



## Promoting wellness and recovery

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Mike DeWine, Governor • Lori Criss, Director • 30 E. Broad St. • Columbus, OH 43215 • (614) 466-2596 • mha.ohio.gov

Ohio House of Representatives Finance Subcommittee on Health and Human Services  
Ohio Department of Mental Health and Addiction Services  
Executive Budget Recommendations for SFY 2024-2025  
Lori Criss, Director  
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Chairwoman Carruthers, Ranking Member Liston, and members of the Subcommittee, thank you for the opportunity today to discuss the Executive Budget recommendations for the Ohio Department of Mental Health and Addiction Services (OhioMHAS). I am grateful for the General Assembly's partnership in our work to help Ohioans living with mental illness and addiction find healing and hope, and I look forward to answering any questions you have.

We recognize that in recent years the mental health and addiction challenges faced by Ohioans have become more visible and, in some cases, more pronounced. The spotlight on mental illness and addiction has never been as bright as it is now, and Governor DeWine has made strengthening our behavioral health system one of his hallmark priorities.

Our goal is to keep people from having a behavioral health condition in the first place. We want to give all Ohioans the prevention tools they need to build resiliency and promote good mental health. And for those Ohioans who need care and recovery supports, we want them to see a clear pathway – at whatever point they enter our health care system and in whatever community they live. The health and success of our families, our communities, and our economy depend on this work.

We are doing this work better today through an improved community planning process, and I thought it would be helpful to share what that looks like before I review specific budget highlights.

Our work is done alongside Ohio's 50 Alcohol, Drug Addiction, and Mental Health (ADAMH) Boards and with providers of prevention, treatment, and recovery services. We provide leadership and support for local planning and collaboration to meet locally determined needs. We are growing the partners at this table, and I am excited and energized at the collaboration happening across Ohio to support our Boards and providers.

This work is supported through a modernized Community Assessment and Planning process completed in partnership with the ADAMH Boards. Goals are being set and monitored

at the local and state levels to identify gaps and ensure effective use of resources. This new approach focuses on measurable outcomes and drives collaboration, accountability, innovation, and quality for taxpayers. We are in the final stages of completing these three-year plans with the local Boards, and they will be publicly available this Spring.

We are also working diligently to make data more visible, actionable, and measurable. Currently, Ohio's technical infrastructure and processes for collecting and reporting behavioral health data are not as aligned, efficient, or effective as they should be. I am committed to modernizing our data collection, sharing, reporting, and analytics capabilities, to ensure Ohio is positioned to maximize our ability to make data-informed decisions and enhance behavioral health service delivery and coordination. As part of this work, we will be releasing an RFP in the coming weeks, seeking assessment and planning services for data integration and data reporting consultation services from an experienced firm. This will include gathering input from, and working collaboratively with, our ADAMH Boards and network of behavioral health providers.

In addition to this strategic work, we are publishing an inaugural Annual Data Report this month that collects important data sets from various state and federal agencies to help people better understand the current state of behavioral health in Ohio and how we compare to our region and nationally. County profiles with localized behavioral health prevalence, diagnosis, and utilization data are also available on our website. And earlier this week, RecoveryOhio announced the launch of new dashboards to better track and report data on overdose deaths and other substance-use measures for all 88 Ohio counties. All of these efforts are part of our approach to help the state and local communities plan services and help us measure outcomes.

Turning now to key investments in our budget proposal, these include prevention and early identification; crisis services; recovery supports; hospital, forensic, and criminal justice supports; and innovation and research. I'll spend just a few minutes reviewing each for you.

### **Prevention and Early Identification**

Prevention and early identification programs represent services that help prevent or delay the onset of behavioral health concerns for Ohioans across their lifespan.

Deaths from suicide increased steadily in the last decade, and while this loss of life receded slightly in 2020, early indications are that death from suicide and suicidality are trending upwards again. Last month I shared with you real-time data from Emergency Departments in Ohio that showed between the end of December and January, we saw 2,260 visits by youth and their families - in one month - to get help for suicide.

Our GRF funding request will allow for core strategies in Ohio's Suicide Prevention Strategic Plan to be brought to scale to benefit Ohioans across the state and will be done through public and private partnerships that include local ADAMH Boards, Public Health Districts, and local health care, education, and business and community partners. This funding will increase the number of Ohioans trained to promote resiliency, promote protective factors, and reduce stigma in our communities and schools, specifically for those Ohioans who are experiencing higher rates of suicide such as youth from ages 10-24, males ages 25-59, veterans and military members, Ohioans who are Black, and Ohioans from Appalachia.

We continue to work collaboratively with the Ohio Department of Education to ensure the effectiveness of the Student Wellness and Success investments funding critical prevention supports in our K-12 schools.

This budget will also increase the number of Early Childhood Mental Health certified providers who have helped improve the number of children screened for behavioral health issues and the ability to connect their parents and caregivers with consultation and care that improves each child's life skills and development, reduces challenging behaviors and the number of suspensions and expulsions, improves classroom quality, and reduces provider stress, burnout, and turnover.

### **Crisis Services**

A quality crisis service system provides needed assistance to Ohioans and their families before an emergency occurs, rapidly responds to and stabilizes the person who is in crisis, and makes strong connections to community-based treatment and recovery services. It serves as a timely and appropriate alternative to arrest, incarceration, unnecessary hospitalization, or placement in a setting with insufficient resources to meet their needs. Your investments in each of these areas are achieving results that we must grow around the state.

We are working to make help visible and accessible through the statewide implementation of the 988 call/chat/text lifeline which connects Ohioans in a mental health or addiction crisis with an appropriate behavioral health response. Studies show that 80% of behavioral health crises can be resolved over the phone, relieving a huge burden currently being experienced by local law enforcement. Since July, about 10,000 calls, texts or chats are made to 988 from Ohioans each month, and we expect that number to grow as 988 becomes more widely marketed. The federal government has not identified future funding, and so we are asking for \$46.5M over the biennium to fund the continued operations of this life-saving resource.

The support you provided over the last two budgets has also stimulated the growth of mobile crisis services in 43 counties across Ohio, the opening of 20 behavioral health urgent

care centers, and the growth of crisis stabilization centers. An average of 200 children and families are receiving Mobile Crisis Response services each month. We want to grow more of this in Ohio, and our budget continues this funding for locally identified needs.

### **Recovery Supports**

This budget will build on the success of coordinated recovery supports for Ohioans to help them get well and stay well. This includes growing a successful pilot program to connect adults with serious mental illness who are involved with multiple systems with vital resources like housing, transportation, medication, and employment supports that aid in their stability. This pilot is seeing strong success resulting in fewer hospitalizations and incarcerations. From July to December 2022, 79% of the adults served in this program have not been admitted to psychiatric hospitals, and 90% have not been incarcerated - these are life-changing results. This budget also supports the growth of peer-run recovery centers that connect Ohioans to employment, life skills training, and social connections.

### **Hospital, Forensic, and Criminal Justice Services**

While we lift this important work in communities across Ohio, we must also focus on sustaining the safety net that our state-run psychiatric hospital system provides. OhioMHAS operates six psychiatric hospitals that cover six regions of the state, all of which meet rigorous national accreditation standards, evidence of our commitment to quality patient care and safety.

Patients enter our hospitals in two ways: they are referred by the local ADAMH boards (civil patients), or they are court-ordered (forensic). In recent years, our forensic patient population has grown significantly, to over 80% across the system. This has reduced bed availability, created growing waitlists, and placed burdens on local communities. When the pandemic limited our capacity even further, we developed an innovative program supported by the General Assembly to reduce waitlists by finding beds for indigent civil patients at private psychiatric hospitals. This program has served over 3,000 Ohioans to date and provided relief to community systems. Our budget continues this program and also increases the treatment capacity of our state hospitals by an estimated 75 beds.

The growing forensic population of criminal-justice-involved Ohioans is also taxing our local jails, courts, and forensic centers. Our ten Forensic Centers provide an important service to Ohioans involved with the criminal justice system who may be suffering from mental illness, helping ensure they receive fair and timely access to needed legal and medical supports. These Centers are experiencing a growing number of referrals and workforce challenges that impact the efficiency with which they can meet the needs of local courts. This challenge is not unique

to Ohio, and we are requesting additional funding to address this increase and grow the pipeline of new forensic professionals.

Our budget also provides additional flexibility for local jails that offer psychotropic drugs and medication-assisted treatment services to help Ohioans overcome addiction and manage mental illness while incarcerated.

### **Workforce**

And as you know, workforce issues continue to be a primary concern of the behavioral health field, and our approach to growing the workforce is strategic in design so that we can create transformational change across the system. Ohio's providers continue to work with incredible compassion and devotion to provide Ohioans with quality, person-centered care, but there are simply not enough of them to meet the need. While often not easy jobs, they are rewarding, and our team is committed to retaining and supporting these doctors, nurses, counselors, therapists, preventionists, social workers, direct care workers, and peer supporters, as well as building the pipeline of people interested in these careers.

We greatly appreciate the General Assembly's support of one-time funding for workforce, and we are working closely with the Ohio Department of Higher Education to fund the expansion of paid internships and scholarship programs in behavioral health-related fields, and we are planning this funding to be available to Ohio students this Fall. Our proposed budget continues additional workforce support through our network of statewide hubs that train professionals and communities around evidence-based best practices, data sharing, and learning collaboratives. It also supports our investment in Crisis Intervention Training for Ohio's law enforcement professionals.

Additionally, we are working with the Ohio Department of Medicaid to make mental health peer support a Medicaid-eligible expense, just as addiction peer support is currently; this helps us grow a needed role in the behavioral health workforce.

### **Innovation and Research**

You have heard Governor DeWine speak about the importance of innovation and research to inform the system we are building today. Ohio has many resources to help those with mental illness and addiction, but we must do more to identify and deliver prevention, treatment, and recovery supports at a scale to comprehensively affect outcomes and save more lives. It's no secret that Ohio was susceptible to the opioid crisis more than most other states in the nation. We also have higher prevalence of serious mental illness than other states in the Midwest and the U.S. We have an obligation to do more and to get better outcomes for our citizens and communities.

This budget allows the use of one-time funds for the creation of the State of Ohio Action for Resiliency Network – or SOAR Network. An Advisory Board led by OhioMHAS in partnership with other state agencies and diverse sectors including families, providers, local government, technology experts, first responders, philanthropy, insurers, workforce developers and employers, and more will create a strategic research agenda. Through the guidance of this Advisory Board, this network will harness the expertise of researchers, clinicians, and educators to pursue answers to questions laid out in the strategic research agenda to get to the root causes of mental illness and addiction; uncover biological and environmental resiliency factors; develop new ways of preventing and treating mental illness and addiction; train Ohio’s behavioral health workforce in best practices; and improve and track outcomes for Ohioans.

This work will be done through both competitive awards for research linked to the strategic agenda *and* for a landmark research study that will enroll 5,000 families from across Ohio’s 88 counties in a voluntary, longitudinal, multi-generational research study over decades, and through a center modeled after comprehensive cancer centers that will integrate research, clinical practice, and education, so that research does not just sit in a journal but gives scientists and clinical practitioners an opportunity to work side by side with direct care providers and people with lived and shared experience of mental illness and addiction.

All of this is focused on helping families, communities, and health care professionals across Ohio better understand what their risk factors are and how to prevent the onset of behavioral health illnesses. This proposal is the most significant and comprehensive effort undertaken by any state in the nation, and it allows us to set an Ohio-focused agenda rather than wait years on national research that may not consider factors unique to our state. Just as the landmark Framingham Heart Study did for our understanding of heart disease and modern-day prevention and treatment practices, research and discoveries made possible through Ohio’s SOAR Network will be quickly translated into solutions for Ohioans – preventing the onset of disorders and saving lives.

### **Addiction Supports**

Ohio is still in the midst of an addiction crisis, and we continue to work with community partners to aggressively prevent, treat, and help people recover from addiction. Because much of the work that our Department does for addiction is accomplished through federal funding, I am not spending much time on it here today, but I’m happy to discuss with you more comprehensively at a future date. Our state budget does invest in areas unaddressed by federal funds, such as a new mobile Medication Assisted Treatment pilot to reach underserved areas, recovery housing quality efforts, and ongoing treatment and peer support in Ohio’s prisons.

## **Conclusion**

I am proud of our agency's effort to deliver a strategic, accountable, and results-focused budget that meets the needs of all Ohioans and of our work to collaborate across state government for the benefit of those we serve. We are learning from our successes, identifying gaps and barriers, and pressing forward urgently on the work needed to help every Ohioan live up to their full potential and contribute to the vitality of our great state.

I respectfully ask for approval for our submitted budget for State Fiscal Years 2024 and 2025, and I am happy to answer any questions you have.