

Ohio's SCI Team, Advisory Council Grapple with Benefits, Financing of Expanded Health Coverage



In November we told you about the Governor's process to cut Ohio's 1.3 uninsured by 500,000 by 2011.

At its **November 20th** meeting the Health Initiative Advisory Committee (HCIAC) focused on the categories of benefits that should be in a health care plan that will be effective and affordable to cover uninsured Ohioans. Advisory Committee members ranked these benefits by cost and effectiveness. Primary care, preventive care, chronic care management, dental, vision and wellness were considered to be lower cost/more highly effective benefits. Also ranking high in effectiveness, but high in cost were hospitalization, mental health treatment, drug and alcohol addiction services, and prescription medications. Emergency room care ranked lower in effectiveness, but high in cost. The presence or absence of co-pays had marginal effect on the category in which the service was placed.

The HCIAC met again **December 11th**. An interdepartmental benefits team reported information it has gathered on best practices in plan design. The team's presentation is at: <http://www.healthcarereform.ohio.gov/HCRDoC/BenefitsCommitteessmallpresentation.pdf>

The committee then heard from multiple stakeholders to initiate its discussion on how to finance a health coverage expansion. Information was provided by UHCAN Ohio, AFSCME Local 8, the Ohio Association of Free Clinics, the Ohio Hospital Association, the Ohio Association of Community Health Centers, and others.

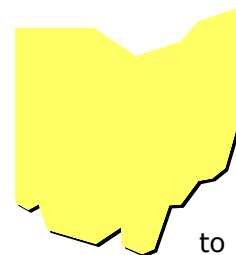
The next HCIAC meeting will be held January 22th from 10 to 4. The meetings are open to the public. You can follow the process at <http://www.healthcarereform.ohio.gov/index.aspx>.

Ohio Consumers for Health Coverage Continues Preparation for 2008

Since announcing its formation on November 13, 2007 OCHC has continued to get ready for what will be a very big year for health reform in Ohio. Expecting health coverage expansion plans from the Governor and the legislature, OCHC's Executive Committee on **December 12th** developed a media policy to propose to the larger OCHC Leadership Team and made plans for a strategic planning session in early January to set goals and a work plan for 2008.

Health care reform will be big in 2008. In addition to the plans anticipated from the Governor and legislature, 11 to 18 House of Representatives seats will be closely contested. In those races health care is likely to be a significant topic.

Add the presidential campaigns to the mix, where health care is already a major issue, and we can expect that consumers will enjoy an unprecedented opportunity to make our voices heard on health care.



Does your organization want to endorse OCHC? Want information on how to become active in your local area? Contact UHCAN Ohio, (614) 456-0060 or crudolph@uhcanohio.org. You can also click here to download the endorsement form. <http://www.uhcanohio.org/OCC%20Endorsement%20form%20revised%2011-1-07.pdf>. OCHC's principles are on page 3, below.

The next Southwest Ohio Consumers for Health Coverage meeting will be: Wednesday, January 9,



2008 2:30-4:30 PM at New Vision United Methodist Church, 4400 Reading Road in Bond Hill across from Sugar & Spice. Contact Lesley Jones at (513) 560-1993 or UHCAN Ohio at 614-456-0060.



Other States

California – The California Assembly has passed a compromise health coverage expansion program. It goes to the State Senate in January, and then depends on a ballot initiative to get the financing needed for the program which hopes to cover 3.7 million uninsured Californians.

Indiana – On **December 14, 2007** the Secretary of Health and Human Services approved a request by Indiana to modify its Medicaid program to cover 120,000 uninsured Indiana residents. Called the *Healthy Indiana Plan*, uninsured residents can buy an insurance product on a sliding scale. Those currently eligible for other insurance, including Medicaid with a spend-down, are not eligible for HIP. This is a significant problem since many persons have high spend-downs and rarely meet the spend-down to get Medicaid.

Maryland –A Medicaid expansion was approved **November 19th** by the Maryland Legislature that will result in Medicaid coverage for 100,000 additional Maryland residents. Maryland moved from having one of the lowest adult Medicaid eligibility levels in the country (hovering around 40% of the Federal Poverty Level) to covering adults up to 116 percent of the federal poverty level. Implementation of the coverage depends on the success of a ballot measure allowing slot machines.



Maryland Governor O'Malley signing health care expansion. <http://www.healthcareforall.com/HTML1.phtml>



One Out of Five Ohio Families Spending More than Ten Percent of Pre-Tax Income on Health Care Costs

Families USA reported on **December 5, 2007** that one in five non-elderly Ohioans is in a family that will spend more than ten percent of its 2008 pre-tax income on health care expenditures. This is 2.1 million Ohioans, and most of them *have* health insurance. Of the 2.1 million, 589,000 Ohioans are in families that will spend more than 25 percent of pre-tax income on health care in 2008.

"This is about everyday, middle-class Americans who have health insurance but are still facing delays in care, financial ruin ... (and) longer and longer lines in food pantries," Cathy Levine, UHCAN Ohio Executive Director told the Columbus Dispatch.

The report cited possible reasons such as rising premiums, increasing spending on services such as hospitalization and prescription drugs, and near monopoly power by insurance companies. U.S. Senator Sherrod (Go to **Families**, page 3)

Bush Administration turns down Ohio's Plan to Cover Kids

Ohio hit another bump on the road in its attempt to implement bi-partisan legislation to provide Medicaid coverage for children with family incomes up to 300 percent of the federal poverty level. On **December 20th** U.S. Health and Human Services Secretary Michael Leavitt rejected Ohio's plan. On December 21st an obviously angry Governor Ted Strickland stated: "Let me be clear: what this means is that thousands of needy Ohio children will be deprived of access to critical health care coverage."

Strickland vowed to fight on to cover children up to 300 percent FPL, possibly turning to litigation. He noted that the Secretary encouraged Ohio to submit a plan to expand coverage for children up to 250 percent of the FPL. (For a family of three, 250 percent of the FPL is \$42,925; 300 percent FPL is \$51,510.) Stay tuned.



(Continued from *Families*, page 2)

Brown agreed that insurance companies by denying treatment contribute to rising costs. But president and CEO of the Ohio Association of Health Plans, Kelly McGivern, called the study "not helpful at finding a solution to the issues that are challenging our health-care system." Also commenting on the release was U.S. Senator George Voinovich who stated "There is no doubt we must find a way to be smarter about the roughly \$2 trillion we spend as a nation each year on health care."

For full report see ***Too Great A Burden: Ohio's Families at Risk*** (December, 2007). <http://www.familiesusa.org/assets/pdfs/too-great-a-burden/ohio.pdf>

For Jonathan Riskind's article in the Columbus Dispatch, December 6, 2007 go to

http://www.dispatch.com/live/content/health/stories/2007/12/06/toomuch.ART_ART_12-06-07_B1_158MJMQ.html?sid=101



OCHC's Principles for Health Care Reform

OCHC and CAHO use these principles* as a yardstick to measure proposals for reform.

- Health care coverage should be available for all.
- Health care coverage should be continuous.
- Health care coverage should be affordable to individuals and families.
- The strategy for achieving health care coverage should be affordable and sustainable for society.
- Health insurance should enhance health and well-being by promoting access to high-quality care that is effective, efficient, safe, timely, patient-centered, and equitable.

*Adapted from *Insuring America's Health: Principles and Recommendations*, Institute of Medicine, 2004.

OCHC founding members: The founding members of the OCHC include AARP (Ohio), American Cancer Society, Ohio Division, Cerebral Palsy Association of Ohio, Faith Ministerial Alliance, Legal Aid of Southwest Ohio, National Alliance on Mental Illness Ohio, Ohio Council of Churches, Organize!Ohio, Ohio ACORN, Service Employees International Union (SEIU), Toledo Area Jobs with Justice, UHCAN Ohio, We Are the Uninsured and We Believe Ohio.

