

Ohio House Behavioral Health and Recovery Supports Committee  
HB 523 - Proponent Testimony  
Dr. Kent Youngman  
May 19, 2022

Good morning and thank you for the opportunity to speak in favor of H.B. 523, proposed changes to chapter 340. I am Dr. Kent Youngman and I have the pleasure of being the CEO of Rocking Horse Community Health Center, a Federally Qualified Community Health Center (FQHC) located in Clark and Madison Counties. In addition to primary care for adults and children, Women's Health, Chiropractic care and Dental services, Rocking Horse also provides counseling, substance use disorder treatment, including medication assisted treatment and psychiatric care. We are a certified community mental health agency as well as a federally qualified community health center serving 14,000 patients and providing over 75,000 visits annually. Prior to joining Rocking Horse Center in 2016, I was with the Mental Health and Recovery Board of Clark, Greene, and Madison Counties beginning in 2000 and serving as the CEO from 2010 to 2016. This experience has helped me develop perspective from both the Board and provider vantage points. As such, I would like to comment on a few items in H.B. 523.

Community Health Centers have a requirement that at least 51% of their Board members are patients, or family members, of the center. This provides unique and very helpful insights into the working of the center and assists the Board in making strategic decisions and gives direct feedback to the health center staff. HB 523 includes this provision and I believe it will strengthen Board planning and operations.

HB 523 also addresses Board contracting. Service delivery through contracting is best accomplished when it is flexible and tailored to meet local community needs. Allowing for latitude in contracting, creates the ability for local Boards and communities to determine what works best for them to meet local needs.

Finally, I would like to touch on the need for robust, reliable, and accessible data. I began work in the public sector 40 years ago and since that time I have worked in juvenile corrections, public education, higher education, community behavioral health and now community health. I have participated in numerous local, and state committees and planning efforts. The consistent theme in all of these activities is “we cannot plan or evaluate adequately with out access to robust and reliable data”. No organization, local or state, can adequately address pressing public health issues alone. The ability, expectation and requirement of appropriate data sharing across and between local and state agencies is critical as we search for more effective ways to solve complex societal challenges. It should not be a barrier or create unnecessary roadblocks. Local boards should have access to Medicaid-recipient data for the purposes of coordinating public benefits, the administration and management of the programs and ensuring essential elements of the board’s continuum of care.

Thank you for your kind attention and I would be happy to accept questions.