

Good morning, Chair Romanchuk, Vice Chair Huffman, Ranking Member Liston, and members of the Ohio Senate Medicaid 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 testimony in strong opposition to the provisions of House Bill 96 that would decimate Ohioans' 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."¹ 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.² 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."³ 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.⁴ 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:

- 16,702 individuals in Chair Romanchuk's 22nd Senate District would lose Medicaid coverage.
- 18,557 individuals in Vice Chair Huffman's 5th Senate District would lose Medicaid coverage.
- 11,841 individuals in Ranking Member Liston's 16th Senate would lose Medicaid coverage.
- 35,531 individuals in Senator Ingram's 9th Senate District would lose Medicaid coverage.
- 23,485 individuals in Senator Johnson's 14th Senate District would lose Medicaid coverage.
- 12,315 individuals in Senator Wilson's 7th Senate District would lose Medicaid coverage.⁵

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.⁵ 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.”⁶ 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.”⁶ 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.”⁷ 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.

Thank you for your time, and I will now take any questions you may have.

¹ <https://ohiocapitaljournal.com/2025/04/28/medicaid-cuts-could-add-to-ohios-struggle-with-infant-and-maternal-mortality/>

² https://cdn.prod.website-files.com/65b81e782aad6c23bc60217d/680182539d10c87e4b0b4439_1_Ohio%20Statewide%20Medicaid%20Fact%20Sheet.pdf

³ <https://www.healthpolicyohio.org/health-policy-news/2025/02/28/graphic-of-the-week-medicaid-group-viii>

⁴ <https://www.healthpolicyohio.org/files/assets/2024healthvaluedashboardfinal.pdf>

⁵ https://www.healthpolicyohio.org/files/assets/medicaidcountyenrollment.pdf?mc_cid=c7bb19e1e&mc_eid=UNIQID

⁶ [Medicaid Expansion and ACA Repeal: Evidence From Ohio - PMC](#)

⁷ <https://www.heraldstaronline.com/opinion/editorials/2025/05/slash-and-dash-wont-help-us/>