



ADAMHS BOARD

*Alcohol, Drug Addiction, Mental Health Services Board
of Adams, Lawrence, Scioto Counties*
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*Susan Shultz, Executive Director Adams, Lawrence, Scioto ADAMHS Board
Testimony for Senator Johnson's Addiction and Community Revitalization
Committee*

Senator Johnson and members of the Committee thank you for this opportunity to submit testimony on the need for ADAMHS Boards to have access to data and be in the loop on mental health and addiction program and housing supports certification. My name is Sue Shultz and I am the Executive Director of the ADAMHS Board of Adams, Lawrence, and Scioto Counties.

I want to start by expressing my gratitude to Senator Johnson for his interest in the issues of data and certification, and for his ongoing support for mental health and addiction services across the Adams, Lawrence, and Scioto Counties Board area.

One of Ohio's greatest strengths is the philosophy that we are a home rule state. Local citizens know best what their local communities need. In regard to mental health and substance use disorder services and recovery supports, local Alcohol, Drug Addiction, and Mental Health Boards are statutorily empowered to plan, develop, fund, administer and evaluate the local system of mental health and addiction services and supports. In order to do this in the best way possible, the more information and data we have on services and on programs in our communities, and those that are needed and provided, the better we will be able to serve all of the citizens of Adams, Lawrence and Scioto Counties.

Local ADAMHS Boards do not provide direct services, we plan for, develop, fund, administer, and contract for these services. In order to adequately assess, plan, and contract for the local needs of the local citizens, we need to be able to have

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access to real-time data on behavioral health services, including Medicaid. We need to know what services are occurring, where we are seeing increased demand, where there are gaps, and what the evolving needs are in local communities.

Over the past couple of years with the pandemic, we saw where not having timely, accurate, and reliable data, made responding to a quickly changing environment more difficult.

Local government officials have contacted us regarding the influx of clients coming into our area seeking treatment and not leaving our county after they leave the programs against staff advice and end up on the streets homeless and getting into trouble with law enforcement or overdosing and putting our Fire and EMS under more stress than they already have. If we had access to more Medicaid Data we would be able to figure out where the client came from and hopefully once they leave the program, can help them get back to their home counties from which they came.

We believe it is time, actually past time, to require Ohio Mental Health and Addiction Services (OhioMHAS) and Ohio Department of Medicaid to establish requirements and procedures for the provision of Medicaid-recipient data sharing with local ADAMHS Boards for the purpose of coordinating public benefits, the administration and management of the programs and ensuring the essential elements of the board's continuum of care is available to recipients of Behavioral Health services, as appropriate. We have not been able to see any of our clients Medicaid information since it was elevated to the State level since 2012.

Lastly, as the entities on the ground in the local community, we believe that Boards have a good understanding of local needs and are in the best position to have information about the service providers operating in their local communities that may be of help with OhioMHAS' certification and investigation processes. All too often new providers come into the county without the board's knowledge, and their presence only becomes known to the board when there is a concern.

Boards are closely connected to the local community and often are the first to receive a phone call from a local leader or community partner when there are concerns or questions about a service provider. ADAMHS Boards, as part of the community, are best positioned to know when there are problems and when they need addressed. As a Board, we do not wish to be a certifying organization; however, to ensure that ADAMHS Boards are in the best position to perform their duties of planning, evaluating, and overseeing the local system of care, we must

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be included in the process of certification, re-certification, and investigations of local providers.

We have had a proliferation of Substance Use Disorder Providers opening up in our local community without notification to the ADAMHS Board from OhioMHAS over the past few years. This could have been because of COVID and low staffing issues; however, if we were included in the process of certification of the providers, we would have been able to see if the need for this many providers is what our area actually needs. Also we have had a few providers who we have dealt with in the past, that if we had known they decided to open back up under a different name, we could have alerted OhioMHAS about them, and gave our opinion of whether or not they should certify the provider or not.

We believe it is time to have a statutory requirement for Boards to provide input and recommendations to OhioMHAS regarding initial or renewal applications for certification and when the provider is being investigated OhioMHAS would have information from the local Boards that would be beneficial to make those determinations.

Senator Johnson, and members of the Committee, thank you for the opportunity to provide testimony today. Should you have any questions, I would be happy to answer them.