

Testimony in Support of House Bill 97
Inter-University Council of Ohio

Chair Cutrona, Vice Chair Gross, Ranking Member Somani and members of the House Health Provider Services Committee. My name is Niki Clum, and I am the Vice President of Government Relations for the Inter-University Council of Ohio (IUC). Thank you for the opportunity to testify in support of House Bill 97 (HB97).

The IUC was established in 1939 as a voluntary educational association of Ohio's public universities. Today the association represents Ohio's 14 public universities. Together, these institutions offer a broad range of associate, baccalaureate, graduate, and professional programs. Ohio's public universities collectively contribute approximately \$68.9 billion to Ohio's economy and support one out of every eight jobs in Ohio.

IUC's purpose is to facilitate the development of common interest and to assist in sustaining and improving the quality of public higher education. IUC also engages in public relations, research, and government liaison work. The major goal of the IUC is to sustain a consortium that establishes a dynamic forum that fosters idea exploration and problem solving. IUC member institutions are committed to ensuring affordable opportunities for the more than 290,000 students attending Ohio's public universities without sacrificing the quality of their education or experience.

As this committee knows, mental health and addiction, and consequentially workforce readiness, are some of the top issues challenging Ohio at this time. The United States is in a mental health crisis with 25% of the U.S. population experiencing a mental health disorder each year. In 2021, 26.4% of adult Ohioans reported symptoms of Anxiety or Depressive Disorder.¹ Ohio's age-adjusted suicide rate in 2019 was higher than the national rate, and suicide is still the second leading cause of death among 12-17-year-olds in the U.S.² In 2020, over 5,000 Ohioans died of a drug overdose making Ohio fourth in the nation for overdose deaths.³

Further compounding the problem is that Ohio suffers from a critical shortage of mental health providers. You will hear from other witnesses regarding Ohio's growing need for psychiatrists. Other health care providers capable of augmenting the psychiatry workforce to assist with the diagnosis and advanced treatment of patients include advanced nurse practitioners (APRN) and physician assistants (PA). Unfortunately, the vast majority of APRNs and PAs choose to practice in more lucrative fields such as surgery and emergency medicine, leaving very few available to help address the mental health crisis. The Ohio Department of Health and Human Services estimates that by 2030, Ohio will have gained an additional 160 psychiatric APRN's and 10 psychiatric PA's. These additions will be helpful but fall far short of the numbers of prescribing providers required to address the mental health need of Ohio.

Ohio's public universities are always pushing themselves to be innovative and help the state address workforce needs. This legislation is an example of that creativity. It addresses a colossal

¹ Mental Health in Ohio, Kaiser Family Foundation, Mental Health and Substance Use State Fact Sheets, <https://www.kff.org/statedata/mental-health-and-substance-use-state-fact-sheets/ohio/>; last accessed March 13th, 2023.

² Id.

³ Drug Overdose Mortality by State, National Center for Health Statistics, Center for Disease Control, https://www.cdc.gov/nchs/pressroom/sosmap/drug_poisoning_mortality/drug_poisoning.htm; last accessed March 13th 2023.

workforce deficiency in the behavioral healthcare space, it addresses Ohio's mental health and addiction issue, it is innovative, and it allows Ohio to be a leader in the country in addressing issues of mental health. The fact that this program would be the first of its kind in the country means all of our graduates from this program will stay in Ohio.

As this committee knows, HB97 establishes a new licensed mental health professional, the certified mental health assistant (CMHA). These individuals will be licensed by the State Medical Board and will be supervised by a physician. CMHAs cannot diagnosis patients but may order diagnostic, therapeutic, and other medical services based on that patient's diagnosis.⁴ CMHAs will have limited ability to prescribe medications and must comply with the same regulations and laws as other prescribers.

As it stands now, Northeast Ohio Medical University, or NEOMED, is the pilot school, but other universities are interested in starting this program as well. It is very similar to a physician assistant program, four years of undergraduate classes and two years of master's level programing. CMHAs will have the same first year master's level education as a PA. During the second master's level year, the student will have clinical experience in the addiction and mental health space. This clinical experience will ensure the quality of care the CMHA provides is consistent with that of other licensed mental health professionals.

NEOMED projects they will have forty students per class. Under the bill, psychiatrists are permitted to supervise up to five CMHAs at one time. As this program is expanded to other universities and across the state, HB97 will help Ohio become a national leader for mental health and addiction services.

Chair Cutrona, and members of the committee thank you for allowing me to testify today in support of HB97 on behalf of IUC. I am happy to address any questions you may have.

⁴ Buprenorphine for patients actively engaged in opioid use disorder treatment, Benzodiazepines for patients diagnosed with chronic anxiety disorders or acute anxiety or agitation, and FDA-approved stimulants for the treatment of attention deficit hyperactivity disorder for diagnosed individuals.