

WITNESS INFORMATION FORM:

Subject: WRITTEN ONLY

DATE: MARCH 22, 2017 FOR TESTIMONY ON MARCH 23

NAME: Cecilia Trissel

POSITION/TITLE: I am the mother of Emerson Trissel, diagnosed with Cystic Fibrosis.

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ARE YOU REPRESENTING:

YOURSELF ORGANIZATION: _____

DO YOU WISH TO TESTIFY ON LEGISLATION (BILL NUMBER): HB 49

GOVERNORS PROPOSED BUDGET

SPECIFIC ISSUE: CMH PROPOSED CHANGES

SUBJECT MATTER: OUR PERSPECTIVE ON THE PROGRAM

DO YOU FAVOR _____ OR OPPOSE THE ENACTMENT OF THE LEGISLATION REGARDING THE ISSUE?

PLEASE GIVE A BRIEF STATEMENT OF THE GROUNDS ON WHICH YOU FAVOR OR OPPOSE SUCH ENACTMENT:

Chairman Romanchuck, members of the HHS subcommittee thank you for the opportunity to provide written testimony on CMH - Children with medical handicaps, also known as the "BCMh" program.

My name is Cecilia Trissel, my husband and I reside in Delaware county and have grown up in Ohio all of our lives. Our first child Emerson was born in November of 2013. At 10 days old she was unexpectedly diagnosed with an incurable and terminal genetic disease, Cystic Fibrosis.

I am writing today to put a face to the 40,000 children served by the CMH Program in the Department of Health and ask that you save the CMH Program by protecting it from proposed changes in the Governor's budget. Please allow the program to continue to provide an important

safety-net for chronically ill children like my daughter. The proposed changes will dramatically reduce services and eligibility for this critical program.

Although the proposed language seems to “grandfather” our family unto the CMH Health Program, I'm concerned not only about future generations but also with my families future eligibility when our income changes. There has been nothing written in the proposal about the current CMH cost share program and if that portion of the program will be also grandfathered into the switch over to Medicaid. Our family makes too much for our daughter to be on Medicaid but not enough to afford all of her medication and appointment copays after private insurance and this is where CMH comes in. Without CMH We would have to sell our home and everything we own to insure our daughter receives the proper treatments and medications for her disease. Having a child with a life long disease brings a lot of stress and hardships, CMH was one of the things that helped relieve the scariness of navigating through this life of taking care of a chronically ill child. The worry of not knowing if our daughter will be alive next year or 10 years from now is something no parent should have to face but even worse not being able to financially provide medications and treatments that can extend your child's life is terrifying. CMH has made it possible for our daughter to have zero hospital stays in 3 years because they have helped with copays of her treatment medications to keep her healthy and out of the hospital. The CMH program has allowed middle income class families like mine to stay privately insured, contributing to Ohio's economy, paying taxes and owning our own home. In my previous experience with the Medicaid program they are not likely to provide families like us with proper coordination services or financial criteria needed for a thriving program for Ohio's medically fragile children. I am concerned that the CMH children will fall through the cracks if the program is moved to the department of Medicaid.

In closing, Mr. Chairman, thank you for protecting Ohio's children by allowing the CMH program to continue providing services through the department of health for Middle and low income families. Thank you for the opportunity to share my family's story and I would be happy to answer any future questions you may have.

Thanks,
Cecilia Trissel



