

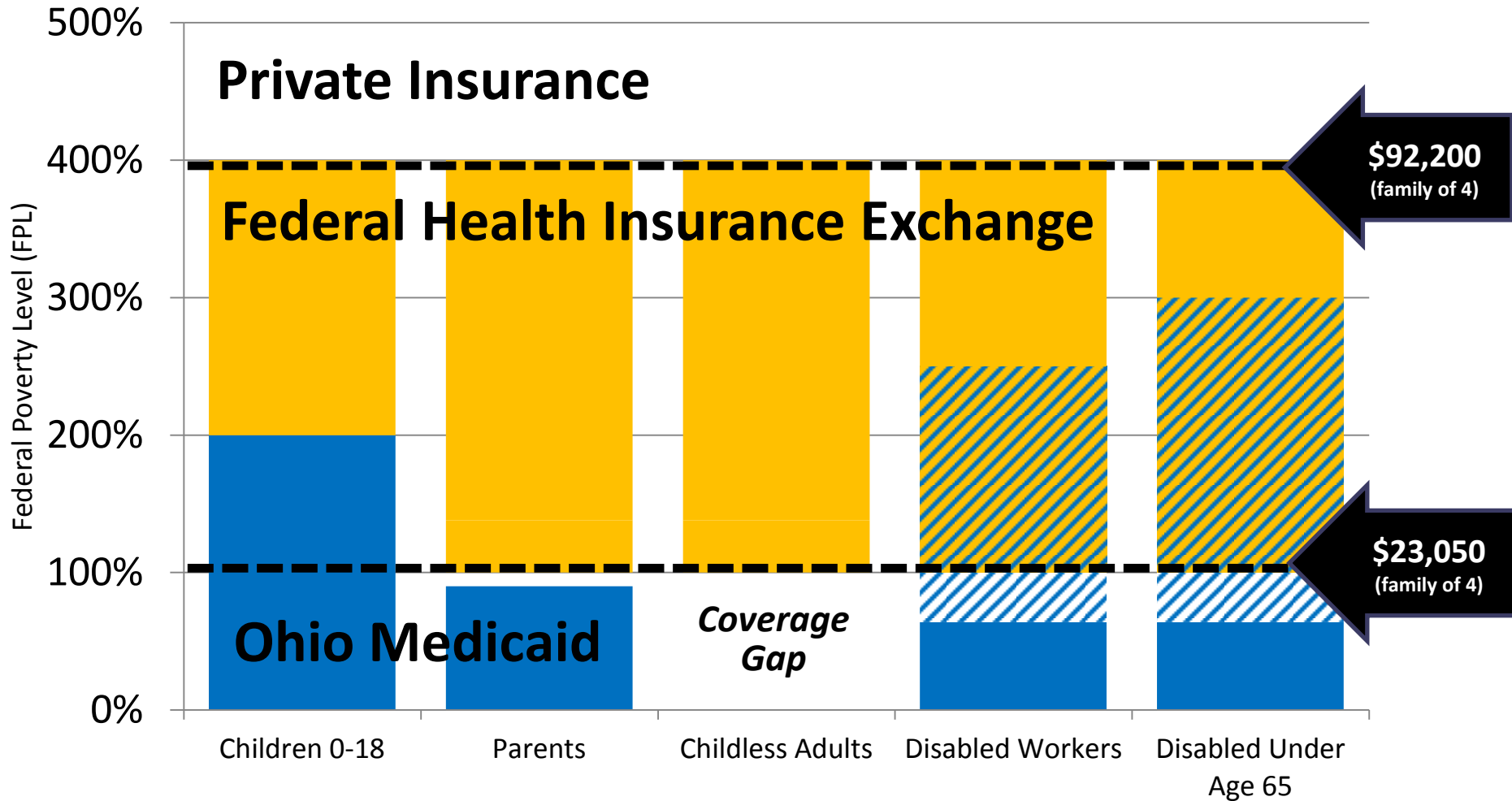
2011 Ohio Crisis

- \$7.7 billion fiscal imbalance
- 89-cents in the rainy day fund
- Nearly dead last in job creation
- Medicaid spending increased 33% over the 3 prior years
- Medicaid overspending required multiple budget corrections
- Ohio Medicaid stuck in the past and in need of reform
- More than 1.5 million uninsured Ohioans (75% of them working)

Ohio Health Transformation Plan

Modernize Medicaid	Streamline Health and Human Services	Pay for Value
<i>Initiate in 2011</i>	<i>Initiate in 2012</i>	<i>Initiate in 2013</i>
<p>Medicaid Cabinet: OHT (sponsor); AGE, ODH, ADA, MH, DD, Medicaid; with connections to JFS</p>	<p>HHS Cabinet: DAS, OBM, OHT (sponsors); JFS, RSC, AGE, ADA, MH, DD, ODH, Medicaid; with connections to ODE, DRC, DYS, DVS, ODI, TAX</p>	<p>Payment Innovation Task Force: OHT (sponsor); Medicaid, BWC, DAS, DEV, DRC, JobsOhio, OPERS, ODI, TAX</p>
<ul style="list-style-type: none"> • Eliminate fraud and abuse • Prioritize home and community services • Reform nursing facility payment • Enhance community DD services • Integrate Medicare and Medicaid benefits • Rebuild community behavioral health system capacity • Create health homes for people with mental illness • Restructure behavioral health system financing • Improve Medicaid managed care plan performance • Extend Medicaid coverage to more low-income Ohioans 	<ul style="list-style-type: none"> • Create the Office of Health Transformation (2011) • Implement a new Medicaid claims payment system (2011) • Create a unified Medicaid budget, accounting system • Create a cabinet-level Medicaid Department (July 2013) • Consolidate mental health and addiction services (July 2013) • Simplify and replace Ohio's 34-year-old eligibility system • Coordinate workforce programs • Share services across local jurisdictions • Recommend a permanent HHS structure (coming soon) 	<ul style="list-style-type: none"> • Participate in Catalyst for Payment Reform • Provide access to medical homes for most Ohioans • Use episode-based payments for acute medical events • Pioneer accountable care organizations • Accelerate electronic health information exchange • Promote insurance market competition and affordability • Support regional payment innovation

Ohio Medicaid and Insurance Exchange Eligibility in 2014



Governor's Office of Health Transformation

SOURCE: Ohio Medicaid; Medicaid eligibility as of February 2013; Federal Health Insurance Exchange eligibility as of January 2014; 2012 poverty level is \$11,170 for an individual and \$23,050 for a family of 4; over age 65 coverage is through Medicare, not the exchange.

Who is Stranded in the Coverage Gap?

- Ohioans with income less than 100% of poverty (\$11,170 for an individual or \$23,050 for a family of four)
- Many work but their employer does not offer or they cannot afford health insurance
- Many work as health care providers for others but don't themselves have coverage
- Many are over age 55 looking for work but finding it difficult
- At least 26,000 are veterans
- Some are unable to work because of mental illness or addiction but have no regular source of care to recover
- ***When these uninsured individuals seek care, often in the emergency room, other Ohioans pay the cost through higher premiums and other indigent care programs***

2011 Ohio Crisis

vs.

Results Today

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| <ul style="list-style-type: none">● \$7.7 billion fiscal imbalance● 89-cents in the rainy day fund● Nearly dead last in job creation● Medicaid spending increased 33% over the 3 prior years● Medicaid overspending required multiple budget corrections● Ohio Medicaid stuck in the past and in need of reform● More than 1.5 million uninsured Ohioans (75% of them working) | <ul style="list-style-type: none">● Balanced budget● \$1.4 billion in the rainy day fund● Ranked number 1 in the Midwest● Medicaid spending was held to below 3% in 2012● Medicaid spending came in \$590 million under budget in 2012● Ohio has emerged as a leader in reforms to modernize Medicaid● There are still 1.5 million Ohioans who are uninsured |
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