

July 14, 2016

Centers for Medicare and Medicaid Services  
7500 Security Blvd  
Baltimore, MD, 21244

**RE: Written Comments on the Healthy Ohio 1115 Medicaid Waiver Application**

To Whom it May Concern:

The Ohio Public Health Association is submitting this written commentary regarding Ohio's 1115 Medicaid Waiver Application because of its potential to disrupt coverage and negatively impact the health of our state's most vulnerable populations.

It is the mission of the Ohio Public Health Association (OPHA) to be an inclusive voice for Public Health and to ensure the opportunity for every Ohioan to achieve his/her optimal level of health. The OPHA has nearly 600 registered members who work in state and local health departments, universities and academic settings, non-profit and community based organizations, and private sector settings. We represent thousands of Public Health professionals including physicians, nurses, epidemiologists, health educators, optometrists, chiropractors, administrators, and registrars.

As a result of the 2014 extension of Medicaid coverage in Ohio to adults up to 138% of the federal poverty level, over 640,000 more Ohioans now have health insurance coverage that allows them to access preventive as well as sick care services. Approval of the proposed 1115 waiver would create the following deleterious changes for the over 1 million citizens of Ohio currently covered by Medicaid:

□ **Imposition of an annual premium regardless of where a covered individual falls on the federal poverty level scale.** Imposition of premiums in other states has directly contributed to declines in enrollment. Declines in enrollment will result in an increase in Ohioan's without health care coverage, leading to increased use of emergency rooms for health care needs which results in increased costs to the health care system. In the state of Oregon, Medicaid enrollment dropped by 77% following the imposition of annual premiums.

□ **"Lock-out" provision for enrollees who fail to pay the required premium.** The proposed waiver includes a "lock-out" provision for enrollees who fail to pay a monthly premium for 60 days. The proposed "lock-out" would continue until the enrollee paid all outstanding premium costs. This "lock-out" would result in no health care coverage for the individual affected, without consideration of circumstances that may have led to the inability to pay the monthly premium.



Ohio Public Health Association

---

□ **Modified health savings accounts and debit cards for co-pays and other health care related costs for enrollees.** Implementing and administering such a system will be very costly and create more complexity for Medicaid enrollees utilizing their health care benefits. The state of Arkansas recently eliminated its system of health savings accounts and cost-sharing requirements for participants at or below 100% of the federal poverty level due to high administrative costs in running the system.

□ **Annual and lifetime benefit caps.** The proposed waiver includes annual and lifetime benefit caps for the Healthy Ohio Program even though such caps were made unlawful under the Affordable Care Act.

As included in the proposed 1115 waiver application, these changes outlined above would negatively impact approximately 41% of the current Medicaid population, which also happens to be our state's most vulnerable population. Therefore, the Ohio Public Health Association wishes to emphatically express our opposition to the Healthy Ohio waiver application.

Sincerely,

Lois Hall, MS  
Executive Director  
Ohio Public Health Association