



Ohioans Benefit From Expanded Health Coverage

Families and communities in every part of Ohio will see improved health outcomes and financial benefits if Ohio decides to expand Medicaid for families and childless adults. Medicaid is a vital component of the health and human service system in Ohio and across the nation.

The following populations will benefit from Medicaid expansion:

Every Ohioan

Every Ohioan will benefit from the Medicaid expansion. As long as we have any uninsured Ohioans, every Ohioan will share the cost of their care, through cost-shifting, increased insurance rates, higher fees for health care, and the costs of emergency or episodic care rather than preventative care.

Ohio Children, Adults and Families

Even though Medicaid is targeted at low-wage workers, families and children, many of Ohio's most vulnerable residents have not historically been eligible for Medicaid.

1. **Childless adults** with incomes between 0% and 138% of the federal poverty level are the largest group of Ohioans who will benefit from the expansion because they do not meet Ohio's Medicaid rules for categories of people eligible through other programs.
2. **Parents** with incomes between 0 and 138% of the federal poverty level whose children are 19 or older or are no longer dependent do not meet the current requirements. Many of these Ohioans were previously eligible for Medicaid before their children reached age 19.
3. **Parents of minor or dependent children** with incomes between 90% and 138% of the federal poverty level who do not have private health insurance or who have insurance with high premiums and cost-sharing.
4. **Children** whose parents are uninsured. Children of uninsured parents access fewer health care services than children of parents who have insurance. Children will also benefit if their mothers have appropriate access to prenatal care.

Advocates for Ohio's Future

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Ohioans with Chronic Health Needs

Medicaid provides vital services for Ohioans with a broad range of chronic health care needs. Access to early and ongoing wellness and preventative care will reduce the costs of care and means our neighbors and friends contribute to our community and economy.

1. **Ohioans with disabilities** and income between 64% and 138% of federal poverty level will be eligible for Medicaid. Currently, they must meet a two-year disability waiting period for Medicare. During this time, they must seek free or discounted care or incur significant debt. Getting this care can be very difficult and consequently, their health deteriorates and they are much more expensive to treat when they finally become eligible.
2. **Ohioans with disabilities whose income is below 64% of the federal poverty level** will be eligible for coverage without the costly and time consuming process of Medicaid disability determinations. The expansion would eliminate the need for a disability determination, simplifying and speeding up the eligibility determination process and easing the burden on applicants, counties and the state to determine eligibility.
3. **Ohioans who use county mental health services** and have income between 64% and 138% of federal poverty level will be eligible for Medicaid. If the state opts not to expand Medicaid, they would continue to obtain some services from their county system but would not have access to the full range of Medicaid services. Additionally, a Medicaid expansion would shift the majority of costs for those individuals from the state to the federal government.
4. **Ohioans with chronic conditions** such as HIV, who are able to work, and have income between 64% and 138% of federal poverty level will be eligible for coverage sooner under the expansion. Currently, these Ohioans do not meet the requirements for Aged, Blind, and Disabled (ABD) Medicaid until their medical conditions make them unable to work, delaying treatment, accelerating the progression of their illness and resulting in higher costs to Medicaid when they do become eligible.
5. **Ohioans currently in limited Medicaid coverage programs** will be eligible for better treatment. Individuals who receive Medicaid only while they are pregnant would have access to coverage year round, and individuals in the Breast and Cervical Cancer Program would not have to wait for a diagnosis to become eligible and get coverage.

Every Ohioan, insured, underinsured or uninsured, who needs health care will benefit from the Medicaid expansion. As long as we have any uninsured Ohioans, every Ohioan will share the cost of their care, through cost-shifting, increased insurance rates, higher fees for health care, and the costs of emergency or episodic care rather than preventative care.

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