

## Ohio Senate Medicaid Committee May 15, 2025

## Ohio Children's Alliance Testimony on HB 96

Chair Romanchuk, Vice Chair Huffman, Ranking Member Liston, and members of the Senate Medicaid Committee, thank you for the opportunity to testify on HB 96.

My name is Mark Mecum, CEO of the Ohio Children's Alliance. Since 2011, I have led this statewide nonprofit advocacy organization. Our focus is on improving Ohio's system of care for children and families, with a particular emphasis on child welfare and behavioral health. We pursue our work through partnerships with our network of 90 community-based organizations, advocacy coalitions, funders, and state agencies. I am here today to call for support of state budget funding to ODM for OhioRISE, Ohio's specialized Medicaid program for youth with complex behavioral health needs.

OhioRISE was developed after years – decades in fact – of progress made in advancing and modernizing Ohio's children's mental health system of care. This progress dates back to the Voinovich Administration. Over this time, the state, counties, and community agencies have experimented with various approaches, learned from other states, and built an innovative but fragmented system of care. That's where OhioRISE came in.

OhioRISE established a statewide infrastructure, standards, and a singular MCO to administer it. OhioRISE has also cultivated a network of hundreds of health care provider organizations that are all rowing in the same direction to improve outcomes for multisystem youth. The program is still in its infancy but is already demonstrating excellent results and is becoming a model for other states, including Wisconsin and North Carolina.

Today OhioRISE serves 46,000 youth enrolled in Medicaid who have intensive mental health needs. OhioRISE care teams surround families with guidance and support to build a plan and see it through. Given that many of these families are dealing with not only mental illness treatment but pharmacological management, juvenile court involvement, special education, foster care, or developmental disability services, this type of quarterback-style care coordination is essential.

To be clear, OhioRISE provides boots-on-the-ground, in-person, care coordination. Care managers meet families where they are in the community, at home, at school, or wherever is convenient. Given OhioRISE youth are normally very expensive Medicaid members to cover, this type of care coordination yields significant cost savings spanning Medicaid and all of the other systems.



Some OhioRISE results over its first year of operation include:

- 41% fewer emergency department visits.
- 28% fewer psychiatric hospitalizations.
- 60% shorter stays in residential psychiatric treatment (care that costs around \$100,000 per admission).

In addition to care coordination, OhioRISE has also cultivated much more treatment services that families have been seeking for years, including intensive home-based treatment and respite care.

Although OhioRISE has achieved enormous success in a short period of time, much more progress has to be made. There are new top-down collaborations involving OhioRISE, children's hospitals, and community behavioral health organizations that are leveraging new technology to improve health outcomes. There are numerous bottom-up collaborations led by OhioRISE Care Management Entities providers that are leveraging local resources that maximize a community's potential. There are expansions of value-based initiatives underway. And there is a growing network of treatment services that is becoming increasingly accessible to families.

The state and stakeholders laid the foundation for OhioRISE in the last biennium—now it's time to build on that momentum and elevate the program to new heights.

Chair Romanchuk, Vice Chair Huffman, Ranking Member Liston, and members of the Senate Medicaid Committee, thank you for the opportunity to testify today. I welcome any questions you may have.

Mark Mecum CEO Ohio Children's Alliance