March 1, 2018

Barbara Sears, Director  
Ohio Department of Medicaid  
50 W Town Street  
Columbus, OH 43215

Dear Director Sears:

Voices for Ohio’s Children has reviewed the Ohio Department of Medicaid’s (ODM) Notice of Ohio’s 1115 Waiver Demonstration Application to implement a statewide Work and Community Engagement Requirement as a condition of eligibility for Medicaid under Group VIII (Medicaid Expansion). We appreciate this opportunity to comment on the proposal before it is submitted to the U.S. Department of Health and Human Services’ Centers for Medicaid and Medicare Services (CMS).

Voices for Ohio’s Children’s Interest in this Waiver Request

Voices for Ohio’s Children is a statewide child advocacy organization. We advocate for policies that will support the health, safety, education, connection and future employability of children. The health of children is heavily influenced by the health of their parents. Parents of minor children in the home constitute about 97,000 of Group VIII population, and for this reason we have a strong interest in the outcome of this waiver request. In addition, for babies to have a healthy start, pre-conception health is very important, and so we advocate for women of child-bearing age who are not yet parents.

Voices has continually advocated for reducing the red tape and administrative burdens that result in the failure to enroll eligible families. We advocated for parent renewal of coverage on a twelve month basis, like their children, to improve retention. We advocated for other changes including the use of telephone renewal interviews and “presumptive eligibility,” so that certain providers can make an initial finding of eligibility to be confirmed by the County Job and Family Services (JFS), to make sure pregnant women receive care at the earliest opportunity. Voices has been proud to play a role in these streamlining efforts.

The imposition of a general work requirement on Group VIII Medicaid, even with generous exceptions, adds an administrative layer to what Medicaid enrollees and County JFS workers must do. We know from experience that the addition of this burden will result in parents losing Medicaid. Moreover, research shows that the children of parents who have health coverage are more likely themselves to be covered and vice versa. When parents lose coverage the likelihood that their children themselves will be uninsured grows.

General Comments

We appreciate that this proposed waiver request to require compliance with a work/community engagement requirement has been limited to the Group VIII Medicaid category and not applied to Section 1931 parents on Medicaid whose income is below 90% of the Federal Poverty Level. Further, we are heartened that parents of minor children living in their home are exempt from the work requirement.

However, we believe that imposition of a work/community engagement policy will lead to loss of needed coverage. Ohio’s own data shows that having Medicaid empowers persons to be able to work or seek work. In the Ohio Department of Medicaid survey carried out in 2016, a majority of Group VIII respondents reported that Medicaid has made it easier to secure and maintain employment. Of those enrollees who are currently employed, 52.1% reported that having Medicaid made it easier to continue working. Among unemployed Group VIII enrollees looking for work, 74.8% reported that Medicaid made it easier to look for work.³

Our specific comments follow:

Section 1: Children will be better protected if the waiver exemption for parents and caretakers of minor children in the home is broadened to include (1) both parents of minor children, regardless of whether the parent lives in the home with the minor child and (2) to include other Group VIII members who provide care for children, whether paid or unpaid.

1. The work requirement exemption should include both parents of a minor child whether living with the children or not. We start with the premise that for children to be healthy, they need healthy parents. Healthy parents are more likely to engage in positive ways with their children. A study published in Health Affairs indicates that the Medicaid Expansion reduced distress for low-income parents.⁴ If a child has one parent with a mental illness, it is important that there is another stable adult in the child’s life, and that may well be the non-custodial parent.⁵ A study published in the National Social Workers’ Journal finds that “insured children of uninsured parents have worse health status and are at a higher risk of asthma, attention-deficit/hyperactivity disorder, developmental delays learning disabilities, and mental disabilities compared with insured children of insured parents.”⁶


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(2) The parent/caretaker exemption should be broadened to include any Group VIII member who provides care for children whether paid or unpaid.

Among low wage workers there are many formal and informal arrangements to care for children. Paid childcare is expensive, and not all low wage working parents qualify for childcare subsidies. In Ohio, Group VIII enrollees between 130% and 138% of the poverty level do not qualify for a childcare subsidy as a new applicant. In addition, even with a subsidy, childcare may not always be available and accessible to low wage workers who work changing shifts and late shifts. For this reason, the custodial parent may depend on the non-custodial parent, or other family members to care for his/her children. It is important to assure continuity of childcare for the sake of the children and to protect the working custodial parent’s foothold in the job market.

Voices urges that the parent/caretaker exemption be written as follows:

To align as closely as possible to the SNAP and ABAWD policies, the following Group VIII adults will be exempt from the Work and Community Engagement Requirement:

... Parent/caretaker residing in same house with minor child; THE NON-RESIDENT PARENT AND ANY OTHER PERSON ENGAGED IN THE ROUTINE CARE OF THE CHILDREN OF THE RESIDENT PARENT;

Section II. Work requirements as a condition of Medicaid eligibility will ultimately negatively impact families and children.

Voices for Ohio’s Children recognizes that this waiver is being submitted pursuant to HB 49, and appreciates ODM’s effort to protect the care-givers of children within the waiver through the exemption process. However, we do want to go on the record expressing our concern about the general impact of a work/community engagement such as is proposed to CMS.

Any eligibility condition that requires an additional interaction(s) between the Medicaid enrollee and a local Job and Family Services worker will likely result in some people losing benefits, which will include parents or other caregivers who are unsuccessful in establishing their exemption. Such failures of communication happen because JFS workers are stretched thin and enrollees operate with limited communication tools. This can result in a missed notice or a missed response that leads to disenrollment. In addition, the proposal does not clarify the steps the exempt person will need to take to document the

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7 See SNAP exemptions at 5101:4-3-11 of the Ohio Administrative Code. (In the waiver proposal this appears at Footnote 6.) While the SNAP exemption is not as broad as the one we suggest in these comments, alignment is not required by the CMS State Medicaid Director Letter of January 11, 2018, and CMS indicates that exemptions should be consistent with Medicaid objectives. For all the reasons we state, we believe the broader exemption would be more consistent with Medicaid objectives.
facts that support the exemption, and these steps may be difficult to navigate. The waiver proposal states that self-attestation will be accepted for the determination of exemptions, but this process is not described, and it remains to be seen what level of documentation will need to accompany the self-attestation.

Further, there is another category of non-exempt persons whose loss of Medicaid will impact children. These are women of child-bearing age who do not have minor children living with them. A key strategy in combatting infant mortality and improving birth outcomes is providing coverage to women who have not yet become pregnant. Women without children whose income does not exceed 138 percent of the federal poverty level are most likely to access Medicaid through Group VIII. It is very important that this mom be healthy at the onset of pregnancy, which may be planned or unplanned. Her future child will pay the price if she is not healthy.

**Conclusion**

We appreciate the effort that ODM has made to apply a work requirement/community engagement requirement in a way that protects children. We believe there is some additional exemption language that could further improve the protection of children. However, due to administrative burden involved in the imposition of a new condition of eligibility on such a large group (700,000+), some persons entitled to exemptions are likely to lose their Medicaid. A child’s need for two healthy parents is so strong that we believe it is not advisable to make such a major change in the Group VIII Medicaid program because even with best efforts some parents are bound to lose their Medicaid coverage.

Thank you for this opportunity to comment.

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8 Musumeci, Mary Beth, et al, “Medicaid and Work Requirements: New Guidance, State Waiver Details and Key Issues,” Kaiser Family Foundation (January 16, 2018) https://www.kff.org/medicaid/issue-brief/medicaid-and-work-requirements-new-guidance-state-waiver-details-and-key-issues/ The Kaiser Family Foundation notes that, “Because of complex documentation and administrative processes, some eligible individuals could lose coverage. There is a real risk of eligible people losing coverage due to their inability to navigate these processes, miscommunication, or other breakdowns in the administrative process.”

9 Anthes, L, “Work Requirement Waiver,” Center for Community Solutions (February 21, 2018)