

17 S High Street, Suite 799, Columbus, OH 43215 614-228-0747 | www.TheOhioCouncil.org

## Teresa Lampl, LISW-S Senate Medicaid Committee Testimony on HB 96 (SFY 2026-27 Operating Budget) May 6, 2025

Chair Romanchuk, Vice Chair Huffman, Ranking Member Liston and members of the Senate Medicaid Committee thank you for the opportunity to offer testimony on House Bill 96, the state operating budget for state fiscal years 2026-2027.

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 170 private businesses that provide community-based prevention, substance use, mental health, recovery, and family services throughout Ohio. Our member organizations employ nearly 40,000 people and provide services to approximately 2.5 million Ohioans from all walks of life. Our members are nationally accredited and state certified organizations that strive to offer high-quality services in every community.

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 in many communities are too often the norm rather than exception. Current data finds that 1 in 4 Americans reported mental health or substance use need, and 53% of high school girls and 27% 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. Caregiving for a person with a serious mental health disability requires on average, 32 hours per week – essentially a full-time job.

Further, the economic toll of untreated mental health and substance use is staggering, with wideranging effects on labor market outcomes, productivity, and overall economic growth. Untreated mental health issues lead to higher rates of absenteeism, decreased productivity, reduced participation in the workforce, and unemployment. Each year, the U.S. forfeits nearly \$300 billion from its GDP from costs associated with untreated mental health and substance use disorders. This translates to an annual cost for employers in the U.S. per employee of over \$2,800 more in healthcare expenses, an additional \$4,700 in missed workdays, and approximately \$5,700 per year due to employee turnover. As Ohio seeks to attract new businesses and build a thriving economy, investment in community behavioral healthcare is essential to have a healthy, productive workforce

Recognizing these challenges, the Ohio Council applauds Governor DeWine for his leadership and bold vision for Ohio's Medicaid program, which provides significant resources to support community mental health and substance use disorder treatment in Ohio. 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 sustain a high-quality, accessible and effective behavioral health system. Similarly, I want to acknowledge and thank the members of this committee and the entire Ohio General Assembly for your efforts in recent years to strengthen and expand access to behavioral health services for Ohioans in need. These investments have been critical to support the behavioral health workforce and set the stage for the development of a full continuum of integrated care for all Ohioans.

HB 96 includes important policy initiatives and key funding investments to sustain Medicaid rate increases; support the 988 program and expanded mobile crisis services; pursue data sharing and technological innovation; and enhance prevention and school-based services. No doubt, these investments are critical drivers for the economic vitality of Ohio and contribute to having a world-class workforce necessary to attract new businesses and jobs.

Investing in mental health and substance use care is sound public policy and wise economic strategy. Every \$1 spent on improved access to behavioral health treatment leads to a \$4 return on investment in improved health and productivity. Upstream investments in prevention and early intervention yield even greater returns, as every \$602 invested in these efforts to support youth results in an average \$7,754 cost savings, per person by the time they reach age 23. Expanded access to care grows workforce participation by up to 42%, which would in turn, increase U.S. economic outputs by \$53 billion each year – creating a positive feedback loop that both fuels economic growth and reduces public spending on governmental assistance programs

With respect to key provisions of HB 96 I would like to highlight certain areas that address Ohio Council priorities and offer a few recommendations.

## **Department of Medicaid Behavioral Health Rate Increases**

The Ohio Council enthusiastically supports the Department of Medicaid's budget proposal and appreciates the resources included in HB 96 that sustain the home and community-based services (HCBS) rate increases from the last budget bill. The behavioral health system of care still faces significant workforce challenges, and we are grateful for this recognition and investment in Ohio's behavioral health services. These important provider rate increases are steps in the right direction during this challenging and volatile labor market – yet, unfortunately, more must be done to stabilize our behavioral health workforce and begin to recruit and retain talent necessary to meet the demand for services.

As you may know, the behavioral health workforce encompasses a wide range of disciplines and educational levels, providing prevention, treatment, and recovery services for mental health and substance use disorders. The 2024 Ohio Council Compensation and Benefits Survey revealed that in 2024, organizations increased salaries across front-line provider types by 6.5%-9.8%; made market rate salary adjustments and sustained robust fringe benefits despite inflationary cost pressures. While this enabled salary increases, the labor market value accelerated at a faster pace for most positions, and particularly for licensed practitioners. Meaning, salaries in community behavioral health care positions, with a couple exceptions, remain 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, on average 23.4% higher wages compared to the 2024 median salaries of a cross section of community behavioral health positions posted on Indeed.com.



Turnover rates increased to 41% in 2024 across the community behavioral health industry. This is a 4% increase from 2022 and a 10% increase from 2020. Organizations in suburban areas and in Southwest Ohio had higher turnover rates at 46%, respectively. In short, the previous investment was critical, but more investment is needed to sustain, attract, and retain the community behavioral health workforce in today's accelerating labor market while building the workforce needed for the future.

Accordingly, we respectfully ask for your support to maintain, and if possible, modestly increase funding for Medicaid community behavioral health services, which will strengthen the behavioral health workforce and incentivize careers in community behavioral healthcare. It cannot be forgotten that Medicaid has become the primary pathway for Ohioans to access mental health and substance use treatment. Until Ohio and the nation fully enforce robust insurance parity laws that expand treatment capacity, recognize the range of available behavioral health providers, and offer reimbursement rates comparable to other specialties, Medicaid will remain the default option for care.

## Medicaid Expansion Group "Trigger Language"

The Ohio Council is part of the Ohio Medicaid Matters Coalition, a coalition of some of the state's largest human services agencies, health advocacy associations and hospital systems working to combat the threat posed to Ohio's economy, workforce and families by possible cuts to Ohio Medicaid. Our concern relates to the immediate trigger language included in the HB 96 which states that "if the federal medical assistance percentage for medical assistance provided to members of the expansion eligibility group (Group VIII) is set below ninety per cent, the department of Medicaid **shall** immediately discontinue all medical assistance for members of the group." We appreciate the Ohio House recognized the need for a transition plan and understanding of the related complexities of disenrolling 770,000 individuals from their health care coverage, including access to life-saving medications. We strongly encourage the Ohio Seante to replace "shall" with "may" and further develop policy solutions that support individuals in maintaining access to healthcare in the event of federal funding changes.

## **OhioRISE (Resilience through Integrated Systems and Excellence)**

The Ohio Council supports the ongoing efforts of OhioRISE, a specialized Medicaid managed care program for youth with complex behavioral health and multisystem needs. Today, OhioRISE assists in addressing the needs of over 42,000 youth across all 88 counties who could be better served in their homes and local communities rather than in out-of-home care. While I understand there is more work to do to fully implement the program and build treatment service capacity, outcomes are improving for these kids and families. I encourage this committee to support the OhioRISE program – it is sound policy and a wise investment.

# Medicaid/OhioMHAS/ADAMHS Boards Data Sharing – (Comp Doc MHACD34)

The Ohio Council does not support language added in HB 96 that requires ODM, OhioMHAS and ADAMHS Boards to develop a data sharing agreement that includes claims-level client data and other data sets. Statutorily, the ADAMHS Boards role is community planning to ensure a full continuum of mental health and substance use services are available. Access to individual, client level data for individuals that do not receive ADAMHS Board funded care is unnecessary and likely



violates federal privacy and confidentiality laws. Rather, this ADAMHS Board function requires population level and community level data, of which OhioMHAS has compiled a data finder tool that includes 53 available data sets with information to support community planning. We support the data sharing language included in SB 138 and recommend removing this section from HB 96.

#### **Qualified Mental Health Credential**

Notably, I also want to share that we, along with a host of other stakeholders, are pursuing an amendment that would establish an entry-level qualified mental health credential, based on the existing SUD entry-level credentials. This credential is complementary to existing behavioral health professional pathways and fills a gap by creating both non-degree and degree entry level career opportunities.

#### Conclusion

Investing in mental health and substance use care is sound public policy and wise economic strategy. Every \$1 spent on improved access to behavioral health treatment leads to a \$4 return on investment. Upstream investments in prevention and early intervention yield even greater returns, as every \$602 invested in these efforts to support youth results in an average \$7,754 cost savings, per person by the time they reach age 23. Expanded access to care grows workforce participation by up to 42%, which would in turn, increase U.S. productivity and economic outputs by \$53 billion each year – creating a positive feedback loop that both fuels economic growth and reduces public spending on governmental assistance programs.

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 behavioral health providers, and most importantly help Ohioans seeking mental health and substance use disorder services. These investments help ensure Ohio has a healthy, productive workforce that can continue to attract businesses and great jobs that grow our economy so every child can reach their full potential, and families can flourish as they strive to reach their dreams.

Thank you for your time and consideration today.