

03 March 2021

Positive Leaps Testimony on House Bill 110, Main Operating Budget Bill for SFY 2022-2023

Chair Roemer, Ranking Member West, and Members of the Finance Subcommittee on Health and Human Services, Thank you for the opportunity to offer testimony today regarding House Bill 110, the Main Operating Budget bill for SFY 2022-2023.

My name is Sheree Lynch; I am a Registered Nurse and the Founder and C.E.O. of Positive Leaps. Positive Leaps is a pediatric mental health facility serving children throughout south-west Ohio with two offices located in Butler and Clermont Counties. I provide out-patient and intensive out-patient counseling services to children of any age, and I operate a 60 child-capacity Day Treatment Center for young children with severe behavior problems.

I offer testimony today in support of the following particular aspects of House Bill 110.

- 1. The protection of vital behavioral health resources. I am in support of Governor DeWine's proposed funding for the Medicaid Managed Care Line Items, the DODD and Medicaid multi-system youth line items to support custody relinquishment prevention and respite services and the Governor's proposed funding for ODMHAS Continuum of Care line item. The children most often cared for in Positive Leaps' Day Treatment Center are at-risk for entering in-patient psychiatric treatment, often lose foster placements because of their severe behavior problems, and are at high risk of becoming consumers of multiple county and state service providers throughout their life-times, if their mental health concerns are not successfully addressed. The Governor's emphasis upon mental health and SUD services as reflected in his proposed Budget are needed to avoid adverse outcomes to children, their families and to our over-all success as a state. I urge your support of these Budget Items.
- 2. Expansion of Telehealth Access for Mental Health. I am in support of the one-time \$10 million competitive grant to support the expansion of telehealth infrastructure for Medicaid-eligible service providers in the Department of Medicaid. Since March of 2020, Positive Leaps has relied upon telehealth to provide needed mental health services to children and their parents/guardians during the public health emergency. Prior to March of 2020, Positive Leaps had no telehealth platform. Rules and regulations were overly restrictive. When the public health emergency was declared the Federal and State government relaxed and amended Rules and regulations, which permitted Positive Leaps to continue to provide some services by means of Telehealth. However, providing telehealth services has increased our costs of doing business. We have had to purchase more laptops, and need to purchase more. Purchasing software platforms such as Zoom Pro, which provides client confidentiality, is an unanticipated expense, and has increased our costs at a time when reimbursement for therapy services has remained flat. Some of our families do not have smart phones, computers/laptops/tablets, or even internet services, which impacts upon the family's ability to consume these services at a time when they may have had to quarantine for exposures. I am urging your support of this Budget Item to enable the continuation and expansion of telehealth services.
- 3. Ensure Wellness and Success Funds are Implemented with Fidelity to the intent of the legislation, rather than to balance school budgets. While I support the Governor's proposed increase, I request that clarifying language be included in the Budget Bill to ensure that school



districts spend their allocations on wellness initiatives and prioritize social / emotional needs. I also ask that the Budget Bill clearly state that community behavioral health providers must be used as public partners, rather than optional public partners. It is important that we ensure that children have access to mental health services, and Positive Leaps is committed to being a responsive provider of those services.

- 4. Non-Emergency Medical Transportation. At any one time, approximately 25% of the children in Positive Leaps' Day Treatment Center depend upon NET for transportation to and from their sessions. Their parents do not have dependable transportation, there are no bus lines, or they have no money for the increase costs associated with gasoline consumption or wear and tear on their automobiles. Issues with NET Transportation have existed long before the public health crisis. There is inconsistent administration of this Medicaid benefit from county ODJFS to county ODJFS. For several months in 2020, some CDJFS offices stopped providing direct transportation entirely for children in need of day treatment services. This occurred in our service area. Instead, the parents of small children were offered bus passes! As a result of this arbitrary move by the county JFS, many children could not return to treatment, and Positive Leaps lost significant business at a time when business was already suffering from the effects of the public health emergency. I am requesting that legislative language be created which explicitly prescribes 1) the right of a child to be directly transported to the child's medically-necessary Day Treatment throughout the entire year, and 2) uniformity of services across all County JFS offices, whether or not a public health emergency exists. Please feel free to contact me for suggestions or more information.
- 5. Child Welfare Resources. While Positive Leaps does not operate a foster agency, Positive Leaps does serve a substantial population of children known to the child welfare system along the continuum. I am urging your support of the Governor's proposed funding for Child, Family and Community protective services line items, the Family and Children services line item, and ensuring that the Kinship Support Program remains fully funded using GRF dollars. I am also in support of eliminating the unnecessary "red tape" associated with resolving the child welfare workforce shortage, especially with permitting "deemed status" by achieving national accreditation for recognition by their state licensing agency. Expanding deemed status would achieve a more streamlined and cost-efficient regulatory system. Therefore, I am urging that language be added to ensure that ODMHAS and ODJFS utilize deemed status for child welfare agencies for non-safety requirements.

Chair Roemer, Ranking Member West, and Members of the Finance Subcommittee on Health and Human Services, thank you again for the opportunity to testify today. Please feel free to contact me with any questions or requests for assistance.

Sincerely,

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