

Testimony of Olivera Bratich, - WRITTEN ONLY

Mother of Jovan Levi Bratich Massing

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 "BCMHS" program.

My name is Olivera Bratich and I'm a resident of Columbus, Ohio, a small business owner and a mother to a child with a genetic disorder known as 22Q Deletion Syndrome. After an uneventful pregnancy and typical labor and delivery, my son Jovan had medical difficulties almost immediately after birth. He spent two weeks in the NICU at Nationwide Children's Hospital while his feeding difficulties were assessed and treated. During this time, he was tested and diagnosed with a 22Q Deletion. Also known as DiGeorge Syndrome or Velocardiofacial Syndrome (VCFS), a 22Q Deletion causes disruptions and chronic medical issues with almost every system of the body. How the deletion presents itself is different for every child and for our son it has meant severe developmental delays, an Autism Spectrum Disorder (ASD) diagnosis, and chronic gastro-intestinal issues. He requires ongoing medical care from 22Q specialists as well as orthotics to treat a related foot deformity and regular speech, physical, and occupational therapies.

I am writing today to help 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. This program provides an important safety net for chronically ill children like my son and for working families like ours. The proposed changes dramatically reduce services and eligibility for this critical program putting thousands of children and families at risk. I ask you to reconsider these proposed changes and make a budget decision that will ultimately benefit the state by keeping working families out of poverty.

Although the proposed language may "grandfather" our family into the CMH Health program, I'm concerned about the children born after the proposed changes would take place as well as my

family's continued eligibility. My family is currently a cost-share family and the proposed change to move the program into Medicaid will mean that we may no longer meet the financial eligibility guidelines. The ongoing assistance we receive through CMH to treat my son's conditions keeps our family financially stable, keeps us in our house, and keeps me able to work on a small business which employs nine other Ohioans.

Had CMH not been available to help us soon after my son was born, his genetic testing and lengthy stay in the hospital would have financially devastated our family. I fear for the working families with children born after July 1, 2017 if these proposed changes take place. Without the help of CMH, everything a family has ever worked for – to own a house, to pay bills on time, to provide a stable financial foundation for their children – could disappear overnight with a diagnosis requiring the kind of ongoing medical treatment my son receives. For our family and thousands of other Ohio families, CMH is the critical safety net that has kept us afloat.

While we are privately insured through my husband's employer, CMH also helps us afford the life altering treatments that are frequently denied by insurance companies. Despite referrals and recommendations from multiple physicians, the insurance company denied my son speech therapy treatment. The full out of pocket cost for treatments was beyond our financial capabilities, but when CMH helped cover those costs, my son went from being a non-verbal toddler to an enthusiastic pre-schooler with a verbal opinion on just about everything. No child should be denied that chance to thrive because their parents income falls too squarely in the middle – not at poverty level but not enough to pay fully out of pocket.

The assistance of CMH keeps working families contributing to the Ohio economy, paying taxes and owning homes. Without the assistance of CMH, my family may have fallen into bankruptcy and others surely will if the proposed changes are approved.

There is almost no population more vulnerable than medically fragile children. We are lucky to live in a country and in a state that recognizes this and provides assistance for those children and keeps their families from slipping into poverty because of their circumstance. These children's special health needs are best assessed and met through the Department of Health, not through Medicaid.

In closing, Mr. Chairman, I implore you to continue 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.