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House Finance, Subcommittee on Health and Human Services
Testimony on HB 33 (SFY 2024-25 Operating Budget)
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Chair Carruthers, Ranking Member Liston, and members of the House Finance, Subcommittee on Health and Human Services thank you for the opportunity to offer testimony on House Bill 33, Governor Mike DeWine’s executive budget proposal for state fiscal years 2024-2025. I am Teresa Lampl, CEO of the Ohio Council of Behavioral Health and Family Services Providers (the Ohio Council). The Ohio Council is a statewide trade and advocacy association representing over 165 private businesses providing community-based prevention, substance use, mental health, and family services throughout Ohio. Our member organizations care for individuals and families across the lifespan by offering person-centered services and support.

Today, more Ohioans of all ages need mental health and substance use services – yet most have difficulty accessing care due to the lack of available providers. Waiting times have become weeks and months rather than days and weeks. In 2021, 41% of Americans reported mental health or substance use need. New data from the CDC found that 57% of high school girls and 29% of high school boys experience symptoms consistent with major depression. A 2021 survey of parents conducted by Nationwide Children’s Hospital, found 53% of working parents have missed work at least one day a month to care for their child’s mental health, and that their work performance was impacted by their child’s needs. And, tragically Ohio remains a top state for opioid overdose deaths.

The Ohio Council applauds Governor DeWine for his leadership and bold vision for Ohio’s community-based mental health and substance use disorder system of care – and his commitment to invest in the health and economic wellbeing of Ohio’s children, families, and communities so they have the tools to succeed and ability to thrive. I would be remiss if I did not acknowledge the members of this committee and the entire Ohio General Assembly’s efforts in recent years to invest in Ohio’s behavioral health system. These investments are critical to stabilizing and strengthening Ohio’s system of care for individuals seeking mental health and addiction treatment – thank you.

Throughout his tenure, Governor DeWine’s message has been clear – his administration intends to fulfill promises of the past by partnering with lawmakers to develop and strengthen the infrastructure that is necessary to support a high quality, accessible and effective behavioral health system throughout Ohio. Addressing the behavioral health workforce crisis remains paramount. The important policy initiatives and key funding investments included in HB 33 that continue to stabilize the behavioral health workforce; expand access to home and community-based services; address stigma and insurance parity enforcement; enhance prevention and school-based services; advance quality standards; and invest in research and innovation, will pay dividends far into the future. These investments are critical drivers for the economic health of Ohio’s communities as today’s

children are tomorrow's students, workforce, and entrepreneurs. There will be a return on these investments.

With respect to key provisions in the executive budget, I would like to highlight certain provisions that specifically address Ohio Council priority areas and offer a few recommendations.

Medicaid Behavioral Health Rate Increases

The Ohio Council supports the Department of Medicaid's budget proposal and is very appreciative of the historic investments in the mental health and substance use disorder system of care – in response to the significant workforce challenges community behavioral health providers are experiencing. Based on the Department of Medicaid's budget materials, the targeted investments for the behavioral health system include:

- A 10% rate increase over the biennium for community behavioral health services totaling \$220 million;
- \$30 million for Mental Health Peer recovery support services; and
- A 6% (all funds) rate increase for inpatient services in free standing psychiatric hospitals and acute psychiatric units of hospitals totaling \$130.1 million.

We are grateful for this recognition and investment in Ohio's behavioral health services. These remarkable provider rate increases proposed by Medicaid for the various healthcare provider groups (BH, DD, Aging) are encouraging steps in the right direction during this challenging and volatile labor market.

The labor market challenges since the COVID-19 pandemic have only worsened – placing even greater wage pressures within and across job sectors. The behavioral health workforce encompasses a wide range of disciplines and educational levels, providing prevention, treatment, and recovery services for mental health conditions and substance use disorders. Salaries in behavioral health care positions are well below those for similar positions with similar education and licensure requirements in other health care sectors and service sectors.

In fact, current job openings offer 20% higher wages compared to the 2022 median salaries of a cross section of community behavioral health positions posted on Indeed.com. Turnover rates increased to almost 40% in 2022 across the community behavioral health industry and are above 50% for larger organizations and those in urban settings. Residential treatment providers report operating at 50%-75% capacity because they are unable to recruit staff to expand care. In short, more investment is needed to sustain, attract, and retain the workforce in today's labor market while building the workforce needed for the future.

Accordingly, we respectfully ask for your support to maintain and increase this critical funding for Medicaid community behavioral health services by an additional 10% or \$220 million over the biennium to strengthen the behavioral health workforce and incentivize careers in community behavioral healthcare. It cannot be forgotten that it is the combination of state and federal resources directed toward Ohio's Medicaid program, which is an important work support program, that has become the key pathway for Ohioans to access mental health and substance use treatment services.

Ohio Department of Mental Health and Addiction Services

The Ohio Council applauds Director Criss and the Department of Mental Health and Addiction Services (OhioMHAS) for its efforts to develop, strengthen, and enhance the community behavioral health system of care, and we strongly support the department's proposed budget. HB 33 continues the DeWine administration's bold efforts and significant investments to address the promises of the past and begin to build a high quality, accessible system of care in all communities throughout Ohio that meet the needs of individuals we serve and their families. Specifically, we strongly support the continued investment in prevention and early intervention services; crisis stabilization centers and implementation of the 988-crisis line; expanded access to safe, quality recovery supports like peer recovery services and employment; and efforts to expand access to community forensic centers in order to decrease visits to emergency departments and jails.

We are equally supportive of proposed OhioMHAS policy and language changes to promote better quality and support the well-being of persons receiving care in Ohio's community behavioral health system. The proposed changes will enhance quality through the adoption of national accreditation for OhioMHAS certifiable mental health and substance use services, as well as require provider organizations to be in good standing in Ohio and other states where such organization operate. Additionally, OhioMHAS proposes to bolster quality through national accreditation for recovery housing, create a statewide registry of accredited recovery housing, and establish a process for reviewing quality concerns.

Ohio Department of Insurance

The Ohio Council is pleased to see resources in HB 33 for the Ohio Department of Insurance's efforts to raise awareness and conduct greater enforcement of the Mental Health Parity and Addiction Equity Act of 2008. More must be done to share information and resources to help Ohioans and employers better understand their rights and responsibilities under the law. Insurance parity enforcement can be a tool to help expand treatment capacity and services while also ensuring resources are appropriately and efficiently allocated within the public and private health insurance markets. The Ohio Council supports Governor DeWine's executive order establishing the office of Mental Health Insurance Assistance (MHIA) within ODI. And we appreciate the efforts of Director French to appropriately staff the department with professionals experienced in clinical health services and health data. It is critical that ODI staff be capable of conducting thorough and complete parity compliance reviews in order to better hold insurance plans accountable to the law and ensure their customers receive the mental health and substance use disorder services they've paid for.

Again, we thank the Ohio General Assembly for passing SB 284 during the lame-duck period of the 133rd General Assembly. This legislation included provisions that aligned state law with the federal parity law and directed both the departments of Insurance and Medicaid to implement and enforce these laws. The Ohio Council looks forward to working with ODI to develop regulations that will advance its parity related enforcement rules.

Opportunities for Ohioans with Disabilities (OOD)

The Ohio Council has several members that offer supported employment and vocational rehabilitation service lines to support and sustain recovery for individuals living with mental illness and substance use disorders. These programs are supported through various funding sources, including reimbursement from OOD's vocational rehabilitation program. Accordingly, the Ohio Council strongly supports the OOD budget proposal and acknowledges Director Kevin Miller's leadership and his team's efforts to responsibly grow the funding available for vocational rehabilitation services in Ohio. We are very pleased that for the first time in many years, Ohio will provide sufficient state resources to be able to pull down the full allotment of federal resources available to us. These resources can then be used to expand services to Ohioans with disabilities in need of supported employment and other job training services. Work is an important factor in an individual's recovery journey – offering purpose, structure, and stability. However, our ability to provide supported employment services is becoming more challenging due to several factors: volatile labor market forces; workforce recruitment and retention challenges; and the rising costs of doing business. The Ohio Council looks forward to partnering with OOD to continue its efforts to expand vocational rehabilitation service capacity through greater partnerships and investments with community providers, especially those with appropriate accreditation in serving Ohioans with mental health and addiction conditions.

Student Wellness and Success Programs

The Ohio Council commends the Governor for including within the Department of Education's budget proposal significant resources aimed at bolstering student wellness and success funding. As proposed, these resources will expand greater access to school-based health and behavioral health services, which are critically important for learning and preparing students to achieve their potential. While Ohio Council members have always been engaged and providing services in schools, the student wellness and success funding has expanded this opportunity to collaborate and contract with their school-district partners. A 2022 survey of Ohio Council members indicated that community behavioral health organizations are providing services in 73% of Ohio school buildings. Specifically, our data shows that 75 provider organizations are in 2,896 school buildings throughout 553 school districts, charter schools, and ESCs. Our survey data also indicates that schools are expanding or intensifying their onsite prevention and/or treatment services, as well as immediate access to crisis de-escalation and behavior management services from community behavioral health organizations. These funds have also supported consultation and training for educators and school administrators in response to the increased needs of our students resulting from the COVID-19 pandemic. Clearly, this funding is making a difference and should be maintained.

We do, however, recommend supporting the greater safeguards and transparency tools proposed in HB 33 so that community partners and policy makers better understand how these resources are invested at the school district level. Leveraging these existing partnerships between school and community behavioral health providers is a wise strategy to maximize workforce, overcome barriers to accessing care, and promote healthy school environments. As I have stated many times before, today's children are tomorrow's adults, parents, community leaders, workforce, and the key to our state's economic success.

Conclusion

The Ohio Council looks forward to working with the DeWine Administration and lawmakers during this budget process to advance sound policies, and direct resources to support community behavioral health providers, and most importantly help Ohioans seeking mental health and substance use disorder services to achieve health, wellness, and recovery.

Thank you for your time and consideration today. I am happy to answer any questions.