

Strengthening Ohio Medicaid Can Help Ohio Kids Thrive

Young children need uninterrupted access to health insurance to thrive. Brain development is most rapid in the early years of life, and infants and young children need quality health care to ensure they get and stay on a path to success. Pediatricians recommend frequent visits in early years to track progress toward developmental milestones, detect and address social, emotional, or developmental delays prior to beginning school, and minimize unnecessary, long-term harm and costs.

Challenge

Children in Ohio aren't getting the care they need. Ohio can and should be doing a better job of providing care to families and children — particularly those who are covered by and/or eligible for Medicaid.

- Medicaid covers 1,428,755 children in Ohio. But administrative barriers and red tape cause many eligible children to fall off and re-enroll. In 2019 alone, more than 23,000 children lost their Medicaid coverage, and over 70 counties saw child enrollment declines — without corresponding gains in private insurance coverage.
- Ohio ranks poorly in several <u>Child Core Set measures</u>. According to data highlighted by the Georgetown Center for Children and Families:
 - 4.4% of children under age 6 are uninsured
 - Only 61% of Ohio children complete well-child visits in first 18 months
 - Only 62% of children aged 2 have the required immunizations.
 - o Only 29% of eligible children received preventive dental services.
- When it comes to overall child well-being, Ohio fell from 27th in 2019 to 31st in 2020 (2022 Kids Count Data Book).
- Ohio ranks 47 out of 50 states on health value, meaning that Ohio spends more on healthcare and experiences worse outcomes than people in most other states (<u>2021</u> HPIO Health Value Dashboard).

How can Ohio address these poor child health outcomes?

Support Child Well-Being: Budget Recommendation

Continuous early childhood Medicaid eligibility can help us get back on track. One important way to ensure Ohio kids are getting the care they need is to offer continuous Medicaid eligibility from birth to age 6. Allowing children with Medicaid to maintain their coverage regardless of temporary household income fluctuations will:

- Give children consistent access to the well-child visits, vaccinations, and specialty care they need to start school ready to learn.
- Help low-income parents stay focused on getting their kids to the doctor without worrying about whether visits will be covered from one month to the next.
- Allow families to seek care before small health issues turn into expensive problems.
- Address racial health disparities by reducing the gaps in coverage that disproportionately affect nonwhite children.
- Reduce administrative burden and costs to the state and drive more efficient spending.

Strengthen Medicaid/CHIP to allow coverage for children in families up to 300% FPL

- Ensuring that ALL children in Ohio have access to affordable, quality health care during all stages of development is essential to their future health and success.
- As the cost of dependent coverage for employer-sponsored insurance continues to increase, expanding Medicaid and CHIP income eligibility would give more children access to affordable coverage.

Medicaid coverage of Doula services.

There is a strong and growing body of evidence that access to doula care during pregnancy reduces the incidence of preterm birth, the prevalence of cesarean births, and increases positive birth experience and healthy outcomes for both mother and child. In 2018, there were 13,845 preterm births in Ohio, representing 10.3% of live births. According to The Ohio Perinatal Quality Collaborative a preterm birth in Ohio costs \$32,000. Doulas provide emotional, physical, and educational support to a mother who is expecting, is experiencing labor, or has recently given birth.

Increase utilization of Ohio's Evidence-based Home Visiting Programs (Help Me Grow)

Home visiting programs are one proven approach to mitigating infant mortality. For every \$1 invested in home visiting programs, the state return on investment is \$6. Ohio increased its investment to \$80 million over the biennium in evidence-based home visiting programs in the FY 22-23 budget. Ohio should continue to fully fund the Help Me Grow program at current levels.

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