Good morning, Chair Cirino, Vice Chair Chavez, Ranking Member Hicks-Hudson, and members of the Ohio Senate Finance Committee.

My name is Danielle Firsich, and I am the Director of Public Policy for Planned Parenthood Advocates of Ohio and Planned Parenthood of Greater Ohio. Thank you for accepting my written testimony in strong opposition to the provisions of House Bill 96 that would vastly impact Ohio's public schools, Medicaid, and sexual and reproductive healthcare access.

Impacts on Sexual and Reproductive Healthcare

We at Planned Parenthood strongly oppose the following aspects of the HB96 budget bill:

- Requiring the Ohio Department of Health to develop a public electronic dashboard to publish abortion data reported to the department on a monthly basis.
- Requiring abortion providers to report the number of in state and out of state abortions to the Ohio Department of Health, including patient zip codes.
- Limiting Medicaid coverage of doula services to the six counties with the highest infant mortality rates and requiring total payments for doula services not to exceed \$500,000 in a given fiscal year.
- Removing the exception allowing the Ohio Department of Health Genetic Services funds to be used to counsel or refer for abortion in the case of a medical emergency.
- Failing to allocate the necessary \$35 million of funding for House Bill 7, the Strong Foundations Act, which went into effect on April 9, 2025.
- Allowing a tax credit of up to \$750 for donations made to Pregnancy Resource Centers.

This state budget poses serious risks and will hurt Ohioans rather than provide the support they both need and deserve. We all deserve the ability to decide if, when, and how we become pregnant. Abortion access allows people to make the decisions best for them—including for their career and economic future. Ohio Republicans are fully aware that their actions are unpopular and harmful to our communities. In 2023, 57% of Ohioans voted to enshrine reproductive freedom in the state constitution—making it clear that attacks on abortion rights go against the will of the people.

Publishing abortion data threatens patient privacy. Abortions in Ohio are already heavily monitored, and wasting more resources to surveil abortion interferes with a person's decision to have an abortion in Ohio, undermining the reproductive freedom amendment. Since 2011, Ohio has enacted over 31 restrictions on abortion access, leading to the

closure of multiple health care facilities. Despite these challenges, Planned Parenthood health centers in Ohio have continued to be a haven for people fleeing their home state to access essential abortion care.

House Bill 7, the Strong Foundations Act, addresses maternal and infant mortality to improve health, developmental, and learning outcomes for infants and mothers via expansions to prenatal, postnatal, infant, and toddler health care, early intervention, and wraparound services and supports. Despite House Bill 7 taking effect on April 9, 2025, the funding mechanism for the bill was stripped in the final hours of the 135th General Assembly in 2024. And now, Ohio legislators have failed to address the funding need in the new state budget, despite their promise to do so. In fact, many programs that directly impact and benefit growing children and families have had funding greatly reduced or eliminated entirely.

This budget bill also allows a tax credit of up to \$750 for donations made to Pregnancy Resource Centers. Rather than allowing Senate Bill 40 to go through the normal committee hearing process, allowing for transparency and public input, this budget incorporates the mechanisms of that bill into the state budget itself. Crisis pregnancy centers (CPCs), also known as fake clinics, are institutions that spread misinformation about pregnancy and abortion. Under the guise of providing health care services like free pregnancy tests, ultrasounds, and diapers, these institutions cause great harm in communities. CPCs outnumber abortion health centers 16:1. They do not staff health care providers, and the information shared with them is not protected by HIPAA.

In the 2025-2027 budget alone, fake clinics will receive \$20 million to spread disinformation about pregnancy options. Fake clinics use coercive tactics not based on standard medical practices to shame people into keeping their pregnancies, even if they don't want to. Giving even more money to fake clinics funnels funds away from real reproductive health care and into the already deep pockets of anti-abortion groups who lobby conservative politicians to continue these culture wars instead of what Ohioans want - affordable health care and childcare.

At Planned Parenthood Advocates of Ohio, we believe that every pregnant person deserves high-quality, accessible, and affordable health care that is delivered with humanity, dignity, and respect. We require not only robust public health systems and policies that support pre and postnatal care, but also a true dedication to increasing access so that all pregnant people and their children can flourish and thrive. I strongly encourage you to invest our taxpayer dollars in evidence-based care from licensed medical providers, and programs that actually serve to address health crises like the heinous maternal and infant mortality

rates across this state. I strongly encourage you to place patients and their families first by allocating power and resources toward organizations that provide expert care.

Impacts on Medicaid Access

Planned Parenthood Advocates of Ohio is part of Ohio Medicaid Matters, a coalition of more than 80 organizations, including the state's leading human services agencies, health advocacy associations and hospital systems. We believe Medicaid is foundational to Ohio's economic success, and we want as many Ohioans as possible to have the health care they need to work and thrive.

Nearly 43% of patients who seek healthcare from Planned Parenthood of Greater Ohio are covered by Medicaid. In Ohio, providers of sexual and reproductive health care are already struggling with low Medicaid reimbursement rates that make it difficult to deliver comprehensive, accessible, and affordable care their patients rely on. That includes wellness exams, vaccines, cancer screenings, and other critical services. Any additional cuts to Medicaid funding for these services would be devastating. Per a recent article in the Ohio Capital Journal, Ohio is near the bottom of national rankings for infant and maternal mortality rates. And with "children making up one-third of national Medicaid enrollment and 40% of all births in the country covered by Medicaid, cuts could mean even more struggles for the state's children and mothers." Ohioans who lose Medicaid coverage will face delayed or denied care for treatable conditions, thereby increasing the likelihood of pregnancy complications, including those that risk the life or health of both the pregnant person and their child. Moreover, losing coverage for preventative care will inevitably lead to an increase in costly emergency room visits, burdening both hospitals and patients with enormous costs and further straining our statewide healthcare system.

As currently proposed, the Medicaid expansion defunding trigger language in HB 96 would immediately discontinue medical assistance for the 770,000 Ohioans in the Medicaid expansion group if the Federal Medical Assistance Percentage dips below 90%. Ohio Medicaid Matters is asking lawmakers to enable flexibility and change the trigger language from "shall" to "may." This change would give our state time to understand the impact of any potential federal changes and assess what our state can afford to cover for Ohioans. This flexibility shouldn't be a problem for a legislature entertaining a deal for a billionaire's football stadium, particularly while their constituents consistently say that health care costs are the leading cause of debt and bankruptcy.

When this legislature voted to expand Medicaid, you saved the lives of thousands of Ohioans, who became eligible for health care interventions they needed and couldn't afford, and you kept thousands healthier longer with access to screenings and preventative care. Since Medicaid expansion, Ohio has halved its previous uninsured rate and reduced the need for high-cost emergency room visits, long hospital stays, and additional public spending through expanded preventative care. We urge you not to undo these successes and push our state backwards.

You may hear claims that the expansion population represents people who don't actually need Medicaid coverage. That is simply not true. According to the Health Policy Institute of Ohio, a 2018 Medicaid report found that "94% of Group VIII enrollees were either employed, in school, taking care of family members (such as children or grandchildren), participating in an alcohol and drug treatment program or dealing with intensive physical health and/or a mental health illness." Ohio already ranks 44th in the nation on health value (a combination of population health and healthcare spending metrics), and any further threats to affordable healthcare are something that Ohioans simply cannot afford. Many Ohioans are already "facing substantial out-of-pocket healthcare expenses," with nearly 1 in 5 paying more than 10% of their annual household income for health care. The impact of stripping over three-quarters of a million Ohioans of their healthcare would be catastrophic statewide, particularly in metropolitan and Appalachian counties that represent the highest rates of Medicaid Expansion enrollment.

The members of this committee are the elected representatives intended to serve the interests of their constituents. If the proposed trigger language were to remove Ohio from the Medicaid Expansion, the members of this committee would see the following direct and immediate impacts in their districts:

- 15,297 individuals in Chair Cirino's 18th Senate District would lose Medicaid coverage.
- 22,262 individuals in Vice Chair Chavez's 30th Senate District would lose Medicaid coverage.
- 31,022 individuals in Ranking Member Hicks-Hudson's 11th Senate District would lose Medicaid coverage.
- 19,160 individuals in Senator Blessing's 8th Senate District would lose Medicaid coverage.
- 10,011 individuals in Senator Brenner's 19th Senate District would lose Medicaid coverage.
- 33,772 individuals in Senator Craig's 15th Senate District would lose Medicaid coverage.

- 35,531 individuals in Senator Ingram's 9th Senate District would lose Medicaid coverage.
- 22,459 individuals in Senator Lang's 4th Senate District would lose Medicaid coverage.
- 14,859 individuals in Senator Manchester's 12th Senate District would lose Medicaid coverage.
- 19,971 individuals in Senator Manning's 13th Senate District would lose Medicaid coverage.
- 25,351 individuals in Senator O'Brien's 32nd Senate District would lose Medicaid coverage.
- 22,319 individuals in Senator Patton's 24th Senate District would lose Medicaid coverage.
- 16,702 individuals in Senator Romanchuk's 22nd Senate District would lose Medicaid coverage.
- 28,125 individuals in Senator Wilkin's 17th Senate District would lose Medicaid coverage.

In total, between 10,000 and 44,500 constituents in each Senate District rely on Medicaid expansion, with the highest numbers covering northern Franklin, northern Cuyahoga, and eastern Hamilton counties. The Ohio Medicaid Assessment Survey found that data indicates "that 95% of new Medicaid [Expansion] participants had no private insurance option when they enrolled, and that a rollback of the expansion would predominantly affect older, low-income Whites with less than a college education—in other words, key members of the Republican coalition." An analysis from the Ohio Department of Medicaid concluded that "Ohio's Medicaid expansion increased access to medical care for enrollees, reduced unmet medical needs, improved self-reported health status, and alleviated financial distress." How can the members of this committee possibly excuse the devastating effects of eliminating this vital expansion of healthcare access?

We don't have to wonder about the potential impact of such an irresponsible policy decision. A 2017 report detailed precisely what would likely happen if Ohio were to roll back its Medicaid expansion, with researchers noting that:

• The 95% of Ohioans enrolled in the Medicaid expansion who had no private insurance option when they enrolled would be left without any realistic avenue for obtaining health insurance.

- Because of the low incomes of the expansion population, many would not be able to afford an employer-sponsored insurance plan, even if one were available.
- Those who would lose coverage in a Medicaid expansion rollback are disproportionately White, middle-aged, and with a high school diploma or less.
- The loss of coverage for these individuals threatens to reverse the significant improvements in financial security and health that Medicaid expansion has provided. ⁶

The authors concluded that Republicans would likely face an enormous political backlash if they were to strip Ohioans' healthcare access; the Medicaid-expansion population in Ohio largely overlaps with the electorate that has supported and voted for the current Ohio supermajority. That makes this both a poor socioeconomic policy and a politically self-inflicted disaster that this supermajority will deservedly suffer the effects of at the ballot box.

I strongly urge this committee to vote no on House Bill 96. Per a recent report by The Commonwealth Fund, "Ohio is among the five states that would see the greatest economic losses from cuts to Medicaid funding." We cannot afford the catastrophic impacts this would have on our statewide healthcare system, nor can we feign ignorance when the likely outcome is so clearly laid before us. All Ohioans deserve affordable, accessible and comprehensive healthcare. Stripping away healthcare from over three-quarters of a million Ohioans at a time when most families are struggling with the everyday cost of living is simply unconscionable. Our budget is meant to serve as a reflection of our state's greatest priorities, not a politically advantageous opportunity to justify extended tax cuts and benefits for the wealthiest among us.

Impacts on Education

HB96 would harm our statewide public schools and their ability to deliver comprehensive, quality education to all Ohio youth. As this committee is well aware, approximately 90% of Ohio youth attend public schools. Dismantling a bipartisan, constitutional, and heavily vetted fair school funding plan uniquely modeled to benefit students and the student experience is both unnecessary and incredibly damaging to our public-school institutions.

Abandoning the Fair School Funding Plan in its final two years of implementation is reckless, particularly when it was created to faithfully address the finding by the Ohio Supreme Court that the state's school funding mechanism was "unconstitutional" and in need of a "complete, systemic overhaul." This budget bill allocates even less money to our public school system than was allocated when prior funding models were deemed unconstitutional, leading to a proposal that provides the lowest funding of public schools in state history. In fact, according to Policy Matters Ohio, "schools will receive just 10% of what they really need from the state, shortchanging Ohio's public schools by \$2.75 billion in needed funding in just two years."

Lawmakers cannot argue that public school funding is "unsustainable" in this state as they simultaneously: a) blow a \$1 billion annual hole in the budget to fund school vouchers for primarily wealthy families with children already enrolled in public schools, and b) allocate \$600 million to a billionaire's sports stadium passion project. For Ohio's public schools to be fully funded by the Fair School Funding Program they would need at least \$666 million allocated in the current budget--this bill allocates only \$226 million. For fiscal year 2024, the total scholarship amount for Ohio's five private school scholarship programs was \$970.7 million—vastly exceeding the amount of funding given to public schools that educate most of our state's youth.³ This budget does not honor the actual costs of educating Ohio's children, particularly those with different or additional needs. And it certainly is not supported by local school districts entrusted with such education.

Ohio's public schools are already struggling without the implementation of this reckless budget. Districts continually report overcrowded classrooms, difficulty in hiring and retaining talented educators, crumbling infrastructure, cuts to extracurricular programs, and endless school levies they are forced to rely on to fund educational programs and operations. And it is not only public-school districts, staff and students that will continue to feel the devastation of these funding cuts, but the entire surrounding community as well:

"Ohio's constitution is clear: The state is responsible for providing a thorough and efficient system of public schools. Nowhere does it mandate the subsidization of private education. The more money we siphon away from our public schools to fund private tuition, the harder it becomes for public schools to fulfill their mission. About 90% of Ohio students attend traditional public schools. So, when those districts struggle, entire communities feel the impact. This isn't just some abstract policy failure — it's personal. It's our children's futures."

Rather than focusing on the actual costs of everything from "transportation to extracurriculars, blending property valuations with income wealth in each individual school district" per their unique and individual needs, this budget bill allows lawmakers to dictate

to districts how they should be spending their money.⁵ Many districts have already detailed the adverse impact this budget bill would have on their local schools:

- Olentangy and Westerville school districts could lose over \$100 million and \$110 million respectively, placing them in "fiscal emergency territory" leading to programming and staffing cuts.⁶
- Parma City Schools would have to cut jobs, require fees to participate in extracurriculars, cut down the number of hours in class for high school students, or increase class sizes to 30 kids.⁷
- 47of the 57 school districts in Butler, Clark, Greene, Miami, Montgomery and Warren counties would have to drastically spend down their cash carryovers to a total of \$553.7 million, leading to more levies on the ballot amidst a future of uncertain costs.⁸
- 36 districts in Hamilton, Butler, Warren and Clermont counties would face a total budget impact of more than \$350 million, with Reading school officials noting that draining those reserves now could "damage its bond rating, force budget cuts or require a new tax levy to sustain the workforce training programs it started with its state grant."9

Rather than providing actual property tax relief that voters staunchly support—and which is available in more than half a dozen bipartisan pieces of legislation—this bill caps school district cash reserves and returns the remainder to taxpayers. While this form of "property tax relief" sounds innocuous on its face, it strips districts of their ability to plan for a future that could involve exponential growth requiring the funding of both new staff and new schools. Every single school district has a different tax base, as well as different challenges and opportunities. Forcing them to spend down funds to avoid potential losses if the carryover cap is exceeded is unwise, and it does nothing to equitably address rising property taxes across the state without tying it directly to the outcome of local school districts' financial plans. Effectively, if your local school district maintains a carryover under the 30% threshold, local taxpayers are punished by getting zero property tax relief. This is not a long-term solution to rising and out of control property taxes, but a short-term fix that pins the fate of property tax relief on local school districts, rather than on the legislative body that holds responsibility for such policy.

HB96 is a betrayal of the constitutional mandate to fully and faithfully fund Ohio's public schools. If this bill were to pass, our local schools, educators, students, and communities would suffer unnecessarily. Ohio has the money to prioritize public school funding—it only lacks the political will to do so. I strongly encourage this committee to vote no on HB96.

Thank you for your time and attention.

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