

**THE OFFICE OF
GUERNSEY COUNTY SHERIFF
Jeffrey D. Paden**

PHONE
740-439-4455

FAX
740-432-3916



GUERNSEY COUNTY LAW ENFORCEMENT CENTER
601 SOUTHGATE PARKWAY
CAMBRIDGE, OHIO 43725

To: Committee for S.B. 105
From: Sheriff Jeffrey D. Paden
SUBJ: SENATE BILL 105

I am writing this testimony as a proponent of Senate Bill 105. As many of you hear more often than not that this State is in the grips of an addiction epidemic. I would testify that we are also in the grips of a mental health epidemic. Often times drug addiction goes hand in hand with people that are also suffering from a mental health illness, whether that mental health illness is documented or not.

As the Sheriff of Guernsey County I have found that the State of Ohio operates 88 different ways based on 88 different local governments. Me and my team at the Guernsey County Sheriff's Office work very closely with mental health and addiction services in my county. I just want to take a few moments to highlight some critical portions of Senate Bill 105 that will greatly aid my county, but many counties across the state of Ohio.

1. Bottom Line on provider certification changes

ADAMH Boards and local partners such as law enforcement need to be aware of who is providing services to residents of the community. Clients, families and communities deserve to know that services provided within Ohio's public behavioral health system are held to a high measure and have an expectation of quality when accessing those services.

Having local ADAMH Boards in the loop, means that as the local government entities with responsibility to and an investment in the local community, citizens, and system of care, ADAMH Boards will have the ability to know who is providing services in their community, and, when appropriate, the ability to provide known information about a provider to the Ohio Department of Mental Health and Addiction Services.

2. Bottom line on access to data

The bill provides for the much-needed exchange of health information among public benefit systems. Planning for the entire local system of care, being able to effectively address immediate client crises, coordinating care across the variety of systems and providers, and

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ultimately stabilizing and planning for ongoing care for community members, necessitates ADAMH Boards having a complete picture of the services and supports provided to individuals in the local system.

3. Bottom line on contracting changes

This section of the Revised Code has been the subject of numerous lawsuits over the last thirty years, which have resulted in ADAMH Boards spending public dollars that should have gone to funding behavioral health services and supports to defend against the lawsuits. In the last two contracting cycles alone, multiple lawsuits have been filed over the interpretation of the 120-day notice language and the authority of an ADAMH Board to use a competitive process when contracting for services and supports.

The current 120-day notice requirement has impeded many Boards from taking actions that would best meet local system needs and best use public dollars. The changes proposed in the bill would allow Boards to make decisions about the services they purchase with those public dollars based on their local assessment of what services are needed and which providers are best suited to provide quality services. Boards would have greater ability to determine service mix and service providers to ensure that the needs of their communities are being met with quality care. Boards would also be given more latitude to change service mix and service providers when that is in the best interest of the local system of care.

In closing the bill provides for more local control. Ohio has a long history of being a home-rule state and under the current statute, many aspects of the public behavioral health system are being controlled at the state level, which is too far away from local communities to accurately understand their diverse and unique needs. The bill would provide ADAMH Boards with the ability to make decisions in the way that makes the most sense for the local system's needs while making the best use of the federal, state and local dollars they use to purchase services and supports.

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The bill's changes to Chapter 340 will modernize the statute and enable ADAMH Boards to ensure that quality services, that will better support the needs of clients and families impacted by mental illness and substance use disorders, are being provided in their communities.

Sincerely,


Sheriff Jeffrey D. Paden