

Championing public policy so that every young child is healthy and ready to learn by age 5.

Ohio Department of Medicaid Bureau of Health Plan Policy, 50 W. Town St, 5th Floor Columbus, OH 43215

March 31, 2025

RE: Multi-Year Continuous Eligibility for Children 1115 Demonstration Waiver Application Pursuant to Public Notice from Ohio Department of Medicaid

Groundwork Ohio is a committed, nonpartisan public-policy research and advocacy organization formed in 2004 that focuses on the prenatal period to age 5. We advance quality early childhood systems in Ohio by engaging, educating, and mobilizing diverse stakeholders and strategic partners to promote data-driven and evidence-based early childhood policies. As an organization dedicated to championing maternal and infant health, we appreciate the opportunity to provide comments on the Ohio Department of Medicaid's rules addressing Continuous Eligibility for Children Through Age Three.

The needs of Ohio's children and families are urgent and growing, especially as we continue to face an alarming infant mortality crisis. Policies like multi-year continuous Medicaid coverage for eligible babies and toddlers adopted in the SFY 2024-2025 budget (HB33, effective 7/1/23) are critical steps forward to reduce health disparities and help ensure Ohio's youngest children have access to critical health care services.

Infant Mortality: By implementing continuous coverage for infants and toddlers through age three, Ohio's Medicaid program can leverage its impact for vulnerable Ohioans, enabling low-income infants and their caregivers to access timely care and early detection of challenges that can reduce risk of infant mortality.

Ohio's infant mortality rate has made limited improvement over the past decade, and it continues to exceed that of most other states. In 2022, Ohio's overall infant mortality rate was 7.1 deaths per 1,000 births and its Black rate was 13.4, more than twice as high as the rate for white infants. Ohio's infant mortality rate places the state's performance among the bottom ten states. We are alarmed by this outcome data and Ohio's performance compared to other states, and call for Ohio's leaders to take every opportunity to implement polices to better support care and outcomes for Ohio mothers and infants.

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Preventive Care: Covering nearly half of all births in our state, Ohio's Medicaid program is in a unique position to provide low-income parents and babies with much-needed stability during a crucial window of development. Young children enrolled in Medicaid are more likely to receive immunizations, screenings, and counseling compared to their uninsured peers.¹ In addition to its benefits in maintaining child wellness, preventive care is also an effective long-term cost savings measure by helping children to stay healthy and well. By detecting potential health challenges early, out-of-pocket costs can be minimized and families may be less dependent on costly treatments for acute or chronic conditions that worsen if undetected.²

Early Learning and School Readiness: Continuous health coverage for infants and toddlers has lasting impacts on a child's future. The health care system is often the first to engage with at-risk infants from low-income families, playing a crucial role in shaping both immediate and long-term outcomes. Continuous eligibility not only ensures access to care but also serves as a vital link between health care and early childhood-serving agencies and systems. This connection enables Medicaid to foster long-term well-being and success through cross-system collaboration, wraparound supports, and timely interventions. Together, these efforts can expand access to Early Intervention services, reduce chronic absenteeism, and minimize exposure to adverse childhood experiences (ACEs), ultimately strengthening academic performance and school participation as children grow.

Kind regards,

ynanne Gutierne

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