



## **Ohio House Finance Committee HB 33**

**Testimony of:  
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Lake County Alcohol, Drug Addiction and Mental Health Services Board  
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Chairman Edwards, Ranking Member Sweeney, and members of the House Finance Committee, my name is Kim Fraser, and I am the Executive Director of the Lake County Alcohol, Drug Addiction and Mental Health Services Board. Thank you for the opportunity to testify today.

The Lake County ADAMHS Board is the 15<sup>th</sup> largest of Ohio's 50 local ADAMHS Boards, serving a county of approximately 230,000 in northeast Ohio. Through our Board's community outreach, and contracts with 16 mental health and addiction treatment providers, we impact over 15,000 Lake Countians annually with vital clinical services, and an additional 45,000 residents with prevention, education and recovery supports. Our locally driven partnerships with our schools, criminal justice system, health department, chambers of commerce and local government ensure that every dollar we invest in our community is leveraged to the fullest extent. Collaboration, cooperation and braiding of investments means that Lake County has a strong and robust behavioral health system.

But despite our strengths, challenges continue to grow. In 2022 we experienced our highest number of overdose deaths in the past 5 years, with over 80% of those deaths involving fentanyl. Suicide deaths have risen continually since 2016, and while 2022 marked a decline we know if we decrease our aggressive suicide prevention efforts for even one moment we'll see the numbers rise again.

Today, our efforts in Lake County are focused more than ever on our crisis continuum of care, and through solid local investment we have some efficient, effective and responsive crisis services. Our Lake County Crisis Hotline answers an average of 18,000 calls annually, and our mobile crisis team responds to community-based crisis situations an average of 2,500 times every year. But in truth, for many Lake Countians experiencing significant behavioral health crises, the primary option is to go to one of Lake County's two emergency departments. Without question, a loud, chaotic hospital emergency department is not an ideal place for someone in psychiatric crisis. And with increased demand for emergency department care and a lack of adequate options, our clients are languishing longer than ever in the ED halls.

In Lake County an average of 325 individuals present to our emergency departments every month in need of immediate behavioral health services. Of those, over 25% wait for more than 12 hours to get connected to the right level of care; some can wait days. Continued and increased funding in the biennium budget will allow counties like Lake to expand our crisis continuum, stand up a crisis stabilization center to divert individuals from local emergency departments, and improve their ability to return to homes and families.

In the wake of the COVID pandemic and the opiate epidemic, Lake County has seen the demand for services for our young people increase dramatically. We're proud to provide prevention programs and clinical services and supports in every one of our 9 public school systems, but we know that classrooms continue to struggle. Demand for behavioral health supports in our schools is currently double what we have the capacity to provide. And as school crisis response requirements grow, the need for more comprehensive psychiatric assessments and consultation services further strain our capacity to serve. The proposed investment in Student Wellness and Success funding will give our schools the capacity to enhance the existing relationships with behavioral health, and ensure evidence-based interventions are available to all educators, administrators, students and families.

The needs of our adults with complex behavioral health issues are continuing to grow as well. We know that for individuals in need, it's not enough to provide strong clinical services; without a roof over someone's head, meaningful activity in one's life, and the ability to connect with others, an individual cannot thrive. Today in Lake County the housing crisis is very real. Fair market rent has increased 23% in the past 2 years, making finding affordable, available units nearly impossible. As a result, we have over 500 individuals on our waiting lists for behavioral health-supported housing units. Enhanced funding from the Continuum of Care Services line will allow us to drive down the waiting list and provide more affordable and supported housing. Today through our evidence-based Supported Employment Program we see 55% of our clients gain employment and maintain that employment for over 2 years, as compared to the national average 21% employment rate for unsupported individuals with mental illness. Additional funding will give us the capacity to expand this vital service. And we know that peer support programming can be life-changing for individuals in recovery; in Lake County this service is painfully lacking, and the increases proposed in the budget will allow us to make meaningful change in this area.

It's also important to note that seniors are the fastest growing population in Ohio, with our 60+ population growing 20 times faster than our overall population. In Lake County it is projected that nearly 34% of our population will be 60 and older by 2030. Home-based behavioral health services and supports are vital to keeping our seniors healthy and in the community; however many of those services are not reimbursable by Medicare, making the braiding of Continuum of Care dollars and local levy investments essential to provide the level of home-based care our seniors need and deserve.

And while additional investments will be impactful, our county, like so many others, struggles due to a significant workforce shortage. Our providers have experienced significantly larger vacancy rates in critical, direct service positions as compared to pre-pandemic numbers. Agencies report that from 2018 to today the cost to recruit and retain qualified staff has increased dramatically; in the last 5 years wages have increased for case managers and

counselors from 25% to as much as 45%. Clinical positions that once took 30-60 days to fill are now taking 6-12 months. And our local universities are reporting 10-20% decrease in enrollment in behavioral health fields. Without skilled clinicians and dedicated direct-care workers we have no hope of impacting the lives of those who depend on us. The proposed increase in the behavioral health Medicaid rate is a step toward helping us build a workforce sufficient to truly care for Lake Countians in need, though 10% will not fully address the major jump in wages.

On a final note, while the state investment in mental health and addiction recovery services and supports is vital, in Lake County over 60% of our ADAMHS Board funding comes from local levy dollars. Our Board's 6% administrative overhead means that 94 cents on every property tax levy dollar directly serves our neighbor, our family member, our coworker. It is truly lifeblood funding, without which our community would suffer.

Thank you for your continued focus on the behavioral health needs of all Ohioans, including those who live and thrive in Lake County.