

Tax & Budget

READY OR NOT, CORONAVIRUS REACHES OHIO

POLICYMAKERS CAN PROTECT OHIOANS THROUGH PAID SICK DAYS AND INCREASED FUNDING FOR PUBLIC HEALTH

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Everyone wants assurance that if they or their loved ones get sick, they'll get the care they need. If the economy goes south, we all want to know we can weather the storm. Part of the reason we pool our resources together in the form of taxes is so the government has enough resources to protect us in a time of crisis. Faced now by epidemic, we look to the government to take extraordinary measures to protect and preserve life and limit the threat to our family, community and country.

In this paper, we look at the public policy landscape as the threat of coronavirus grows. We find that decisions made by policymakers over time have made Ohio more vulnerable to crisis and could make it easier for the disease to spread. Ohioans who work in some of the state's fastest growing jobs are paid low wages and often don't get basic protections at work. Retail or restaurant employers, for example, regularly don't give workers paid sick time. Sick employees could spread the coronavirus to the people they serve at work.

On top of that, over the past 15 years, policymakers have given tax cuts to the wealthy and corporations while underfunding Ohio's public infrastructure, like local public health departments. That weakens state and local governments' ability to respond quickly and robustly to the threat of disease and economic disaster for sick and quarantined workers and their families. Fortunately, Governor Kasich chose to expand Medicaid to provide health coverage for low-wage workers, but state legislators have pushed unceasingly to freeze it, diminish it, or otherwise create barriers to enrollment. Ohio is only one of only eight states where the number of people without health insurance went up between 2017 and 2018. This report contains short-term recommendations for the immediate threats and long-term recommendations to strengthen necessary public infrastructure for the future.

Recommendations include:

1) Policymakers must prioritize people with low incomes, elderly people, people with disabilities and homeless people in the public health response to the coronavirus. The best way to slow the spread of the virus is broad testing and treatment, as well as ensuring all Ohioans' basic needs are met. There is a moral obligation, but there is also a public health urgency to this comprehensive approach.

2) In the short term, the governor can create a temporary paid sick day program. This can happen immediately to slow community spread of the virus. The DeWine administration could pay for it in four main ways: By declaring an emergency and using general revenue funding; utilizing money from the Controlling Board's Emergency Purposes Fund; tapping into the Budget Stabilization Fund, which is already nearing full capacity, or by using funds from the Temporary Assistance to Needy Families program that have been reserved for emergencies and unforeseen circumstances. In the long run, legislators should pass a law like the Ohio Family Leave Act of 2008.

3) The Ohio Department of Job and Family Services, the Ohio Department of Medicaid and county Job and Family Service Offices should streamline eligibility and enrollment in public programs that provide health care as well as income and nutrition support to those whose incomes will be interrupted by economic dislocations or individual quarantine. This will take immediate action and it will take increased funds for county human service offices.

4) State policymakers should assure that the medical bills from coronavirus testing and treatment do not bankrupt people or that prohibitive costs cause people to avoid care. This reassurance should happen as soon as possible, to encourage and ensure people will get tested and treatment. If the epidemic lasts for a long time and many people fall into economic distress, the state will have to look to the federal government for assistance.

5) The epidemic will strain the financial resources of safety net providers that serve the uninsured and underinsured, and that are already under financial stress. Government should implement policies that will increase those providers' revenues to sustain their operations. These policies should include, but not be limited to, rural providers identified as financially at risk. Lawmakers will need to look to the federal government for assistance if economic conditions deteriorate seriously for a prolonged period.

6) Health care providers should see patients even if they have outstanding debt for past care. They should suspend collections of patient debt during the epidemic.

7) The government and the private sector should collaborate to ensure that *all* health care workers have health coverage. Health coverage is essential to protect the health and safety of caregivers who will be on the front line of caring for those who are most medically at risk. If some providers are ineligible to receive public coverage (e.g., based on immigration status), the private sector should arrange for their coverage.

8) State and local governments should establish and engage advisory groups, comprised of public, corporate, and charitable organizations, health care providers and community leaders representing the diversity of Ohio's population.

9) Crisis can bring change. Now is the time for policymakers to bolster support for public health. In the future policymakers can ensure there is a permanent program so that all workers get paid sick days. They can strengthen Medicaid and the Medicaid expansion by helping low-income people enroll and stay enrolled.