

**Testimony of Kayla Kemats, RN- WRITTEN ONLY**  
**Public Health/BCMh Nurse at the Columbiana County Health Department**  
**HB49 as Introduced by the Governor**  
**House Finance- Health and Human Services Subcommittee**  
**March 23, 2017**

Chairman Romanchuk, members of the HHS Subcommittee, thank for you the opportunity to provide testimony on the CMH- Children with Medical Handicaps, also known as the “BCMh” program.

My name is Kayla Kemats. I am a nurse at the Columbiana County Health Department where I have worked with the families and children on the BCMh program since February 8<sup>th</sup>, 2016. I have lived in Lisbon, Ohio my entire life and Lisbon also is where the Columbiana County Health Department is located.

I am writing on behalf of the 40,000 children served by the CMH program in the Department of Health. I ask that you save the Children with Medical Handicaps 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 in Ohio and in particular, the 211 children I serve in Columbiana County.

Through this program, I have come into contact with incredible, strong, and hard working families. These families did not choose for their children to have a medical handicap but due to this, they want to provide the best care possible within their means. The CMH program has taken out that last part of that statement. With the CMH program, they are able to provide the best care for their child. This program has allowed the health of the child to increase and has also taken the financial burden off of the families. I understand that the language states the children on the program as of July 1<sup>st</sup>, 2017, have an income greater than 225% of the federal poverty level and private insurance will be grandfathered into the program, but my concern then is directed to the new baby born July 2<sup>nd</sup> 2017 with a heart defect or the child just diagnosed with cancer who do not fall in the 225% of the federal poverty level. Just because these families are above the 225% of the federal poverty level does not make them any less of a vulnerable population.

The CMH program has been around almost 100 years and has been such a successful program in aiding families whether they have private insurance or Medicaid. Families need this program in order to sustain the health of their child and family. I am concerned that the CMH children will fall through the cracks if this program is moved to the Department of Medicaid.

This program is focused on the health and well-being of children and their families. There have been many times I have walked into a home to see one child on the program and a sibling will have a diagnosis that will be covered through the BCMh program as well. This allows me to be able to help that child and family at that exact moment. At that point I am serving the public as I should be by increasing the overall health of that entire family. That is what being a public health nurse is about.

In closing, Mr. Chairman, thank you for protecting Ohio’s children by allowing the CMH program to continue to provide services to middle- and low-income families. Thank you for the opportunity to share my personal experience with the CMH program. I would be happy to answer any questions.