



Basic Needs

Testimony on Sub. HB 119 before the Senate Health, Human Services & Medicaid Committee

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Good afternoon Chairman Burke, Vice Chair Beagle, Ranking Member Tavares, and members of the Senate Health, Human Services & Medicaid Committee. Thank you for the opportunity to submit written testimony on Substitute H.B. 119. My name is Victoria Jackson, and I am a researcher with Policy Matters Ohio, a nonpartisan, nonprofit research institute.

The Supplemental Nutrition Assistance Program (SNAP) keeps over 1.4 million Ohioans fed and Medicaid gives health insurance coverage to 3 million, a quarter of Ohioans. These programs are vital.

Ohio Auditor of State David Yost released an audit of Ohio's SNAP program in 2015 that found less than 1 percent of benefits were distributed incorrectly, a very low error rate compared to operations of a similar size in the public or private sectors.

The state's Medicaid program has received press attention recently, but over business practices among players in the privatized component of the system. The SNAP program, too, has received attention for investigations of fraud in the businesses that deliver the service. Major fraud among *enrollees* has not been reported.

National policy groups from outside of Ohio have testified in support of House Bill 119. Gongwer News reported that Mary Mayhew, a senior research fellow at the "Opportunity Solutions Project," and former commissioner of the Maine Department of Health and Human Services, testified that HB 119 changes would prevent fraud in safety net programs. However, HB 119 is not aimed at the businesses that deliver services, but at the enrollees themselves. Further, the Legislative Service Commission's analysis of HB 119 indicates there would be little change to requirements for enrollees and modest change in protocol for caseworkers. So why is the legislature taking administrative responsibility out of the executive branch and imposing legislative control?

By evoking a false impression of enrollee fraud, HB 119 erodes support of programs that protect millions of Ohioans. In 2017, 13.7 percent of Ohio households had days or periods of time when they didn't know how they would pay for food ("food insecurity"), a share that is higher than the national average. SNAP serves our most vulnerable Ohioans: Two-thirds of people fed by SNAP are children, elderly adults, and adults with disabilities. The ability of charity and philanthropy to address hunger in Ohio pales in the face of need: SNAP provides 12 meals to every one meal provided by food banks. In August 2018, SNAP fed over 1.4 million low-income Ohioans living in over 700,000 households. Medicaid is the largest single payer of medical costs in the state - the largest insurer, covering more than a quarter of the population. While most enrollees are children, elderly and disabled people and those hit by hard times, many are workers: Ohio has a huge low-

wage labor market in which hours are uncertain and many employees and their families need public aid, even at the median wage. Census data shows that 61 percent of working-age adults enrolled in Medicaid are working. Another 23 percent are disabled in a manner that prevents them from carrying out one or more key activities of daily living, and 11 percent are caretakers of children or elderly or disabled people.

Running SNAP and Medicaid in a sound manner is important. Ohio's counties do a good job with oversight of enrollee eligibility. As concerns about recession grow, legislators should look for ways they can support, strengthen and bolster the delivery system for SNAP and Medicaid to ensure Ohioans are taken care of when hard times hit.