $12.3 billion  
- **CFC, 25%**  
  - $5.7 billion

*Source: Testimony of Director Maureen Corcoran, Ohio Department of Medicaid, April 25, 2019*
Federally mandated services

- Certified pediatric and family nurse practitioners
- Health check screening for kids & youth
- Family planning services
- Federally qualified health center
- Freestanding birth center
- Home health
- Inpatient hospital
- Lab & x-ray
- Nursing facility care
- Nurse midwife
- Outpatient hospital
- Physician
- Rural health clinic
- Transportation to medical care
- Tobacco cessation counseling for pregnant women

Source: Policy Matters Ohio, based on Health Policy Institute of Ohio, Medicaid Basics 2019

Ohio benefits

- Ambulance & ambulette
- Chiropractic
- Community alcohol and drug addiction treatment
- Community behavioral mental health
- Dental
- Durable medical equipment and supplies
- Home & community-based service
- Hospice care
- Intermediate care facility
- Occupational therapy
- Physical therapy
- Podiatry
- Prescription drugs
- Private duty nursing
- Speech therapy
- Targeted case management
- Vision care

Source: Policy Matters Ohio, based on Health Policy Institute of Ohio, Medicaid Basics 2019
Characteristics of the Ohio Medicaid budget

• About $6 billion a year in state-source General Revenue Funds
• Pulls in about $20 billion a year in federal funds
• Funds are distributed across eight state agencies: Departments of Health, Education, Mental Health and Addiction Services, Developmental Disabilities, Aging, Job and Family Services, Medicaid and the State Pharmacy Board.

Key issues in the Medicaid budget

• Medicaid expansion
• Children’s Health Insurance
• Drug epidemic
• Infant mortality
• Prescription drugs
• Home-based services
• Health care workforce
Initiatives in the Medicaid budget

- Four address infant mortality
- $2 million for lead testing
- Rebid of managed care
- Expanded home and community based services for DD community
- Expanded care coordination in behavioral health

New initiatives in the governor’s budget

<table>
<thead>
<tr>
<th>Initiative</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home visiting to reduce infant mortality</td>
<td>$4.0</td>
<td>$10.1</td>
</tr>
<tr>
<td>Linking pregnant moms to health care services</td>
<td>$0.0</td>
<td>$10.0</td>
</tr>
<tr>
<td>12-month enhanced post-partum care</td>
<td>$0.0</td>
<td>$5.4</td>
</tr>
<tr>
<td>Care for moms with a baby and with opioid use disorder</td>
<td>$1.6</td>
<td>$3.1</td>
</tr>
<tr>
<td>Behavioral health services in the schools</td>
<td>$1.5</td>
<td>$3.0</td>
</tr>
<tr>
<td>Expanded telehealth services</td>
<td>$1.5</td>
<td>$3.0</td>
</tr>
<tr>
<td>Expanded use of funds for multi-system youth</td>
<td>$10.0</td>
<td>$10.0</td>
</tr>
<tr>
<td>Access to autism services</td>
<td>$0.0</td>
<td>$10.4</td>
</tr>
<tr>
<td>Wellness for kids in primary care</td>
<td>$1.2</td>
<td>$2.4</td>
</tr>
<tr>
<td>Lead testing, hazard control</td>
<td>$0.6</td>
<td>$1.3</td>
</tr>
<tr>
<td>Substance Use Disorder waiver authorization</td>
<td>$0.6</td>
<td>$1.3</td>
</tr>
<tr>
<td>Behavioral health care coordination</td>
<td>$2.3</td>
<td>$28.3</td>
</tr>
<tr>
<td>Procurement of value in managed care (re-bidding)</td>
<td>$1.8</td>
<td>$1.8</td>
</tr>
<tr>
<td>Work requirement implementation</td>
<td>$5.1</td>
<td>$4.4</td>
</tr>
<tr>
<td>Transportation services</td>
<td>$3.1</td>
<td>$6.1</td>
</tr>
<tr>
<td>Developmental disabilities waiver</td>
<td>$18.5</td>
<td>$12.9</td>
</tr>
<tr>
<td>Modernizing pharmacy procurement</td>
<td>$0.0</td>
<td>$5.3</td>
</tr>
</tbody>
</table>

Beyond Medicaid: Increased services and funding across the sister health and human service agencies

- More for the Senior Community programs and adult protective services (not enough, but more)
- Public health gets $30 million for home visiting to bring down the high infant mortality rate.
- Mental health and addiction services receives additional GRF funding for community mental health services; 2018-19 enhanced funding for behavioral health was maintained
- Opportunities for Ohioans with Disabilities will get additional GRF funding to draw down additional federal dollars.
THE CHALLENGE

- 4,854 individuals died from drug overdose deaths in 2017
- That same year, we lost 1,751 people to suicide
- We send too many people in a crisis (suicide or overdose) to the emergency room or to jail.

HOW OHIO HAS RESPONDED

- Medicaid expansion has been essential to provide services to hundreds of thousands of Ohioans struggling with mental illness and addiction
- The previous state budget and the budget just passed both increased support for recovery services, public health, and recovery housing
2020-21 STATE BUDGET

House-passed State Budget

<table>
<thead>
<tr>
<th>Department of Mental Health and Addiction Services</th>
</tr>
</thead>
</table>
| ![](https://example.com/)

### OhioMHAS

<table>
<thead>
<tr>
<th>Agency</th>
<th>FY 2018-19 Appropriation</th>
<th>FY 2020-21 Appropriation</th>
<th>Increase over the biennium</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>OhioMHAS</td>
<td>$1,459,915,103</td>
<td>$1,726,661,214</td>
<td>$266,746,611</td>
<td>18.27%</td>
</tr>
</tbody>
</table>


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2020-21 STATE BUDGET

**Ohio Department of Education**

- $550 million in the Governor’s budget for “Student Wellness and Success”
- Final budget added an additional $125 million (totaling $675 million) over the biennium

**Ohio Department of Medicaid**

- Maintains Medicaid expansion
- Devotes an additional $511 million over the biennium (in state and federal funds) toward recovery-related initiatives.
THE CHALLENGE

- Children and parents who experience poverty and insecurity are more likely to face toxic stress and have poor education, health, and employment outcomes
- Many working parents can’t afford child care
- The average child care worker in Ohio makes only $9.86 per hour.
- Too little pre-school funding and reimbursement for child care providers is too low
- Pre-k program and publicly funded child care programs are not aligned
THE CHALLENGE

Annual income for a family of 3

- Ceiling for income eligibility of Ohio’s public childcare program
  (family of 3 – not adjusted for inflation)

2020-21 State Budget

- Additional $198 million in federal dollars over the biennium to improve the quality of Ohio’s publicly funded child care system.
- Additional $10 million for quality grants
- Increases reimbursement rates for child care providers.
- ODJFS anticipates serving 6,000 more children in the public childcare system by 2021.
- Early education (public pre-school) is flat funded at about 18,000 seats
- Governor DeWine remains committed to the goal of boosting eligibility to 150 percent of the federal poverty level.
THE CHALLENGE

• The Ohio Association of Foodbanks report a 25% increase in seniors at food pantries over the last 4 years

• Between 2012 and 2017, total homelessness increased 20% to over 70,000 people

• The number of homeless babies increased 53% over the same time to nearly 3,000 infants (under age 1).
THE OPPORTUNITY

When children have access to stable housing and nutritious food, they have:

- Better health
- Perform better at school
- Have more economic opportunities

2020-21 State Budget

- $24.55 million annually ($49.1 over two years) to support the foodbanks and hunger relief efforts
- Ohio Housing Trust Fund will see a boost of $2.5 million/year - the first increase in 16 years
- $2.5 million per year to address youth homelessness (new line item in the Ohio Dept. of Health)
2020-21 State Budget

- $118.4 million per year in new investments in children services ($237 million over the biennium)
- Single biggest investment in children services in Ohio history
- Funding is flexible to meet local challenges and targeted to specific needs (the addiction epidemic)
- Will begin to address the child welfare system’s crisis in custody increases, placement cost increases, and workforce needs.
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