

July 2017 | Fact Sheet

Medicaid's Role in Ohio

Medicaid in Ohio

- Nearly **3 million** people in Ohio **are covered by Medicaid** (21% of the total population). While four in five (79%) of enrollees are children and adults, more than one-half (59%) of the state's Medicaid spending is for the elderly and people with disabilities.
- **345,300** (17%) of Ohio's **Medicare enrollees are** also **covered by Medicaid**, which accounts for over two-fifths (41%) of Medicaid spending.
- 40% of all children in Ohio are covered by Medicaid, including 46% of children with special health care needs.
- 59% of nursing home residents in Ohio are covered by Medicaid and 39% of Medicaid longterm care spending in Ohio is for nursing home care. Medicare beneficiaries rely on Medicaid for assistance with services not covered by Medicare, particularly long-term care.
- **88% of Medicaid enrollees** in Ohio **are in managed care**. Since Ohio has already transitioned most enrollees to managed care, it would not be able to recoup much of the one-time savings that some states experience during that transition.
- Ohio has a **below average per capita income** and therefore **a relatively high federal Medicaid matching assistance percentage (FMAP) at 62.3%**. For every \$1 spent by the state, the federal government matches \$1.65. **Almost three quarters (72%) of all federal funds Ohio receives are for Medicaid.** In Calendar Year 2017, the federal match rate for the Medicaid expansion population is 95%.

What is at Risk under a Per Capita Cap?

- Capping Medicaid funding would reduce the federal assistance for Ohio to maintain its current Medicaid program.
 - Ohio would have to make up \$20.5 billion in loss of federal funds between 2020-2029, including \$10.8 billion for the phase-out of the enhanced match for the ACA expansion and \$9.7 billion for the per enrollee cap on all groups.
 - If Ohio dropped the Medicaid expansion in response to the loss of enhanced federal financing, the state would forgo an additional \$32.8 billion over the 2020-2029 period, and by 2029, 858,000 Ohioans estimated to be covered in the expansion group would lose Medicaid coverage.
- Capping federal Medicaid funding could put Medicaid programs designed to improve quality of life and access to new therapies and long-term care for people with disabilities at risk. 14% of Ohio's non-institutionalized population reported a disability, compared to a U.S. average of 13%.

•	Reducing federal funds through a per capita cap or block grant would limit Ohio's ability to respond to public health crises such as the opioid epidemic, HIV, or Zika.	
	0	Ohio had the third highest opioid death rate in the country in 2015 (24.7 deaths per 100,000 population).

health status.

Two-thirds (66.5%) of people in Ohio are overweight or obese and more than one-third (35%) report poor mental health status. Ohio's population faces many health challenges, ranking 40th in overall