



Advocates Tout Medicaid's Impacts As Program Turns 50

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Improved health and reduced uncompensated hospital care are among the many impacts Medicaid has had in Ohio since being signed into federal law 50 years ago this week, health care advocates said Wednesday.

In honor of the health care entitlement program's five-decade anniversary, Enroll America Ohio State Director Trey Daly joined advocates and stakeholders to highlight how Medicaid has impacted Ohioans' lives - particularly in the wake of the recent eligibility expansion.

With more than one in four Ohioans receiving coverage through Medicaid, Mr. Daly said, the program is the state's largest health care plan. Nearly three million Ohioans are enrolled in the entitlement, including 537,000 who became eligible as a result of the state's 2013 expansion up to 138% of the federal poverty level, he said.

UHCAN Ohio Executive Director Cathy Levine said the figures demonstrate that "the Ohio Medicaid program is one of the great success stories in health care" in the state. She pointed to the program's coverage of low-income adults, veterans and others and lauded its coverage of what she called medically necessary services, like vision and dental.

Ohioans enrolled in Medicaid, Ms. Levine contended, are more likely that their uninsured counterparts to access preventative care and to have regular office appointments.

Mr. Daly cited Department of Medicaid data that found 65% of newly eligible enrollees with claims had accessed a preventative health service.

"Low-income Ohioans are getting the care they need when they need it to be healthy and productive and Medicaid is more efficient and cost effective than private insurance," Ms. Levine said in a conference call with reporters. "If that's not success, I don't know what is."

Hospitals, meanwhile, have seen charity care decline as more individuals have enrolled in Medicaid coverage, Ohio Hospital Association spokesman John Palmer said.

In 2013, Medicaid accounted for nearly 20% of Ohio hospitals' inpatient, outpatient and emergency cases, he said. It accounted for almost a quarter in 2014.

Total billed charges for uninsured care dropped by a third over the same period, Mr. Palmer added. While charity care is still being provided, he said it's declined slightly in the wake of Medicaid expansion.

"As we saw less uninsured, and when you put more people on the Medicaid program, it did have significant implications to our members and hospitals across the state," he said, adding that health care coverage translates to "better health and economic security for all of us."

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Ohio community health centers, which list Medicaid as their largest payer source, have seen access to primary and preventative health services increase and have the operational support to invest in more patient capacity, said Julie DiRossi-King, the Ohio Association of Community Health Centers chief operating officer.

"We believe that providing health care coverage to additional people has indeed not only saved the state money, but it's also impacting lives. And, in some instances, literally saving lives," she said.

"People without insurance, who don't have access to care, often get sick or become more sick and then they're unable to treat their chronic diseases and end up costing the system far more than if they were covered and managed through Medicaid."

Despite praise from stakeholders, some have remained wary of the entitlement, particularly as the state moved to extend coverage eligibility.

In an effort to monitor Medicaid expansion's impacts in the upcoming biennium, the Fiscal Years 2016-2017 budget (HB 64) requires the Kasich Administration to report to the legislature on its effect on clinical care and outcomes for newly eligible Ohioans. (See Gongwer Ohio Report, July 14, 2015)

Other proposals included in the two-year spending bill, meanwhile, aim to help move Ohioans off the health care entitlement and prepare for private insurance through the use of health savings accounts. (See Gongwer Ohio Report, July 13, 2015)

Medicaid spending in Ohio accounts for more half of the general revenue fund budget, which includes the state and federal share of the entitlement. The Department of Medicaid's two-year appropriation makes up about \$36 billion of the total \$71.3 billion in GRF allotted for state operations over the next two years.