

**Joint Medicaid Oversight Committee before the House Finance  
Subcommittee on Health and Human Services**

**Presented by:**

**Jada Brady, Executive Director**

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Chairman Roemer, Ranking Member West, and members of the House Finance Subcommittee on Health and Human Services, my name is Jada Brady and as a former legislative aide of the Ohio General Assembly it is a privilege to appear before you today on behalf of the Joint Medicaid Oversight Committee (JMOC). It is my sincere hope that by the time I finish my testimony, that you will have a better understanding of how Ohioans are the ultimate beneficiary of JMOC's work by the legislature's role in setting the direction and policy for Ohio's largest program, Medicaid.

**JMOC's Role and Mission**

The Joint Medicaid Oversight Committee (JMOC) was created by statute in the 130<sup>th</sup> General Assembly specifically to increase legislative oversight of the state's Medicaid program. The Committee serves the people of Ohio through its research, which ultimately helps produce the adoption and promulgation of legislation, rules, standards, and requirements relating to Medicaid established in Chapter 103 and Title 51 of the Ohio Revised Code. The mission of JMOC is to provide continuing oversight of all facets of Ohio's Medicaid Program. This includes compliance of the program's legislative intent, evaluating legislation for long-term impact, and improving the quality of care and health outcomes for individuals enrolled in Medicaid.

Five (5) members of the Ohio Senate and five (5) members of the Ohio House of Representatives comprise JMOC. The Speaker of the House and the President of the Senate appoint five (5) members each. The President and Speaker annually alternate appointing the committee's chairman. Issues under the purview of JMOC include the following:

- Oversight of current and future policy, as it relates to long term cost trend and financial sustainability of the Medicaid program;
- Policies that impact Medicaid population health, including health equity;
- Policies that impact access and quality of care for Medicaid recipients; and
- Changes to the Medicaid service package.

### **Current Situation**

JMOC is unique in that it has a specific role with regard to Ohio's Biennium Budget. Under Ohio Revised Code 103.414, Projection of medical inflation rate, the Committee is required to contract with an actuary to determine the projected medical inflation rate for Ohio's Medicaid Program each fiscal biennium. The actuary's projection includes the cost, on a per capita or per member per month (PMPM) basis, of continuing the current Medicaid policy into the next biennium. A report of the growth rate must be submitted to the General Assembly, the governor and the director of Medicaid at least ninety (90) days before the governor submits its state budget.

The collaboration of JMOC, Ohio Department of Medicaid (ODM) and an actuary is necessary to fulfill its statutory obligations under ORC 103.414. In order to establish an efficient and continual flow of information, a Data Sharing and Confidentiality Agreement exists between the three (3) entities. This agreement allows the actuary to receive monthly data from ODM to accurately predict the growth rate.

### **Priorities and Operating Expenses**

The top priority of JMOC is the compliance of contracting with an actuary to project Medicaid's growth rate to achieve the following outcomes:

- Oversight of current and future policy as it relates to the long-term cost trend and financial sustainability of the Medicaid program; and
- Limiting the rate of growth of the state's Medicaid program, at an aggregate monthly cost per recipient, to at least the medical inflation rate, while improving quality of care and health outcomes for Medicaid recipients.

The estimation of the actuary work is budgeted at \$80,000 for FY 2022 and \$250,000 for FY 2023. This reflects a flat rate from the current contract and what was allocated in the last biennium. Because of the Committee's role in setting the Medicaid growth rate for future budgets; actuarial expenses are higher in the second fiscal year. However, the \$80,000 for FY 2022 permits the actuary to continuously analyze the data it receives on a monthly basis from ODM. The efficient flow of information is a mandatory part of any collaboration and is even

more pertinent considering JMOC’s statutory obligation to set the Medicaid growth rate for future biennium.

The staff of JMOC is comprised of two (2) full-time employees, myself as Executive Director and an Assistant Director, Corey Schaal, to assist in carrying out the work of the committee. As an extension of Ohio’s General Assembly, the office itself serves as a policy resource to legislators, which allows them to better understand existing policy and potential impacts to outcomes. This is especially true of federal changes to Medicaid and Medicare.

JMOC’s expenditures are entirely comprised of personnel costs, purchased services and maintenance charges. We request a budget of \$284,447.79 for FY 2022 and \$307,683.01 for FY 2023 for personnel. At this funding level, we will be able to continue to support a staff of two (2) full time employees. Slight increases are due to rising healthcare costs and administrative fees such as the DAS processing of payroll and the use of OAKS. Other expenses include maintenance costs and a standard audit that should be performed in FY 2023. Past audits have cost the agency almost \$9,000.

<b>Purpose</b>	<b>Account</b>	<b>Fiscal Year 2022</b>	<b>Fiscal Year 2023</b>
<b>Personal Services</b>	500 – Personal Services	\$284,447.79	\$307,683.01
<b>Purchased Services</b>	510 – Purchased Services/Contracts	\$80,000.00	\$250,000.00
<b>Maintenance</b>	520 – Maintenance and Supplies	\$7,400.00	\$17,400.00

Thank you Chairman Roemer and members of the committee, and on behalf of the members of JMOC, I am happy to answer any questions at this time.