Chair Merrin, Vice Chair Manning, Ranking Member Boyd, and members of the House Health Committee, thank you for the opportunity to testify in favor of House Bill 287, a bill that will allow for reciprocity of services for active duty military families who have a child or spouse who has previously been approved for home and community-based Medicaid Waiver services retain those services upon relocation to Ohio.

My name is Joseph Gibson, and I am pleased to have this opportunity to testify before your Committee. I was born in Dayton, Ohio, grew up in New Lebanon, Ohio, and enlisted in the Air Force immediately following graduation. My family and I arrived back to Ohio on military orders in July, and we currently reside in Brookville, Ohio. I have been an active duty Airman for the past 21 years. During my service, I have held a variety of leadership roles caring for Airmen across many spectrums. From providing support to our most elite special operations warfighters, to Airmen supporting our nation’s most lethal, strategic weapon system, to Airmen providing intelligence support to our nation’s most senior leaders. In my current capacity, I am the Superintendent of the Air and Cyberspace Intelligence Group, National Air and Space Intelligence Center, Wright-Patterson Air Force Base, Ohio supporting the total force Airmen who are providing scientific and technical intelligence to our nation’s policy makers.

Regardless of location, the stresses placed on military families are unique. Over the past 21 years, I have witnessed and personally dealt with the difficulties placed upon military families by military mandated moves. These moves become even more complicated and stressful when you have a special needs child or family member, who requires specific and appropriate care established at a new duty location upon arrival. I can speak first hand at the difficulties this brings, as I am a father of a child who is 100% dependent on me and my wife for his daily needs.

Zachary is a soon to be 13 year old, handsome young man who was diagnosed with Spastic Quadriplegia Cerebral Palsy at the age of 8 weeks. Over the past 13 years of his life, we have experienced multiple
levels of complications with the health care and educational systems and these are only magnified with every move. During the first 7 years of Zachary’s life, finding appropriate care and placement for Zachary was a struggle. We quickly discovered childcare, and schools were not equipped or prepared to care for a child with specific health conditions that require 1-on-1 nursing care. In 2014, after exhausting all measures of finding appropriate care, we received an assignment to Langley Air Force Base, Virginia where we were first introduced to the Medicaid Waiver program. The services Zachary qualified for provided him with the appropriate level of care by a licensed nurse that our primary insurance of Tricare does not cover. Based on Zachary’s medical condition, he qualified for 84 hours of nursing care per week under the Virginia Medicaid Waiver Program. The waiver program also covered adaptive and assistive equipment that TRICARE deemed “luxury” items, which have been pivotal in Zachary’s care, mobility, and development.

In December 2018, I received official notice of a new assignment to Ohio. Upon receipt of this notice I immediately looked to see if Ohio had any reciprocity procedures in place that would allow the services he received under Virginia’s Medicaid Waiver Program to follow him to Ohio. After hours of research, I discovered no such thing existed. At this point I was faced with a situation that I was not only moving my family from a community where we were deeply established, I was moving my wife from a job in the local educational system to a state that at the time did not provide reciprocity of licensure, but ultimately I was about to make the decision to remove Zachary from a state and health-care system that provided him with the required and appropriate level of care he needed.

Since July, upon arrival in Ohio, we have been working on establishing health care between WPAFB, Dayton Children’ Hospital and Cincinnati Children’s Hospital networks. We have applied for Medicaid Waiver services through Montgomery County, but was told there is approximately a 2-3 year wait and we are currently waiting for an assessment just to determine eligibility. Under TRICARE, we are currently receiving 55 hours of nursing care; however, these hours are only for in-home care and cannot be utilized during the school day, which introduces a new layer of complication we are currently battling.

Moving around, fighting for the appropriate level of care for our child against broken systems has brought my family and I to our knees. I respectfully ask that you consider the importance of this Bill, and the magnitude of impact it will have on our Active Duty military families. The enactment of House Bill 287 will
certainly and creditably provide my child and the family members of Active Duty military members with the expedited, appropriate level of care already deemed necessary, upon their transfer to the Great State of Ohio.

Chair Merrin, Vice Chair Manning, Ranking Member Boyd, and members of the House Health Committee, I thank you for the opportunity to share my experience with you. I am ready to answer any questions you may have.