House Bill 96 Interested Party Testimony

Chair Stewart, Vice Chair Dovilla, Ranking Member Sweeney, and members of the House Finance Committee.

Thank you for the opportunity to testify on House Bill 96. My name is Matt Kresic, and I serve as the CEO of Cadence Care Network, a provider of child welfare and behavioral health services in Ohio and a member of the Ohio Children's Alliance.

Cadence Care Network is a non-profit organization that has been in existence for over 35 years. We provide a wide array of community based behavioral health and foster care services to vulnerable children, young adults, and families. Headquartered in Trumbull County, we have office locations in Ashtabula, Mahoning, Stark, and Lucas Counties as well, but serve many rural, contiguous counties via home-based behavioral health and foster care services.

Cadence Care Network is also an OhioRISE Care Management Entity (CME). This program allows us to help families whose children have serious behavioral health needs. These children are often involved in multiple systems. This multiple system involvement leaves families feeling confused and powerless. OhioRISE Care Management allows us to give these families a voice and empowers them to best meet the needs of their children without the need for out-of-home placement.

I intend to discuss 3 key pieces of HB 96 that broadly impact our system of care, children, and families. Those are child welfare, behavioral health funded by Medicaid, and Student Wellness and Success Funding.

First: Child Welfare

Ohio has a **county-run child welfare system**, meaning each of Ohio's **88 counties** sets **its own policies**, **rates**, **and provider requirements**. While counties **hold legal custody** of children in foster care, they rely on **private agencies like Cadence Care Network** to:

- Recruit, train, and license foster families
- Provide behavioral health treatment and crisis intervention
- · Operate residential programs for youth with high needs
- Deliver case management and family support services

In addition to this, some counties contract other services to their private agency counterparts. **Trumbull and Mahoning County** Children Services have historically contracted with Cadence Care Network to provide behavioral health services to any child placed within their own public system of foster homes. This **public-private partnership** stabilizes foster home placements for

children by addressing their behavioral health needs. Our work ensures families get the **best** possible care, but a shrinking workforce and rising costs threaten our ability to meet demand.

The state budget must sustain these investments to prevent placement shortages, longer wait times, and additional strain on families while ensuring sound policy changes that strengthen, rather than destabilize, Ohio's child welfare system.

HB 96 grants DCY authority to standardize foster care rates, but fails to address the real cost drivers:

- Regional cost variations and service differences
- County-imposed regulatory compliance costs.
- The need for specialized programs that provide placement and treatment services to serve specific populations. An example would be children on the autism spectrum.

Instead of a one-size-fits-all rate card, we propose a legislative-led workgroup to:

- Review IV-E cost reports and analyze cost drivers
- Ensure provider rates are fair and sustainable
- Develop data-driven solutions that stabilize the system
- Provide a report with recommendations to the state legislature

Second: Medicaid and Behavioral Health for children and families

During the last year, the over 300 staff members at Cadence Care Network proudly provided behavioral health, care management, prevention, or foster care services to over 4000 children who reside in our service areas. This may seem like a large number, however, we have only scratched the surface of the need. Referrals for behavioral health services have more than doubled over the last few years and the behavioral health crisis our children are facing will reverberate for generations if not appropriately addressed while they are still children. To do this, the behavioral health field needs a continued investment in educating people interested in entering the field and additional support via rate increases to allow organizations to pay staff what they truly deserve.

Medicaid reimbursement allows us to meet the behavioral health needs of over 90% of the children we serve. With the behavioral health workforce crisis getting deeper due to higher client need and fewer people answering the call to serve in these roles, many providers are facing staffing shortages. We are extremely grateful to the Governor and Legislators for increasing the Medicaid Rates within the last budget. Maintaining those Medicaid rates is crucial to helping us continue to build capacity and provide essential behavioral health services. I would also suggest that the state consider an additional 5% investment to our current reimbursement rates to ensure community mental health centers can recruit and retain staff to meet the needs in our communities.

Lastly: Student Wellness and Success Funds (SWSF)

Schools are struggling to meet the behavioral health needs of children in their districts. As behavioral health professionals, we know that when a child is struggling with anxiety, depression, or attention deficit hyperactivity disorder, they more than likely will not be able to focus, learn, and become future contributors to making Ohio the great state that it is. School is a primary access point for children's mental health services. Without Student Wellness and Success Funding, school-based behavioral health services, crisis interventions, and traumainformed services are at risk. **17 school districts** in Northeast Ohio, currently utilize SWSF funding to contract with Cadence Care Network. Within these 17 school districts, we have the opportunity to intervene with close to **25,000 young Ohioans** if the need should arise. Our embedded Social Workers and Therapists provide essential services that not only help children with behavioral health needs stay in the classroom, but also help teachers manage crises that occur in their classrooms and impact not only the student in crisis, but also other students within the classroom.

The main driver behind the establishment of School Wellness and Success Funds was to reduce suspensions and expulsion rates across Ohio. Ensuring that students have long-term success. We urge the legislature to **protect Student Wellness and Success Funding** from being impacted by **school funding formula changes.**

Chair Stewart, Vice Chair Dovilla, Ranking Member Sweeney, and members of the House Finance Committee, thank you again for the opportunity to testify on House Bill 96. I am happy to take any questions you may have.