



**Testimony to the House Finance Subcommittee on Health & Human Services  
Keith Hochadel, President & CEO, CommQuest Services  
April 8<sup>th</sup>**

Chairman Romanchuk, Ranking Member West, and distinguished members of the House Finance Subcommittee on Health & Human Services thank you for allowing me to provide testimony on House Bill 166.

My name is Keith Hochadel, and I am the President & CEO of CommQuest Services. CommQuest is based in Stark County, serving more than 20,000 Ohioans from over 25 counties by offering a continuum of services ranging from addiction to mental health, and social services. With a staff of 480 passionate individuals and a budget of \$24 Million, CommQuest Services works to provide treatment on demand for those struggling with mental health and addiction disorders.

I am pleased to be here today to testify on Governor Mike DeWine's first executive budget proposal. HB 166 includes a host of important policy initiatives, as well as much-needed resources to support, strengthen and expand mental health and addiction treatment services in Ohio. You do not need to be reminded that Ohio communities are battling an unrelenting addiction and mental illness crisis. The resources included in the Governor's executive budget aimed at addressing this crisis are a wise investment that will surely yield positive results – some will be immediate; others will not be realized for years down the road.

**School-Based Counseling & Prevention**

CommQuest strongly supports the Governor's proposed \$18 Million investment in school prevention services. Recently, Stark County witnessed 14 students take their own lives over a 16-month period of time. CommQuest has played a large part in the community response working with our local school districts to ensure that we can provide the proper support for students and their families in the school environment. Today, we have nearly 50 dedicated professionals who are in more than 90 schools providing evidence-based services.

Just this school year alone, our clinicians have provided mental health counseling services in a school environment to more than 800 students, and another 450 students in prevention services. These numbers only reflect our staff being in many schools one or two days a week. However, not a week goes by in which a school administrator does not request that we increase our presence in their school due to the overwhelming need.

The proposed investment in school-based counseling and prevention will greatly assist providers like CommQuest to continue expanding our partnerships with students, teachers, and administrators to make sure our kids receive services at the onset of behavioral health symptoms.



## **Workforce Challenges**

In Ohio, we continue to experience a shortage of behavioral health professionals. Mainly, community-based organizations, like CommQuest, are now directly competing with health systems, insurance companies, and for-profit corporations for an ever-shrinking supply of clinicians.

The proposed investment of \$8 Million to assist with recruiting and retaining clinicians continues and expands on past initiatives developed by the Ohio Department of Mental Health & Addiction Services. This funding allows clinicians to be eligible for loan repayment, tuition assistance, and incentive funding. All these assist providers in creating incentives to attract students to enter the behavioral health field and assist us in our efforts to retain talent.

## **Crisis Services**

As I mentioned earlier, Stark County and Ohio as a whole have seen a rise in those taking their own life. While we seem to be getting to a place where individuals can receive detox services ‘on demand,’ the same cannot be said for those suffering from a mental illness who require urgent crisis stabilization services.

The Governor’s proposed investment of \$12 Million to be used for crisis services is encouraging because the funding will give communities the flexibility to develop programming that will best fit the needs of clients. Ultimately these programs will help keep clients out of emergency rooms and jails while ensuring the individual is being referred to the appropriate level of care.

However, I caution that without the administration establishing a daily Mental Health Crisis Stabilization Rate, the effectiveness of this investment is in question. A well designed and appropriately resourced crisis service system implemented in communities throughout Ohio would decrease significant costs in other systems and provide quality care to many Ohioans in need. Such a rate should be similar to the daily reimbursement rate that is currently available for alcohol and drug detox services.

## **Behavioral Health Redesign & Managed Care Transition**

While I am encouraged by the investments being made in the field of behavioral health, I would be remiss if I did not highlight the continued struggles that treatment providers and Ohioans seeking these services face daily as a result of Behavioral Health Redesign and the transition to Managed Care. During the last operating budget, the 132nd General Assembly stepped in to assist providers with the delay of Behavioral Health Redesign implementation after it became apparent the State and Managed Care Organizations (MCO’s) were unprepared for the rollout.

Even with this assistance, the rollout of both these state initiatives was substantially flawed which has had statewide implications. Locally in Northeast Ohio, two organizations closed as a result of

the changes with many others around Ohio taking large cash advances to stem the tide of not being timely reimbursed for services by MCO's.

Imagine running a business where 30-40% of everything you bill is either denied or "pending" with little explanation as to why this occurred. This is the reality treatment providers live in on a daily basis. A reality which has led CommQuest to incur approximately \$450,000 in administrative costs. Costs that take away from improving client access to services. For the first time in my tenure as CEO, we added more fiscal staff to manage the complicated managed care process than we added outpatient clinical staff. This challenges my commitment to offering treatment on demand.

Under the DeWine administration progress has been made thanks to the work of Directors Criss and Corcoran. Advance payments that providers were due to repay to MCO's have been delayed and administrative policy changes have helped our accounts receivable decrease.

HB 166 also provides language that would allow the Department of Medicaid to increase rates that exceed those covered by Medicare. This language empowers the department to revise service rates that were reduced under the Behavioral Health Redesign process. For example, reimbursement rates for group counseling and nursing, two critically important services delivered in the community behavioral health field have not only failed to keep pace with the rate of inflation but are actually lower today, than they were 20 years ago.

As the State moves toward re-procurement of MCO contracts, Ohio must demand more accountability of MCO's. Specifically, MCO's must be expected to pay claims in 14 days, not 30 days. If the State of Ohio managed to find a way to pay claims for years within 14 days, there is no reason the private sector couldn't. Second, if MCO's continue to ignore paying claims within their contractual obligations, penalties of 18%, which have been instituted by several surrounding states, should be included.

Ohio's Behavioral Health system is still in a very fragile state. I am an advocate of Behavioral Health Redesign and have been an active participant in many of the planning meetings over the last several years. Our industry has been through more changes than most in recent memory yet, through the changes and uncertainty, we are always looking for opportunities to meet the needs of our communities; always moving towards solutions. Providers and our clients alike, need the Legislature to continue to play an active role to ensure that not only are the necessary investments being made to provide evidence-based treatment but that those responsible for overseeing the care of Ohio's neediest citizens are being held accountable.

Thank you, Mr. Chairman, for allowing me the opportunity to testify today. I am happy to answer any questions that the committee may have at this time.