

## HB 49 - Ohio State Biennial Budget

Jeff Daniels

### Testimony to Ohio House Finance Subcommittee on Health & Human Services

Chairman Romanchuk, Ranking Minority Member Sykes, and members of the House Finance Subcommittee on Health and Human Services, thank you for the opportunity to testify about HB 49, Ohio's Biennial Budget. My name is Jeff Daniels. I have been a resident of Ohio for over 31 years. I have a loved one who is afflicted with mental illness. I refer to my ill relative as my "loved one" out of respect for their anonymity, and because sadly our society all-too-often places a stigma on the brain disease we call "mental illness".

As an active member of the National Alliance on Mental Illness (NAMI) of Ohio, I'd like to tell you about my family's journey along our long path of living with mental illness. Having taught NAMI Family-to-Family classes and heard the stories of over 60 other family members with mentally ill loved ones, I can say that our journey is typical of other families in our situation.

My loved one is diagnosed with bipolar disorder. The disease manifested itself initially as a behavioral problem in the late teens. Unfortunately, the long delay in diagnosis set my loved one on an early life diversion of spending months languishing in a substance abuse treatment facility, and spending several subsequent years cycling in and out of facilities as bipolar illness took over my loved one's life. All this time, family and former friends insisted that all that was needed was discipline and focus – "get a job" was a common theme from other family members, and I felt that I was not providing the guidance that was needed. In fact, my loved one could not work, and the behavioral problem – manifesting itself through substance abuse – was most likely self-medication for the bipolar disease.

At about 25 years old, my loved one attempted suicide. My loved one recovered eventually, but only after over a week on a ventilator. Afterward, my loved one was subsequently sent to a drug rehab facility. Once again, the diagnosis of bipolar disorder was missed. Needless-to-say, the cycle of aberrant behavior continued for several years after the attempted suicide. We continued our financial support for several years to keep our loved one off the street, but our patience and options were running out. When our loved one was around 30 years old, the manic periods became so intense that we overcame our own denials and finally recognized there was an underlying mental illness.

At this point, we looked to the National Alliance on Mental Illness (NAMI) for help and support. NAMI's advice and support led us to Southeast Behavioral Health Center. When the situation got extremely difficult, our loved one was hospitalized several times at Twin Valley. **During this period, we were able to establish insurance coverage for my loved one through the Medicaid expansion. The steady access to mental health services my loved one had access to through the Medicaid expansion was invaluable to his stabilization and ongoing recovery from his mental illness.**

Hopefully and thankfully I can now say that the situation of my loved one has been stable for over a year. My loved one is not employed, and cannot focus or concentrate enough to hold down a job. My hope and promise for my loved one as a teenager has turned into thankfulness for my loved one's presence in my life. My loved one, my loved one's caregivers, the wonderful people in the NAMI support system, and the dedicated public servants (health professionals, Crisis Intervention Team (CIT)

trained police, the probate court system, and social workers) has taught me about human kindness, giving, and love in a way that I would have never known if it were not for my loved one's mental illness.

My loved one is my "teacher", and this life-learning experience has taught me that the public financial, legal, and health care safety net is a necessity for those who suffer from the disability of mental illness. Mental illness is debilitating and often progressive throughout the life of the thousands of Ohioans who are afflicted by this silent disease of the brain that we call "mental illness". Medicaid is the foundation stone for their daily struggle to maintain their health.

The Medicaid expansion has allowed thousands upon thousands of Ohioans with mental illness and substance use conditions to receive lifesaving treatments for their brain disease. For many, Medicaid makes the difference between getting medications that enable them to live independently, or living on the street, sinking deeper into the abyss of untreated mental illness. For other victims of mental illness, Medicaid makes the difference between getting basic psychiatric care or cycling in-and-out of hospitals on an emergency basis. And, public support, with Medicaid as the foundation, is essential for families who assume the responsibility for a mentally ill loved one. Without Medicaid, many of the mentally ill and their families would be unable to adequately care for their loved ones. Our hospitals would be faced with terrible choices of refusing care to those who desperately need it. Ultimately many more of our mentally ill citizens would end up dead, on the street, or in jail - at the bottom of the "default" behavioral healthcare system.

I urge you, the members of this committee, and every member of the 132<sup>nd</sup> Ohio General Assembly, to maintain the Medicaid expansion in this state budget. Thank you again for this opportunity to testify on HB 49 and the importance of the Medicaid expansion in my loved one's life and the life of hundreds of thousands of Ohioans with mental illness. At this time, I am happy to answer any questions that you may have.