



Ohio Children's Alliance

Leading change for child and family service providers

March 14, 2023

Ohio Children's Alliance Proponent Testimony on HB 33

Chairwoman Carruthers, Ranking Member Liston, and members of the House Finance Subcommittee on Health and Human Services, thank you for the opportunity to offer testimony on House Bill 33, Governor DeWine's executive budget proposal for state fiscal years 2024-2025

My name is Mark Mecum and I am the CEO of the Ohio Children's Alliance. For 50 years, the Alliance has contributed to improvements to Ohio's system of care for children and families, with a particular focus on child welfare and behavioral health. We pursue our advocacy and best practice work through partnerships with community-based organizations.

Today, we are supported in our work through numerous collaborations and partnerships; first and foremost, through membership of over 85 community-based provider organizations serving children and families through Ohio's child welfare and behavioral health systems. In addition, the Alliance is proud to administer numerous statewide programs through contracts with state government, health insurance companies, and philanthropic foundations. All of our work aims to improve Ohio's system of care for children and families.

With me today are three community leaders who represent direct service provider organizations from across Ohio: Cadence Care Network, Lighthouse Youth & Family Services, and Wingspan Care Group. Their respective leaders will share their experiences as direct care providers and their perspectives on the proposed budget bill.

Collectively, our testimony will focus on the challenges and solutions related to the growing crisis erupting in Ohio affecting children's mental health.

As Ohio grapples with the continued effects of the COVID-19 pandemic and the opioid epidemic, it is clear that the need for prevention and treatment services is increasing. However, our capacity is not increasing to meet it. **In 2021, more than half of our state's children who experienced major depression did not receive mental health services and only 33% received consistent treatment.** Further, recent data reveals that the **number of children in Ohio diagnosed with anxiety or depression jumped 42%**, representing the 10th highest state increase nationwide. While the demand for services is

very high, our provider community's capacity has been unable to keep pace. Due to the sharp increase in caseload and the dwindling staff to meet the need, **almost half of the community-based agencies** we surveyed in 2022 had to **stop taking referrals** altogether, and **over 2/3 instituted a three-month waiting period**. The mismatch between the need for services and available options is causing serious consequences for families, our economy, and the overall health of our communities.

In fact, a survey from Nationwide Children's Hospital that same year found that **53% of working parents have missed work at least one day a month** to care for their child's mental health, and that their **work performance was impacted by their child's needs**.

With families struggling under the weight of the mental health crisis, the child welfare system is being increasingly utilized as an avenue for child and family treatment. The Public Children Services Association of Ohio recently reported that **nearly 1 in 4 kids** who came into custody last year did so primarily due to **significant mental health or developmental, or as a diversion from juvenile corrections**. And similar to the workforce shortage in the behavioral health sector, there is a placement shortage in the child welfare sector, including a shortage of licensed foster homes and staffed group care placement settings. In Ohio, there are roughly **15,000 kids in child protective service custody on a given day**. In contrast, there are just **over 7,600 licensed foster homes**, a decrease of roughly 500 homes from 2021.

Further, the workforce crisis facing behavioral health is also facing child welfare; in fact, many organizations, including the three represented with me today, provide direct services that cross both sectors. As we highlight in our recent Workforce Report, **70% of our community-based child welfare and behavioral health agencies are experiencing significant difficulty recruiting and retaining staff**. When foster care agencies are understaffed, there are delays in connecting kids to placements and in training, certifying, and supporting foster parents. As you can imagine, this causes a ripple effect on the entire system.

We agree with Governor DeWine that no Ohioan will ever fully live up to their potential if their mental illness goes untreated. There are many children in our state who wake up with significant mental illness, but are not connected to a counselor or any formal mental health support. There simply aren't enough professionals in the field to meet their needs. Continued investment and infrastructure are needed to ensure healthy children and a healthy future for Ohio.

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We fully support the SFY 24-25 Budget as introduced, which includes key initiatives and investments to support prevention services, school-based treatment, multisystem youth intervention, and the child and family services workforce. These proposals will increase evidence-based treatment capacity and accessibility for children and their families. The state will benefit from the investments in this budget, now, and in the future.

HB 33 delivers on Governor DeWine's promise to build safer communities, healthier families, and a thriving economy in Ohio. I would now like to talk more specifically about our priorities areas and offer recommendations.

Medicaid Policies Supporting BH Services and Providers

We support the Department of Medicaid's budget proposal and remain grateful for their continued commitment to pediatric mental health and to rebuilding the community behavioral health workforce. We ask that the legislature protect the following investments and initiatives:

- A 10% rate increase over the biennium for community behavioral health services,
- \$30 million for Mental Health peer support services,
- Full implementation of OhioRISE, Ohio Medicaid's program that provides comprehensive care for children with complex needs or multi-system youth.

In addition to protecting these investments, we respectfully request:

1. Increased funding for Medicaid community behavioral health services by an additional 10% (totaling a 20% increase, or \$440 investment over the biennium) to stabilize and strengthen the community-based behavioral health workforce and incentivize more Ohioans to pursue careers in the community behavioral health. Supporting this investment is the most effective and timely tool to combat the behavioral health workforce crisis and to improve access to mental health services. Increasing Medicaid rates to keep pace with inflation and other economic factors would be on top of all of the other great work that the State, counties, and community-based agencies are doing to promote Ohioans to enter the behavioral health field.

Student Wellness and Success

HB 33 takes bold steps to increase funding, transparency and accountability measures associated with the Student Wellness and Success fund.

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This funding is a necessary component of children’s mental health service delivery in Ohio, and, as the data shows, is also necessary to the success of our schools. Just last year, seventy percent of public schools across the nation reported an increase in the percentage of their students seeking mental health services at school since 2019.

When one child struggles, a cohort of children, teachers, and staff struggle, causing chronic stress and learning disruption. Teachers are crying out for help; only half of public schools report that they can effectively provide mental health services to their students in need. The Student Wellness and Success fund is a more important tool than ever in providing kids, teachers, and schools with the means to meet the mental health needs of their classrooms.

The SFY 24-25 budget process provides a critical opportunity to infuse targeted behavioral health funding into schools for students as well as training for teachers and school leaders. We strongly support protecting this funding.

We also support the safeguards included in HB 33 as introduced, which will ensure the funding is utilized for its intended purposes, including community mental health agency input, and give legislators greater insights as to how the money is being used. Specifically, we support the language instituting:

1. Enhanced community partner requirements;
2. Guardrails on the funding to make physical and behavioral health are prioritized;
3. A mandated evaluation of the impact of student wellness and success funds on student measures including school climate, attendance, discipline, and academic achievement; and
4. Authority for ODE to issue corrective action plans and withhold payment to schools not utilizing the money as required.

We have every confidence that this funding, with the safeguards in place, will be well-utilized and well-received by families, schools, communities, and behavioral health agencies. And, ultimately, it will make a significant impact on the students who need it the most.

Family & Children Services Investments

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The Ohio Children's Alliance remains grateful for the Department of Job and Family Services' commitment to expanding services for children and supporting the child welfare workforce. In particular, we applaud the additional \$60 million proposed over the biennium for public children services by expanding the State Child Protection Allocation. This funding is crucial to combatting workforce shortages in the child welfare system.

We also support ODJFS investments in advancing best practices, support of prevention programming for families, and community infrastructure for multi-system youth and are working to ensure that private sector community agencies can also access the supports provided in the budget bill.

We thank the Legislature for establishing the state's new Adoption Grant Program through HB 45 in the 134th General Assembly, and hope that the continued investment in this vital program proposed in HB 33 is maintained.

Pediatric Mental Health Services

We strongly support the OhioMHAS proposed budget and applaud the Department's unwavering commitment to kids' mental health services in HB 33. A critical component of their budget proposal includes investing ARPA dollars in pediatric behavioral health services. This funding will support pediatric behavioral health workforce development, support infrastructure improvements to improve access to pediatric behavioral health services, including OhioRISE psychiatric residential treatment facilities, and to improve integration of behavioral health and primary care services. We also support OhioMHAS' continued and expanded investments in Ohio's Centers of Excellence, early intervention services, crisis stabilization centers and the 988-crisis line, and suicide prevention efforts.

Department of Children and Youth

The Governor's budget takes new strides in caring for kids by creating a new cabinet-level agency, the Department of Children and Youth, to place a greater focus on improving our communities for children and families.

This new department will oversee programs dealing with early childhood education, foster care, children's behavioral health, and the health of mothers and children, consolidating programs currently housed across six agencies, including ODJFS, ODE, the

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Department of Health, DODD, the Department of Medicaid, and OhioMHAS. This proposal could break down barriers and silos, creating continuity and consistency in the provision of children services. This transition has the ability to make programs and funding more efficient and effective, and we are further assessing the proposal to ensure an optimal transition for youth and the providers that work with them.

As community-based child welfare and behavioral health agencies attest, they are experiencing referrals at an unprecedented while staff and treatment options are not keeping pace.

We believe that the Governor's child-focused agenda infuses much-needed support into the Health and Human Services sector for Ohio's complex-needs youth. We commend the Administration's sustained commitment to expanding supports for children in child welfare, innovating children services through the development of a new, focused cabinet agency, and prioritizing behavioral health services through investment in prevention, research, and a strong workforce.

We ask that you protect budget provisions in the Medicaid, OhioMHAS, ODJFS, and ODE budget provisions that invest in services for kids and families, including:

1. The Student Wellness and Success Fund
2. ARPA Pediatric Behavioral Health funding
3. Mental Health peer supports
4. The new Ohio Adoption Grant Program
5. Multi-System youth services
6. Child Protection dollars
7. Continued implementation of OhioRISE

We also ask that you protect policy changes made in the introduced version of the budget, including:

1. Enhanced Student Wellness and Success Accountability
2. The creation of the new Department of Children and Youth

Finally and most importantly, we ask that you consider building on the investment made to our workforce by increasing the proposed Medicaid behavioral health provider rates from 10% to 20%.

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Thank you all again for your time today. We are happy to answer any questions you may have.

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