

**Testimony of Barbara Coulter Edwards  
Deputy Director, Ohio Department of Job and Family Services  
to the Task Force for Preserving Adult Vision  
May 3, 2005**

Good morning, Chairman Armbruster and members of the Task Force on preserving vision coverage. I am Barbara Edwards, Ohio's Medicaid Director. I have been asked to speak to you today regarding the existing vision services covered under Ohio Medicaid. I will also touch on the importance of Medicaid as a health insurer for people with significant visual impairment.

**Current Vision Coverage Under Ohio Medicaid**

Ohio's Medicaid health care benefit contains coverage for vision examinations, corrections, preventive services and treatment for disorders of the eye as summarized below. In State Fiscal Year 2004, Ohio Medicaid spent \$56.5 million dollars (state and federal funds) for vision related services: \$35.1 million of that for services to adults and \$21.3 million for services to children.

<b>Ohio Medicaid Current Vision Services</b>	<b>Limits</b>
Eligible vision care providers	Ophthalmologists, optometrists, and opticians that are currently licensed in Ohio and are Medicaid providers
Regular Eye Exams	21-59 years old: once every 24 months. 20 years old and younger, or 60 years old or older: Once every 12 months
Eye Glasses	21 – 50 years old: one pair every 24 months. 20 years old and younger, or 60 years old or older: One pair every 12 months
Contact Lenses, Tinted Lenses, Prosthetic eye, and Low-vision aids	Must be medically necessary, and prior authorized
Healthcek for Children (EPSDT)	Includes vision screening for infants, children, teens and young adults through age 20
Comprehensive and Intermediate Ophthalmological Service	General evaluation of the complete visual system with initiation of diagnostic and treatment of diseases of the eye; includes determination of refractive state.

In SFY 2004, Ohio Medicaid provided comprehensive health coverage to over 2 million Ohioans, or 18 percent of the population. That's:

- 1 million children, including 45 percent of children under age 5
- 152,000 seniors
- 265,000 non-elderly adults and children with disabilities, and
- Over 490,000 low income parents.

In fiscal year 2005, we anticipate ODJFS's direct Medicaid spending to equal \$10.5 billion (all funds). Ohio Medicaid is a federal/state partnership in which Ohio is reimbursed by the federal government nearly 60 cents for every dollar spent on Medicaid health care services. Medicaid is Ohio's largest source of Federal revenue.

Even with the large federal contribution and cost containment initiatives that were put into place in the last biennial budget, Ohio's Medicaid spending growth still outpaces the growth of state revenues and is, therefore, unsustainable. Consequently, the Executive Budget for SFY 2006-2007 proposed to hold Medicaid all funds spending growth to 3.2 percent in state fiscal year 2006 and an additional 2.2 percent in state fiscal year 2007 by enacting policy changes that yield \$2.1 billion in all funds savings and \$202 million in new (non-GRF) revenue.

One of the policy changes recommended in the Executive Budget was to eliminate some of the optional vision services for adult Medicaid enrollees. The Administration's proposal would eliminate coverage for annual eye examinations, eyeglasses and contact lenses for about 800,000 adult Medicaid enrollees, a change that is estimated to save \$6.5 million (all funds) in SFY 2006 and \$ 15.4 million (all funds) in SFY 2007. The proposal would maintain these services for children under age 21.

It is important to note that this proposal will not affect Medicaid treatment for diseases of the eye such as glaucoma or cataracts and medical treatment for injuries to the eye.

### **Medicaid Coverage for People with Significant Visual Impairment**

One of the eligibility categories for Medicaid is people with significant and/or chronic disabilities are also eligible for Medicaid services. This is the so called "aged, blind and disabled" or "ABD" category of Medicaid enrollees.

The Administration has proposed no changes to the eligibility criteria for this group of individuals. So, people with significant visual impairment who meet the existing Medicaid standards for income, resources, and disability will continue to be eligible for Medicaid. Children with disabilities will have no change in their current eligibility or benefits coverage.

I hope that this information is helpful to the work of this committee. I appreciate the opportunity to talk with you today and would be happy to answer any questions.