

SB 17
Opponent Testimony
Ohio Senate Government Oversight and Reform Committee
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Chairwoman Roegner, Vice Chair McColley, Ranking Member Craig, and members of the Ohio Senate Government Oversight and Reform Committee, thank you for the opportunity to provide Opponent Testimony on SB 17. My name is Kathryn Shelley, and I am a Disability Rights Advocate with The Ability Center of Greater Toledo, a Center for Independent Living serving seven counties in Northwest Ohio. The mission of The Ability Center is to advocate, educate, partner, and provide services that support people with disabilities to thrive within our communities.

The Ability Center of Greater Toledo hereby submits opponent testimony because SB 17 has the potential to hurt people with disabilities and keep them from thriving within their communities. In particular, the proposed work and education requirements for Medicaid and proposed changes to Medicaid Eligibility would leave many people with disabilities without the supports needed to live independently in the community. Medicaid expansion benefits allow many people with disabilities to work without losing health coverage due to earning a higher income, especially as many lower-paying jobs do not offer health insurance as a benefit of employment.

Under SB 17, the proposed work and education requirement for Medicaid would:

- Revise the work and education requirement for individuals who enroll in Medicaid under the expansion eligibility group. These work and education requirements already create unnecessary bureaucracy and place an undue administrative burden on people with disabilities who work jobs that do not provide access to health insurance.
 - According to the Center on Budget and Policy Priorities, “in states that have taken up the ACA’s Medicaid expansion, Medicaid coverage is now available to adults with incomes below 138 percent of the poverty line (\$17,609 for an individual in 2020). This expansion has been critically important to millions of poor individuals with physical and mental disabilities and illnesses who are not receiving federal disability benefits, as well as some who receive Social Security Disability Insurance benefits but must wait two years for their Medicare benefits to kick in. A study of Medicaid expansion enrollees in Michigan, for example, found that 23 percent had physical impairments resulting in significant functional limitations, and 20 percent had such mental impairments.”¹
 - Additionally, the Center on Budget and Policy Priorities goes on to say that Medicaid beneficiaries with disabilities or illnesses are far likelier than other

¹ <https://www.cbpp.org/research/health/taking-away-medicaid-for-not-meeting-work-requirements-harms-people-with#:~:text=Medicaid%20beneficiaries%20with%20disabilities%20or,can%20show%20they%20are%20exempt.>

beneficiaries to be unemployed, sporadically employed, or to work less than full time, which means many will lose coverage unless they can prove they are exempt. Nationally, studies estimate that about one-third of all non-working, non-elderly adult Medicaid enrollees not receiving SSI report they are unable to work due to a disability.²

- Require that an individual be employed at least 20 hours per week or enrolled in an accredited institution of higher education or an occupational training program to satisfy the requirement. Many people with disabilities in this eligibility group have low-wage jobs that do not offer a regular schedule. Fluctuating hours can make this requirement difficult to prove and make people trying to manage significant health conditions lose eligibility for health coverage through Medicaid.
 - According to the Center on Budget and Policy Priorities, many people with disabilities can and do work, but some have chronic conditions that keep them from consistently working enough hours to meet the monthly requirement or need specialized supportive services to find and maintain employment, but their condition might not be severe enough to qualify for a medically frail exemption and isn't a temporary condition that could qualify for an exemption. Nearly one-third of people in Arkansas, when work requirements were implemented, who did not qualify for an exemption and had been working were not working enough to meet the 80-hour [a month] requirement.³
- Require that an individual exempt on the basis of having an intensive physical health care need or serious mental illness be medically certified as physically or mentally unfit for employment because of the condition. Many people with significant disabilities may not be “medically certified” as unfit for employment but experience difficulty working, or getting steady work, while trying to manage their condition. Implementing such a high standard for exemption from the work requirement based on disability will leave many people with significant disabilities without health insurance or will even incentivize them to not work.
 - According to the Center for Public Representation, “The federal government has said work requirements only apply to people who are ‘able-bodied.’ Even though some people with disabilities (like people who meet the strict criteria for ‘disabled’ for purposes of Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI)) may be exempted, many other people with disabilities or chronic conditions who do not meet these strict standards will be subject to these policies. Therefore, millions of people on Medicaid who have disabilities or ‘pre-existing conditions’ could still be subject to work requirements.⁴

² <https://www.cbpp.org/research/health/taking-away-medicaid-for-not-meeting-work-requirements-harms-people->

with#:~:text=Medicaid%20beneficiaries%20with%20disabilities%20or,can%20show%20they%20are%20exempt.

³ <https://www.cbpp.org/research/health/medicaid-work-requirements-dont-protect-people-with-disabilities>

⁴ <https://medicaid.publicrep.org/feature/medicaid-work-requirements/>

- Also, according to the Center on Budget and Policy Priorities, “Obtaining physician testimony, medical records, or other required documents may be difficult, especially if beneficiaries don’t have health coverage while seeking to prove they are exempt. Red tape and paperwork requirements have been shown to reduce enrollment in Medicaid across the board, and people coping with serious mental illness or physical impairments may face particular difficulties meeting these requirements.”⁵
- Creates a new exemption for an individual who personally provides care for a child under one year of age or a child who has a medical condition or disability that the Medicaid Director determines is serious enough to warrant an exemption.
 - Caretakers of people with disabilities and medical conditions are not solely the caretakers of children. There are individuals who have to be a full-time caregiver of adults with disabilities, as well. According to the Center for Public Representation, “caregivers of people with disabilities could also be forced to choose between providing care to their family member or lose their own access to Medicaid.”⁶ This dilemma, unfortunately, is not limited to the caregivers of children with disabilities and medical conditions.
 - What are the standards that the Medicaid Director would use to determine a medical condition or disability is serious enough to warrant an exemption? Again, caregivers will have to meet strict criteria and go through a long process to prove eligibility for exemption. According to the Center for Public Representation, many people with disabilities, as well as their caregivers do not have the medical documentation needed to show that they meet the exemption from a work requirement. Not only that, but the standards for these documents are very high, often requiring assessments and special services that most people cannot afford, even with their insurance and people will have to resubmit these documents often, so the process itself will be a burden for many people with disabilities and their caregivers.⁷

Furthermore, with regard to Medicaid eligibility, SB 17 would prevent hospitals and other providers from conducting presumptive eligibility and the Ohio Department of Medicaid (ODM) from accepting self-attestation of income or receipt of other health insurance coverage. This would result in increased required documentation and reporting, which can be difficult for people with disabilities and medical conditions to obtain such documentation. Also, SB 17 would also require ODM to conduct redeterminations for eligibility despite the current public health emergency. It would be unconscionable if someone were to lose their healthcare during a health

⁵ <https://www.cbpp.org/research/health/taking-away-medicaid-for-not-meeting-work-requirements-harms-people->

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⁶ <https://medicaid.publicrep.org/feature/medicaid-work-requirements/>

⁷ <https://medicaid.publicrep.org/feature/medicaid-work-requirements/>

emergency because they have become ineligible, but currently have no other means of healthcare.

SB 17 will hurt Ohioans with disabilities and creates more barriers for them to get the healthcare they need. Thank you for reviewing this submission of Opponent Testimony. Please see my contact information below, and do not hesitate to contact me if you have any additional questions after the hearing.

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