

# WITNESS INFORMATION FORM

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Business before the committee

Legislation (Bill/Resolution Number): \_\_\_\_\_

Specific Issue: \_\_\_\_\_

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## **Written Testimony of Leah Buzek**

### **Before the Ohio House of Representatives Children and Human Services Committee Regarding the FY 2026-2027 State Budget**

#### **Chairwoman White, Vice Chair Salvo, Ranking Member Lett, and Members of the Committee:**

Thank you for the opportunity to submit testimony on the Ohio Fiscal Years 2026-2027 State Budget and its impact on behavioral health and public social services. My name is Leah Buzek, and I am a multi-systemic youth caregiver, family peer supporter, and advocate for social determinants of health, poverty eradication, and systemic reform. I appreciate the committee's dedication to strengthening Ohio's services for children and families, and I urge you to prioritize targeted investments that address critical gaps in our state's behavioral health and social service infrastructure.

### **The Urgent Need for Targeted Budget Investments**

Ohio's behavioral health system is underfunded and overstretched, leading to long waitlists, emergency room boarding, and crisis-driven care. Families seeking help face severe shortages in residential care beds, inpatient psychiatric care, and transitional services, particularly for children and adolescents. These bottlenecks increase law enforcement involvement, disrupt families, and ultimately cost the state more in emergency and carceral interventions than proactive care would.

While I recognize and appreciate Governor DeWine's proposed \$2.6 billion investment in behavioral health over the biennium, I urge the legislature to ensure these funds are allocated effectively to address the system's most pressing inefficiencies. Specifically, I recommend the budget include:

#### **1. Expansion of Residential Care Beds (15 Beds Per Residential Facility, Totaling 90 Statewide)**

- Ohio currently lacks adequate short-term residential care options for people in crisis. Many end up in hospitals or incarcerated due to a lack of placements in appropriate therapeutic settings.
- A targeted investment in 15 residential care beds per Residential Facility (RF), totaling 90 beds statewide, would immediately relieve pressure on emergency departments, reduce waitlists, and provide access to appropriate care settings.
- The budget should also include provisions for competitive wages and workforce incentives to ensure these facilities remain adequately staffed.

#### **2. Development of Step-Down and Transitional Care Programs**

- Many individuals—especially children—do not need hospitalization but have no safe step-down options when leaving inpatient crisis-stabilization treatment.
  - For families caring for youth with severe mental illness (SMI), parents/caregivers are often forced to make difficult decisions based on the safety of their other children or of themselves when bringing home a child from a crisis stabilization unit (CSU). This may look like relocating siblings to a trusted friend, family member, or neighbor's house all the way to relinquishing custody to Child Protective Services in order to safely continue caring for siblings of the child or for themselves.
- Allocate funding to expand transitional housing and community-based respite programs, reducing emergency admissions and readmissions.

### 3. Integration and Streamlining of Public Benefits Administration

- The redundant application process for WIC, SNAP, Medicaid, and TANF creates unnecessary barriers to essential services.
- A single, unified application with integrated interviews would reduce bureaucratic inefficiencies and ensure families receive timely support.
  - As the State continues to consider the role of Artificial Intelligence within the context of state services, I urge you to consider using this new tool to evaluate public benefits applications and streamline the process for getting families connected with the benefits they qualify for without the labor-intensive process of applying for multiple services separately.

### 4. Expansion of Family Peer Support and Lived-Experience Leadership

- Increase funding for family peer support programs to ensure all families have access to peer-led navigation and crisis intervention.
- Create advisory roles for individuals with lived experience to inform policy and program development.
  - While current elected officials and administrators may have incredible intentions when designing programs, without the direct involvement of people who have lived-experience (LE) moving through those processes, the impact of those programs have a significant potential to fall short of their goals. Many officials and administrators do not have experience working through the systems that they design or overhaul. By involving LE persons in the design process, we can create more effective programs.

### 5. Separation of Families in Need of Services (FINS) from Child Welfare Cases

- Allocate resources to develop a separate FINS response system, allowing families to access behavioral health and social services without unnecessary child welfare involvement.

- Current FINS cases are still documented as Child Protective Services Involvement, even though there is no concern for abuse or neglect.

## 6. Addressing the Benefits Cliff and Promoting Economic Stability

- Implement a tiered reduction model for benefits so families do not experience sudden financial hardship when they increase earnings.

## 7. Creation of a Statewide Crisis Referral and Bed Availability System

- Ohio lacks a centralized system for tracking residential and inpatient bed availability, leading to long delays in finding placements.
- Funding a statewide, real-time crisis referral system will help providers place individuals in care more efficiently, reducing emergency room boarding and law enforcement involvement.

## Conclusion

Ohio has an opportunity in the FY 2026-2027 budget to fund sustainable, effective solutions that improve behavioral health outcomes, reduce costs, and strengthen families. By prioritizing capacity expansion, service integration, workforce development, and crisis system improvements, the state can move beyond crisis-driven responses and toward a proactive, accessible, and high-impact system.

I urge the committee to take immediate action on these budget priorities and welcome any opportunity to discuss these recommendations further. Thank you for your time and commitment to these critical issues.

Respectfully,

Leah Buzek

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