



Testimony by
Terry Russell, Executive Director
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and
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On H.B. 64, the FY
'16 – '17 Biennial Budget before
the Senate Medicaid Committee
May 14, 2015

Chairman Burke and Members of the Medicaid Committee on Health and Human Services, thank you for the opportunity to testify before you today on H.B. 64. My name is Terry Russell and I am the Executive Director of both the National Alliance on Mental Illness of Ohio. Also, as a result of a management agreement in 2013, I serve as the Executive Director of the Ohio Federation for Children's Mental Health. Combined, these organizations serve as Ohio's voice on mental illness for individuals and families across the lifespan.

When I testified in the House, I ran over time and had to stop before I was finished, so I am going to quickly hit the highlights and am happy to respond in greater detail afterward.

Maintain the \$7.5 million investment in the Residential State Supplement (RSS) program currently in the Governor's and the House's version of H.B. 64. This program is essential to those individuals whose illness prevents them from living on their own. Until 2013, ACFs had been a long neglected part of the state's budget. These funds will help ensure that they provide a level of care of which the state is no longer ashamed.

Restore the \$20.1 million investment in regional alcohol, drug addiction and mental health crisis and housing programs which the General Assembly made last year. Prioritizing state funds in this manner greatly improves access to critical high cost, low utilization programs in underserved areas of Ohio which have few, if any, levy dollars to purchase these programs.

Restore \$9.9 million to the local Alcohol, Drug Addiction and Mental Health (ADAMH) Boards and direct the dollars be used specifically for mental health services and supports. The emphasis placed on establishing a continuum of care for individuals addicted to opiates in the mid biennial review means local funds will be diverted from mental health. These dollars are needed to ensure that efforts to address the opiate epidemic do not come at the expense of individuals experiencing mental health crises.

Reinvest \$1.5 million in each year of the cost savings from the Department of Youth Services facility closures in at-risk youth. In 2014, Gov. Kasich invested \$5 million in the Strong Families, Safe Communities initiative following the tragic shooting at Sandy Hook Elementary. The type of programs this initiative supports -- respite, rapid response teams and family mentoring -- are EXACTLY what families say they need. Youth who previously would be locked up for their behavior are now living in our communities. Many of their families do not have the services and support necessary to meet their child's needs and keep our communities safe.

Set aside \$500,000 for start-up funds to incentivize Probate Courts and ADAMH Boards to partner effectively to implement S.B. 43, Ohio's Court Ordered Outpatient Treatment law. This bill, which passed the General Assembly unanimously last year, gives Judges clear authority to order individuals with untreated mental illness with a history of dangerousness into outpatient treatment. Unfortunately, many communities are not using the new law and individuals who could be successfully treated in the community are taking up beds in our jails and hospitals.

Maintain funding for mental health treatment for inmates in the Ohio Department of Rehabilitation and Correction's institutions. It is a sad reality that individuals with serious mental illness are grossly over represented in Ohio's prisons. Ensuring that they receive adequate mental health care while incarcerated will reduce the likelihood that they will return after they are released.

Again, thank you for this opportunity to testify. I am happy to answer any questions.