



May 26, 2021

Senator Kristina Roegner, Chair  
Ohio Senate Committee on Oversight and Reform  
Senate Building, First Floor  
1 Capitol Square  
Columbus, OH 43215

Re: Senate Bill 17

Dear Senator Roegner:

The undersigned organizations, representing patients and consumers across Ohio who face serious, acute, and chronic health conditions, write opposing Senate Bill 17.

Our organizations are committed to ensuring that the Medicaid program provides quality and affordable healthcare coverage for Ohioans. The COVID-19 pandemic and economic impact has highlighted the importance of the Medicaid program and its robust healthcare coverage for low-income children, adults, seniors, and people with disabilities.

Senate Bill 17 creates policies that address how Ohio reviews the eligibility of current Medicaid enrollees at the end of the public health emergency (PHE). Under the Families First Coronavirus Response Act, Ohio receives increased funding from the federal government for its Medicaid program but must comply with requirements limiting the circumstances in which people can be removed from Medicaid coverage. The bill would require the Medicaid program to conduct eligibility redeterminations within 60 days of the PHE ending. The Ohio Medicaid program currently covers approximately 3 million people, most of whom would likely require a redetermination.<sup>1</sup> This volume of work is not feasible in the timeframe allotted. There will be administrative chaos and massive disenrollment, including of enrollees who are eligible but lose coverage due to administrative red tape. For patients with COPD, heart disease or other rare and chronic health conditions, a lapse in coverage can mean a lapse in medication, permanently worsening the patient's prognosis.

Senate Bill 17 also would require the state Medicaid Director to review Medicaid enrollees' change of employment or wages on a quarterly basis as well as check residency monthly and act upon the information. Low-income individuals' wages and housing situations often fluctuate due to the nature of hourly wages and income insecurity. The Medicaid agency should be reviewing this information at the 12-month redetermination check. Doing so more frequently will result in more churn in the Medicaid program, more gaps in coverage, worse health outcomes and ultimately higher healthcare costs.

Our organizations urge you to oppose this bill. SB 17 will compromise access to healthcare for a very vulnerable population, at a time when Ohioans need access to care more than ever. We urge you to focus instead on solutions that can promote adequate, affordable, and accessible Medicaid coverage for all Ohioans. Thank you for your consideration of our comments on this important matter.

Sincerely,

Ken Fletcher, The American Lung Association in Ohio - [ken.fletcher@lung.org](mailto:ken.fletcher@lung.org)

Dave Almeida, The Leukemia and Lymphoma Society - [Dave.Almeida@lls.org](mailto:Dave.Almeida@lls.org)

Dustin Holfinger, American Heart Association - [Dustin.Holfinger@heart.org](mailto:Dustin.Holfinger@heart.org)

Holly Pendell, National Multiple Sclerosis Society - [Holly.Pendell@nmss.org](mailto:Holly.Pendell@nmss.org)

Corinne Alberts, National Organization for Rare Disorders – [calberts@rarediseases.org](mailto:calberts@rarediseases.org)

Miriam Goldstein, Hemophilia Federation of America - [M.Goldstein@hemophiliafed.org](mailto:M.Goldstein@hemophiliafed.org)

Adam Kellermann, Cystic Fibrosis Foundation – [akellermann@cff.org](mailto:akellermann@cff.org)

Dana Carter, Susan G. Komen - [DCarter@komen.org](mailto:DCarter@komen.org)

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<sup>1</sup> Centers for Medicare and Medicaid Services. November 2020 Medicaid & CHIP Enrollment Data Highlights. April 2, 2021. Accessed at: <https://www.medicaid.gov/medicaid/program-information/medicaid-and-chip-enrollment-data/report-highlights/index.html>