



June 29, 2009

Ohio Consumers for Health Coverage Weekly Update-- State and Federal Health Care Reform

Greetings,

This is the second of Ohio Consumers for Health Coverage' weekly updates in a series that will continue ***while the Ohio budget wraps up, and as health care reform moves rapidly at the federal level.***

Ohio Interim Budget Likely; Health Services Cuts Devastating

Seven Day Interim Budget Expected; Still Unsure about Fate of Insurance Reform Provisions

According to press reports Ohio's legislative leaders are in the process of approving a seven day interim budget extension. While it will buy more time, we have no information that agreement on the biggest sticking points has been achieved. At issue is a \$3.2 billion budget gap, Senator Harris' refusal to explicitly authorize in the budget the slot machines that the Governor has proposed, and the Governor's unwillingness to implement the slots by Executive Order. A projected \$900 million is riding on the resolution of this issue. Senator Harris argues the Governor can do it without legislative consent, and that if he issues such an order the Senate will assume the projected gambling revenue is available. Governor Strickland is holding fast to his position that the authorization requires legislative action.

Meanwhile, voices continue to be raised against the proposed service reductions and for the health insurance reforms that were written into the Governor's budget and sustained in the House-passed version. (See article below re insurance reforms).

We are unable to report at this point the fate of insurance reform provisions, though there has appeared some interest by all parties in reaching a compromise solution.

UHCAN Ohio joined 7 organizations in the Coalition for Healthy Communities to tell the Governor in a full-page Columbus Dispatch advertisement that "people will die" if proposed mental health cuts are allowed to go through. It appears that some money may be put back into mental health, but health services cuts will be devastating. UHCAN Ohio has urged in its recent e-mails that revenues must be raised to address this crisis.

The chart below depicts the gravity of the cuts to key services including community health centers, free clinics, breast and cervical cancer screening and others. The first column of numbers is the amount allocated by the House budget over the two year period, the second column is what the Governor and Legislative Leadership (Executive Conference Committee biennial) has under consideration now and the third column is the percentage loss represented

by the Executive Conference Committee's budget.

Governor's "Framework" / Conference Committee Working Budget

	House--biennial	Ex Conf Com biennial	Difference
Child & Family Health Services	15.4	8.7	44%
Free Clinic	1.2	0.9	30%
Breast and Cervical Cancer Screening	5.0	1.5	69%
AIDS Prevention and Treatment	12.8	11.1	14%
Child & Family Health Care Ops	1.8	1.3	30%
Fed Qualified Health Centers	5.4	1.0	81%
Access to Dental Care	1.5	1.1	30%

Strong Advocacy Continues for Insurance Reforms in Budget

Press Conference Puts Spotlight on the Eye-popping Insurance Premiums.

Wednesday June 24th OCHC held a press conference at the Statehouse urging lawmakers to restore the Governor's budget provisions that would reform health insurance, covering an additional 110,000 Ohio adults without cost to the State. Spokespersons Col Owens (OCHC Co-Chair) and Ron Bridges (AARP Ohio and OCHC Leadership Team) focused on the importance of reducing the caps on premiums in the Open Enrollment program. Gerrie Miller, a 60-year old former administrative assistant with a history of back surgeries, revealed that she is draining \$922 per month from her retirement account to pay her Open Enrollment monthly premium. By the time she reaches Medicare age she will have little left to live on. Following the press conference, advocates walked the Senate Chambers distributing recent Open Enrollment premium quotes to state senators, the body that removed the Governor's provisions from the budget.

Update on Congressional Action

Community Catalyst Reveals Gaps in Congressional Budget Office Analysis of Senate HELP Committee's Bill.

The Senate Health, Education, Labor and Pensions (HELP) Committee continued its process of marking-up its bill, and the mark-up will continue into the week of June 29th. But it did so under a backdrop of concern raised when the Congressional Budget Office (CBO) released its estimates during the week of June 15th that the HELP Committee's bill would cost a trillion dollars over 10 years, while leaving 37 million people still uncovered.

In its *Health Reform Insider*, Community Catalyst (a Massachusetts-based health care policy organization) pointed out that:

- The HELP draft did not include provisions around Medicaid expansion or the employer mandate (not sure why). Without taking these into consideration the number to be covered would be much lower than expected, and that
- CBO interpreted the individual mandate in a way different than the Committee intended.

But CBO estimates are a big deal, and seem to be causing the Senate Finance Committee to re-think some of its earlier coverage positions. Per the *Insider*, "Perhaps most worrisome, the [Senate Finance]discussion draft seems to call for reducing the value of premium subsidies, ending subsidies at 300 percent of the federal poverty level instead of the earlier suggestion of 400 percent FPL, reducing the value of benefits and requiring people to purchase insurance unless it exceeded 15 percent of their income. Medicaid for most adults would only expand to 100 percent FPL (earlier versions had gone up to 150 percent FPL for at least some populations)." (*Insider* 6/22)

This sets the table for what UHCAN Ohio and Ohio Consumers for Health Coverage believe to be one of the biggest issues to be addressed in federal health care reform. ***Will health care be affordable to most people?*** The HELP Committee has limited out of pocket expenses for those in the 300-500% of poverty range to \$5,800 for individuals and \$11,000 for families. This is much higher than typical workplace policies provide for, and, if allowed, would fail to break the unacceptable relationship between health care bills and bankruptcies and foreclosures.

To read the Health Reform Insider, go to http://www.communitycatalyst.org/projects/national_reform

Big Week Across the Country Around Health Care Reform

15,000 in Nation's Capitol for June 25th Rally Demanding Health Care Reform; Four Hundred Ohioans at D.C. Town Hall Meeting.

Thousands of advocates of health care reform arrived at the nation's Capitol on Thursday June 25th for a major rally on health care reform. The crowd at the rally has been identified as high as 15,000. (Progress Ohio website, 6/28/09). Addressing the rally, Ohio Senator Sherrod Brown said, " 'Let me assure you the special interests and health insurance industry will not hijack this process...We must have a strong public option and we will have a strong public option.' " (Cleveland Plain Dealer 6/25/09)

Following the rally, 350 Ohioans attended a special Ohio Town Hall meeting, and were addressed by Representatives Mary Jo Kilroy (D. Columbus) and Tim Ryan (D. Niles).

A single mom from Columbus, Leondra Barrett, told the group "It is unacceptable for a person to choose between food and medicine. It is unacceptable that people are literally dying of lack of adequate health care because they do not have insurance." (PD 6/28/09).

UHCAN Ohio Staff Leilani Bonnell and contractor Margaret Demko rode the all-night bus to the D.C. gathering.

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