

**Ohio Senate Medicaid Committee**  
**Testimony of:**  
**Miriam Walton, Executive Director**  
**Ashtabula County Mental Health and Recovery Services Board**  
**May 14, 2015**

Chairman Burke, Ranking Member Cafaro, and members of the Senate Medicaid Committee, thank you for allowing me to provide testimony on this very important subject.

My name is Miriam Walton. I am the Executive Director of the Ashtabula County Mental Health and Recovery Services Board and the parent of an adult child diagnosed with a severe and persistent mental illness. I am providing this testimony on her behalf and on behalf of all of the individuals in my county who are in need of both mental health and substance abuse treatment and recovery support services.

At our last Opiate Summit our Prevention Coalition decided to not only include a panel of individuals in recovery but to ask some family members to speak about their experiences and what it meant to them to be on the front lines. One parent described in detail almost losing her adult child to an overdose and watching her husband administer CPR to her child as they waited for the ambulance to arrive. Another young woman spoke about losing both her Mother and her brother to heroin overdoses within months of each other and how it changed her and her family forever. At our Suicide Prevention training in April we will have a panel of survivors speak and share their stories about the aftermath of suicide and what we can do to reduce stigma and the factors that lead to suicide perpetuating itself in our county.

Over the last four years we have averaged 18 unintentional overdose deaths per year and 16 other substance use or abuse related deaths. We are hearing story after story of overdoses and NARCAN administration from EMTs and other emergency personnel on a regular basis. Just recently, the local newspaper quoted law enforcement officials stating that heroin is the current “biggest threat” to Ashtabula County. And for the first time since we have begun tracking our top ten diagnoses, as of today, Opioid Use Disorders have overtaken Alcohol Use Disorders as the number one substance abuse diagnosis for the population we serve (both Medicaid and Non Medicaid eligible clients).

Ashtabula also averages about 17 suicides per year. This means that our suicide rate is the 9<sup>th</sup> highest in the state at 16.8 per 100,000 and well above the national suicide rate of 11.5 per 100,000. Around 70% of the population we serve is dually diagnosed with substance abuse and mental health issues and in SFY 2014 the Board provider agencies served 6,114 Medicaid and Non Medicaid clients.

These are real people. They are someone's father, mother, son, daughter, brother, sister and friend. They are our neighbors or someone our neighbor knows. We must build the best possible system of care with the best opportunities for access, engagement, intervention and recovery and we must focus efforts on prevention.

Thus our Board and community response was to begin building a Recovery-Oriented System of Care designed to help the people we serve attain their goals of recovery, reach their full potential and live a "getting ahead" life, not just a "get by" existence.

We have supported Medicaid Expansion and our agencies are working hard to get every eligible citizen on Medicaid so that they can access the life saving services they need. It has been a lifeline for so many who were not able to access the healthcare and treatment services they have needed in the past. For Ashtabula County, it has also freed up some of our state and local funds for those vital recovery supports services that are not Medicaid billable but essential to maintain a lasting and meaningful recovery. Services like detoxification, Supported Employment, recovery coaches and peer supporters, Medication-Assisted Treatment, Transition to Independent Living for transitional youth, respite for families of SED children, parent education, behavioral health intervention in the schools, Jail Treatment Services, Prison Re-entry Programming, Housing Options, targeted emergency assistance, and coalition organized prevention and public awareness activities are long-term personal and community changing interventions that touch every client no matter the payer source of their services.

We have worked with our provider agencies to increase their expertise in evidence-based practice and funded our first ever immediate access mental health clinic. This clinic provides same day or near same day access to mental health assessment and intervention services for clients that decide today is the day. This program has served over 250 individuals since it opened a year ago and has increased engagement in services and collaboration across all social services organizations as workers do "warm handoffs" to other community organizations to ensure that the needs of the client are met.

As we move forward we will need some basic fundamental building blocks in place to continue to build a Recovery-Oriented System of Care. Medicaid Expansion has impacted our county system in a positive way. Having that available without any barriers put in place will ensure that everyone eligible will have the opportunity to gain the healthcare services they need. Having stability in funding from year to year is also a vital component to planning and giving both the clients and the behavioral healthcare providers the assurance that we are all in this process for the duration. We cannot be constantly standing programs up and taking programs down. It greatly destabilizes the clients, the community and the system of care. We need continuity in our care of clients and we need continuity in our allocations.

I would not sit here today and say that I understand the magnitude of the task you have at hand. I will not sit here today and venture to tell you what you need to do and how you need to do it. What I will say is that in my county we have a crisis and we are working together as a community to tackle the problems we are facing and we need whatever resources and support you can render us to meet the challenges at hand.

Thank you for the opportunity to provide this testimony.