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**Ohio House Medicaid Committee**  
**S.C.R. No. 5**  
**Groundwork Ohio**  
**May 6, 2025**

*Opponent Testimony for Medicaid Work Requirements*

Chairwoman Gross, Vice Chair Barhorst, Ranking Member Baker and members of the committee, thank you for the opportunity to submit written testimony in opposition of work requirements for the Group VIII population. My name is Caitlin Feldman and I am the Policy Director with Groundwork Ohio. We are the state's leading early childhood advocacy organization focused on the healthy development of young children and their families.

Our testimony reflects our deep concerns for the proposed work requirements, which have potential to adversely affect the health and well-being of Ohio's parents and young children. Covering almost half of all births and children under age five in the state, Ohio Medicaid is instrumental in ensuring health outcomes for children. Healthy outcomes for children are closely linked to the health of their parents, and we believe these work requirements will impact parents and children in the following ways:

**Impact on Preconception Care and Maternal Health**

Ensuring that women are healthy before becoming pregnant is essential for healthy pregnancies and positive birth outcomes. Women on Medicaid are more likely to have behavioral health conditions and chronic diseases that increase health risks during pregnancy. The Ohio Department of Medicaid recently reported that among pregnant women:

- 34% of pregnant moms had a mental health diagnosis
- 10% had a substance use disorder
- 28% had hypertension
- 18% had diabetes.<sup>i</sup>

Managing these conditions before pregnancy is critical. The implementation of work requirements may cause women who are planning to conceive to lose access to

necessary health care services, leading to poorer health outcomes for both mothers and babies. This would ultimately undermine progress toward improving birth outcomes in the state.

### **Impact on Pregnant Mothers**

The work requirement language is unclear about automatic exemption of pregnancy as a qualifying condition. The absence of language explicitly stating that women during pregnancy and the postpartum period are exempt from work requirements increases risk of coverage loss or missed care due to confusion. Without an automatic exemption to help eliminate confusion and avoid administrative red tape for this vulnerable population where early care is critical, delay in coverage and services could be experienced. During the Medicaid unwinding process, data suggests 70% of disenrollment was not due to ineligibility, but rather was procedural.<sup>ii</sup> This raises concerns about the readiness of Ohio's state system to implement work requirements, which will increase administrative burden within the department and likely lead to the disenrollment of eligible women.

Ohio continues to rank among the bottom ten states for maternal and infant mortality. Timely access to high-quality prenatal care is essential, the absence of which increases risks of adverse maternal and birth outcomes. Access to maternity care is particularly challenging in rural and Appalachian regions of Ohio, where thirteen counties have no obstetric or gynecological providers, and 23.4% of women travel over thirty minutes to the nearest birthing hospital.<sup>iii</sup> These factors lead to delayed or missed health care and increase risk for health complications during pregnancy and delivery.

The implementation of work reporting requirements, along with placing the burden on health care providers to verify patient exemptions, could have far-reaching negative consequences. These include: (1) the potential disenrollment of approximately 61,826 individuals from Medicaid coverage, and (2) increased strain on already overstretched and under-resourced health centers - particularly those serving rural and Appalachian communities in Ohio. Additionally, an increase in uncompensated care could further jeopardize the financial stability of rural hospitals, increasing the risk of closures and worsening access to essential health care for pregnant women and infants.

### **Parents' Coverage Affects Children's Health**

Parents' health coverage significantly impacts children's access to care. If parents lose Medicaid coverage due to difficulty meeting work requirements—such as Medicaid administrative hurdles, lack of available jobs, or unstable work hours in a qualifying job— children may also experience coverage interruptions, even if they remain

eligible for Medicaid. The loss of coverage for children could lead to gaps in care and poorer health outcomes. These circumstances also underscore the need to prioritize approval of Ohio's policy to implement multi-year continuous coverage for babies from birth to three years old as another tool to defend against eligible children losing coverage.

### **Lack of Affordable Child Care Is a Significant Barrier to Work**

Ohio parents face significant challenges in securing and maintaining employment due to a lack of affordable child care, directly impacting family financial stability. The proposed work requirements fail to account for the significant barriers posed by the high cost and limited availability of child care in Ohio.

Child care is among the most significant costs families face - exceeding the cost of housing or in-state college tuition. Child care workers are also struggling to make ends meet. In Ohio, 30.2% of child care workers are covered by Medicaid, compared to just 27.8% of the national child care workforce.<sup>iv</sup> Groundwork Ohio recently polled working parents in Ohio and found that:

- 49% of working parents in Ohio have had to cut back on their work hours to care for their children due to the lack of available affordable child care.
- 61% of non-full-time working mothers would return to work if their child has access to quality child care at a reasonable cost.<sup>v</sup>

These findings hold true across the economic spectrum but are most pronounced in the lower-income/Medicaid-eligible tiers. Although the proposed waiver includes an exemption for "unpaid employment status" for caregivers, it lacks clarity and specificity for parents providing child care to their children. Additionally, documentation requirements for this exemption pose a risk to Medicaid coverage for parents who are fulfilling caregiving responsibilities. Without reliable, affordable child care, many parents will struggle to meet work requirements, leading to potential loss of Medicaid coverage.

### **Conclusion**

Proposed work requirements threaten the health and stability of families, particularly those who are pregnant or with young children. Medicaid coverage loss will create significant barriers to accessing necessary health care services, increasing risks for negative maternal and infant health outcomes. Furthermore, the policy fails to acknowledge the current systemic challenges parents face in securing employment, particularly the lack of affordable child care options.

We urge you to consider the far-reaching consequences of these work requirements and consider the health and economic security of Ohio's children and families. Thank you for your consideration.

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<sup>i</sup> Ohio Medicaid Director Corcoran's [presentation](#) to the Joint Medicaid Oversight Committee in March 2024.

<sup>ii</sup> Whitener, K. (2025). *What is happening with Medicaid renewals in each state?* Center for Children and Families. <https://ccf.georgetown.edu/2023/07/14/whats-happening-with-medicaid-renewals/>

<sup>iii</sup> March of Dimes. (2023). Access to Maternity Care in Ohio.

<sup>iv</sup> Source: Georgetown University Center for Children and Families analysis of U.S. Census Bureau 2023 American Community Survey (ACS) Public Use Microdata Sample (PUMS). Link: [Medicaid is a Critical Support for the Early Childhood Education Workforce – Center For Children and Families](#)

<sup>v</sup> Groundwork Ohio, Public Opinion Strategies (2025). Ohio Statewide Survey: Key Findings. [d114b9\\_34df68bea178457ebf0e1e440259a674.pdf](#)