



**OHIO
CHILDREN'S
BUDGET**
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ISSUE BRIEF

ISSUE: Medicaid and CHIP in Ohio

In Ohio, 1.55 million children relied on Medicaid and CHIP at some point in FY 2017 to access the health care they needed to be healthy. Forty-four percent of infants, toddlers and preschoolers, 46 percent of children with disabilities, 82 percent of children that live at or near the federal poverty line, and 100 percent of foster youth are covered by Medicaid and the Children's Health Insurance Program (CHIP).

As the primary insurer of children's health, Medicaid has an important role to play in identifying children at risk and connecting them with community resources to ensure a healthy start in life. Children need access to continuous, affordable health care coverage and services to grow strong and learn at the greatest capacity.

Families need the peace-of-mind that comes from knowing their children can get the care they need at a price they can afford and that their family is protected from financial catastrophe in the event of an illness or injury.

Policy

In Ohio, Medicaid and CHIP are administered by the Department of Medicaid. Medicaid is a primary source of coverage for children. Each state has the flexibility to design its program within federal guidelines and receives federal matching funds. For children, Medicaid provides guaranteed coverage, pediatrician-recommended services, and cost-sharing protections.

CHIP, known as Ohio Healthy Start, allows eligible families to be folded into Medicaid, even though they make too much to qualify for basic Medicaid programs and lack access to employer-based or private health care coverage. CHIP is a federally-funded, state-administered block grant program that was created in 1997. It was expanded in 2009 with ten additional years of funding authorized in 2018, to allow for appropriations through 2027.



Challenges

In 2016, Ohio saw record coverage for children in our state, with only 3.8 percent uninsured, due in large part to Medicaid and CHIP. However, according to 2017 American Community Survey data, released in September 2018, 125,000

Ohio children, or 4.5 percent of children from birth to age 19, were uninsured the very next year. After seeing record high coverage rates for Ohio's children, this decline in coverage sparks concern that more and more children are losing access to consistent health care treatment and services. Because Ohio has a county-based eligibility system, the State Department of Medicaid should work closely with the counties to determine the source of disenrollment and unenrollment, and target dollars where outreach can be most cost-effective. Ohio should look at every child who is disenrolled from Medicaid as a potential uninsured child, and reach out to that child's family to determine whether the child now has other insurance, and whether there is anything the Medicaid agency can do to facilitate the child's reenrollment, if eligible.

According to the most recently available data on access to care, twice as many Medicaid eligible but unenrolled children delayed or avoided care as children enrolled in Medicaid (OMAS 2015 report) Kids that have coverage miss fewer days of school due to injury or illness, are more likely to graduate from high school or college, grow up to be healthier adults, earn higher wages, and pay more in taxes.

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Source: OMAS 2015 Report: http://grc.osu.edu/sites/default/files/inline-files/MedicaidChildrenChartbookFINAL_1.pdf.
