Impact of the House Choosing Not to Extend Medicaid Coverage to Ohioans Battling Mental Illness or Addiction

- The House Finance Committee's decision to reject health care coverage for low-income, working Ohioans will reduce overall spending by $577 million per year on services that people with a mental illness or substance abuse disorder need to recover.

- The House's budget provides NO SUPPORT for the physical health care needs for individuals with mental illness or an addiction disorder who would have been covered by the Governor's budget. These individuals commonly experience physical health issues related to their illness that can impede recovery and lead to high-cost chronic conditions.

House Sub Bill (in millions)	FY 2014	FY 2015
HB 59 mental health and addiction services eliminated by the House		
• Medicaid Behavioral Health[1]	($20)	($75)
• Other Healthcare Services [2]	($129)	($482)
• Local Funds[3]	($35)	($70)
TOTAL	**($184)**	**($627)**
Mental health and addiction services added by the House		
• Mental Health	$30	$30
• Addiction Services	$20	$20
TOTAL	**$50**	**$50**
Difference	**($134)**	**($577)**

1- Includes direct treatment (i.e., counseling, crisis intervention, detoxification)
2- Direct health care related to recovery (i.e., pharmaceuticals, doctor visits, hospitalization)
3- Freed up local match for other key services (i.e., supported employment, housing, prevention)