

Testimony of Laura Hammond, Mother of Christopher and Collin Hammond (former CMH patients)
HB49 as Introduced by the Governor
House Finance - Health and Human Services Subcommittee
March 23, 2017

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

My name is Laura Hammond, my husband and I are the parents of 4 wonderful boys. Our two oldest boys have had CMH coverage. Our oldest, Christopher, was diagnosed with Type 1 Diabetes in 2012. Our second son, Collin, was diagnosed with a hematology disorder called ITP (immune thrombocytopenia) in 2013. Christopher is still under the care of an endocrinology team and Collin was declared disease free as of 2014 for which we are eternally grateful. Both of them are with me here today.

I am here, not just for our family and those that are currently enrolled in CMH, but all of the future families that may find themselves where we were: "good" private insurance, above the 225% FPL, a child with a major medical diagnosis and not sure how we were going to make it happen, both medically and financially. When our oldest was discharged from the hospital, we were handed a folder by a social worker of Medicare/Medicaid/CMH financial assistance information. We didn't give it a second thought – assuming we wouldn't qualify. Families like ours never do. When we were contacted by our county CMH nurse and she explained the diagnostic aspect of CMH was NOT income dependent; it is hard to put to words our relief. Our CMH diagnostic coverage gave us a strong foundation both medically and financially. We were able to expedite durable medical equipment through patient advocacy and the power of the Ohio Department of Health. We had a readily accessible CMH nurse and advocate for both of our children. She was able to get answers where I couldn't and put pressure on insurance companies where I didn't know how to – all the while teaching me so I could eventually do it myself. CMH was there with advocacy and to pick up financially where our private insurance dropped off.

For some families, CMH is an ongoing support system. For other families, CMH is not designed to be permanent support. For some, the purpose of CMH to help us get a strong foundation during one of the most difficult challenges of a parent's life. It is designed to set families up for success, both medically and financially, while providing a future safety net if needed. For our family, it gave us time. Time to get our finances in order so that we wouldn't need program assistance in the future and time to focus on the needs of our children. The proposed changes would take this away from future families like ours.

The HB states that all of those currently enrolled will be "grandfathered" in under the parameters of the existing CMH program. However, the Ohio Department of Health has not; to my knowledge, clarified what happens if you are on the CMH program and do not meet your annual cost share (commonly referred to as pay down) amount. Does this constitute a "change in financial eligibility"? Does the CMH family need to then re-enroll in the Medicaid version of the program? I ask this not for an answer, but to state that there are some unknowns that remain to be clarified for a lot of the existing CMH families. And, grandfathering aside, where is the protection for families that have not

yet had a diagnosis that are above the 225% FPL? We were there. Without CMH help, we would have had to put a lot of medical expenses on credit cards as our liquid savings could not have handled all of the thousands of dollars in medical bills. We would have missed house payments and car payments, possibly defaulting, to ensure that our children had the medicine and treatments they needed. We wouldn't have been able to afford the durable medical equipment on top of all of the hospital bills. The advocacy and financial support for our boys by the CMH program and nurses ensured that the patient remained the focus. In short, without CMH we would have been set up to fail. Instead, CMH gave us a strong foundation to care for our boys, knowing there is a safety net still, just in case. I am asking that this opportunity for a successful start to one of the greatest challenges a family can face, is preserved for ALL of the Ohio families that you represent.

In closing, Mr. Chairman and committee members, thank you for protecting Ohio's children by allowing the CMH program to continue providing services to middle- and low-income families. Thank you for the opportunity to share my family's story and I would be happy to answer any questions.

p.s. I have included pictures of both boys, at time of diagnosis/treatment and from this past summer. It is amazing what a difference systematized care can make.



Christopher at Diagnosis with T1D 2012

Christopher happy and healthy with insulin pump and continuous glucose monitoring summer 2016.

Made possible by patient advocacy and secondary insurance coverage of CMH



Collin during treatment ITP in 2013/14
Collin adventurous, strong and disease free summer 2016