



Senate Finance Health and Medicaid Subcommittee  
Public Testimony on H.B. 49 – Behavioral Health Redesign  
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Chairman Hackett, Ranking Member Tavares and members of the Senate Finance Health and Medicaid Subcommittee, thank-you for the opportunity to provide testimony today on H.B. 49 regarding provisions related to the Behavioral Health Redesign. My name is Tina Pine and I represent Century Health located in Findlay, Ohio. Century Health is a community based behavioral health center that provides a wide range of treatment services and supportive interventions to help individuals and families struggling with addiction and mental illness. Our organization has been in existence for over 40 years- serving children, families, individuals and groups in Hancock County and the surrounding area. Century Health employs 108 staff and we serve over 4000 people annually. Our continuum of care is expansive and varies in level of intensity. Our services can address short-term problems as well as those serious mental illnesses and addictions that have progressed to the point of destroying lives. Many resources have been invested in the past 3 years to expand our addiction services to address the opiate epidemic. I, personally, have worked in community behavioral health care for 37 years. I have witnessed various forms of system transformation over the decades and recognize that behavioral health treatment can be strengthened and improved when thoughtful, sensible and realistic change is planned and implemented.

I am speaking with you today to share my concerns about Behavioral Health Redesign and the goal to execute the plan on July 1, 2017. I recognize all the hard work over the past months and appreciate Ohio Department of Medicaid (ODM) and Ohio Department of Mental Health and Addiction Service's (MHAS) commitment to maintaining service access, capacity and workforce. Century Health's leadership team has diligently worked to comprehend and understand the changes associated with redesign and to determine the impact on our services. It has been difficult to be adequately prepared due to the repeated number of changes in the rules and rates. Several of the changes that have been made over time were important and necessary to preserve accessibility and capacity of our services. Recent revisions elicited feelings of sheer relief, however, much apprehension remains.

Century Health provides our community with a very responsive emergency crisis service and it is this most critical intervention that is most negatively impacted by BH Redesign. Our trained and licensed staff are the experts called upon to respond to a behavioral health crisis. They work with the individual in need, their families and our referral partners to resolve the adverse situation, from beginning to end, to arrive at the best case disposition. The rate reduction, limits on timelines and the narrow definition of duties will have a harmful effect on the practice of crisis intervention. If teams such as ours cannot be sustained, the cost and responsibility to intervene will be diverted to hospital emergency rooms, law enforcement and jails. Our community prides itself on the immediate availability of behavioral health experts to resolve psychiatric and substance use crises. This current practice increases the likelihood of treatment



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engagement and offers follow-up outreach to the crisis situation. To eliminate current practice would lead to chaos in emergency rooms and extra burden on first responders.

It makes sense to modernize and align coding with the national standards, however, medical practitioners who have worked in community behavioral health have not been exposed to using the E & M codes. This is a new method of defining and describing our medical services that requires detailed training to modify practice. More challenging is the need to change our documentation forms within the electronic health record. Century Health does not have the technological expertise to make these changes, therefore, costs are incurred to hire external help to align our system to the new codes. Our organization needs support and time to master these changes with the hope that service to clients won't be lost in the process.

My greatest concern is the implementation timeline. ODM and MHAS have yet to finalize the rules or the provider manual. The lack of finalization and testing of the IT specification for MITS is most troublesome. A six week window is not enough time to assure that systems are set up properly and can actually function with no problems. It was just last week that Century received guidance from our IT software vendor that identified the scope of work necessary to meet the redesign changes. There are 6 different manuals with a multiplicity of instructional steps. I encourage the Senate to support the House's decision to delay service and coding changes by six months. This will allow agencies a reasonable period of time to alter IT systems and an extended timeframe to test the revised systems along with providing necessary staff training.

Although not an ideal situation, the reality for Century Health is that we operate with minimal cash reserves. Typically, our organization has 15 days of cash on hand. In months when we have 3 employee pay periods, our cash on hand can drop as low as 3 days. We have come to rely on the timely turn-around of our Medicaid claims, which comprise 65% of revenues. Our organization needs assurances for prompt payment of claims in order to serve our clients. For Century, there is no room for error with the transition to the new coding/payment rates or the eventual transition of behavioral health service to managed care.

The changes and challenges facing behavioral health providers in Ohio are significant. There is a new payment model, new and revised Medicaid and Behavioral Health rules and policies (still not finalized) and a total re-structuring of the electronic health record and billing systems. These changes are considerable and behavioral health providers deserve the necessary time to achieve a successful transformation.

I am grateful for the opportunity to share my comments and concerns. I am willing to answer any questions you may have.

