Ohio House of Representatives
Finance Health and Human Services Subcommittee

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Testimony on HB 166

Witness: Eric Cummins
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Chairman Romanchuk, Ranking Member West and members of the Subcommittee, thank you for the opportunity to offer testimony on HB 166.

My name is Eric Cummins; I am the CEO of the St. Joseph Orphanage, a comprehensive behavioral health and educational treatment agency that helps children and their families on the road to recovery and success. For over 190 years, St. Joseph Orphanage has partnered with our community members to address their emotional, psychological, and educational needs. On any given day, we serve over 1,400 children and their family members in the Cincinnati and southwest Ohio region.

My organization is primarily funded through Ohio’s community behavioral health Medicaid program. We prepared for and survived implementation of the Behavioral Health Re-Design. It was a difficult transition for us but we prepared over a year in advance and leveraged various grants to enhance our skillset and competencies. While this transition has helped us become a stronger organization, St. Joseph Orphanage, and other community agencies in the sector, still have several challenges ahead of us that threaten our ability meet the behavioral health needs of your constituents and all Ohioans. These challenges largely center around two topics: workforce and innovation.

There is an incredible shortage in Ohio’s behavioral health workforce – including psychiatrists, social workers and counselors, nurses, and paraprofessionals. This shortage affects community behavioral health
providers, as well as hospitals, health clinics, health systems, health plans, and other employers of behavioral health professionals. However, of all of these employers, our sector probably feels the pain of the workforce shortage the most, since we can’t offer as competitive starting salaries and compensation packages.

Further, one of the major lessons our state experienced with the roll out of the Behavioral Health Re-Design, is that our sector wasn’t ready. Many community behavioral health providers still do not possess electronic health records, many do not use a billing clearinghouse software to streamline claims submission, and few have access to sophisticated data analytics tools that are essential to manage quality improvement and to engage in population health management. The expertise these agencies need around topics like contracting, credentialing, billing, and documentation, wasn’t fully acquired in advance, and instead, most agencies are learning these topics through trial and error.

I reviewed the state budget and saw several areas of new investments and initiatives around workforce and innovation, however it does not appear that any of that funding would directly help the behavioral health sector. Therefore, to advance our sector and state forward, I strongly encourage the Legislature to invest in workforce and innovation in the behavioral health. In the Ohio Children’s Alliance budget platform, they called for an annual investment of $6 million to OhioMHAS for workforce, and another $8 million to OhioMHAS to support innovation. I believe that would be a great start.

Thanks again for your time today.

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