



The Ohio Multi-System Youth Coalition

Ohio FY 2024-2025 Biennial Operating Budget Policy Priorities

Executive Summary

The Ohio Multi-System Youth Coalition prioritizes the following policies and investments in the FY2024-2025 budget:

Workforce Development

- Appropriate \$85 million for the CMS-approved behavioral health workforce and pipeline program using American Rescue Plan Act Home and Community-Based Services funds
- Invest in tuition reimbursement, paid internships, and incumbent worker training programs
- Enforce insurance coverage parity for behavioral health treatment
- Invest in coverage for crisis services, the recently launched 9-8-8 crisis help line, and reimbursements that begin to offset inflationary costs and workforce demands

Continuation of State Funding

- Continued investments in County Boards of Developmental Disabilities, the Ohio Department of Medicaid custody relinquishment fund, and funding for Children's Services, Family and Children First Councils, and the State-Level MSY Program

Increased Investment in Family and Children First

- The continuation of high-fidelity wraparound support funding beyond SFY2023
- Increased investments in Ohio Capacity Building Funds
- An increase in MSY Capacity Building Funds
- An increase in Family Centered Services and Supports funds

Multi-System Youth in Ohio

The Ohio Multi-System Youth Coalition consists of families, providers, researchers, advocates and stakeholders from across Ohio committed to better outcomes for multi-system youth (MSY) and their families. The Coalition has continually worked on issues related to youth and families since 2016, with the formation of the Joint Legislative Committee (JLC) on Multi-System Youth. The Coalition has consistently voiced concerns regarding data, availability of services, youth placed out-of-state, and custody relinquishment – families giving up custody not because of abuse or neglect, but rather as the only remaining option to attempt to access or fund needed services.

Multi-system youth are children and youth with complex needs that cannot be met by a single state or local system, and are involved with a combination of Public Children's Services Agencies (PCSAs), County Boards of Developmental Disabilities, County Job and Family Services (JFS), Family and Children First Councils, Alcohol, Drug Addiction and Mental Health Boards, juvenile justice systems, and more. These youth have two or more significant challenges, including physical or mental illness, drug or alcohol addiction, developmental delays, abuse and neglect, or severe trauma.

Ohio's multi-system youth have long been faced with uncoordinated services and lack of services across systems, with large gaps in access and funding for care. When the complex needs of multi-system youth exhaust the resources of the child's family and community, parents are faced with the choice to relinquish custody of their child to an agency in an

attempt to access the services the child needs. Even when a family relinquishes custody, a public children's services agency may not be able to access needed services due to lack of availability.

OhioRISE, a new program launched by the Ohio Department of Medicaid on July 1, 2022, is designed to foster multi-agency and cross-system outcomes, bringing together providers, families, health plans, and local groups for a coordinated care plan for eligible children and youth.

Within the first year of implementation, OhioRISE is expected to grow to serve 50,000 multi-system youth in Ohio. Although the launch of OhioRISE was a significant step towards serving Ohio's MSY and their families, it cannot be the end of Ohio's work and innovation in care coordination and services provided to Ohio's youth.

The Fiscal Year 2024-2025 Biennial Operating Budget offers a chance to strengthen and grow OhioRISE and to support MSY programs funded in previous budgets to work in concert with OhioRISE.

The Ohio Multi-System Youth Coalition FY2024-2025 Budget Priorities

Workforce Development

According to the Department of Mental Health and Addiction Services, from 2013-2019, the demand for behavioral health services in Ohio increased 353%, while the behavioral health workforce during the same time period increased by only 174%.¹ During the coronavirus pandemic, additional increases in self-reporting of depression symptoms and drug overdose deaths have contributed to unprecedented demand for behavioral health care in Ohio.²

As demand among Ohioans increases and workforce availability decreases, patients' symptoms may worsen as they wait for available care, and patients' needs may escalate from routine visits to crisis care.³

To begin to develop a pipeline of behavioral health workers, Governor Mike DeWine announced a new workforce development program in May 2022,⁴ which would utilize \$85 million of the \$212 million HCBS Workforce Development Strategic Fund, which is part of the American Rescue Plan Home and Community-Based Services spending plan.⁵

The program would: (1) provide scholarships for students pursuing degrees in health and human services fields, (2) fund internships required for degree completion, (3) would cover the costs of license and certification preparation and exams, (4) provide up to \$5,000 in recruitment and retention bonuses per student for the first two years of work at one of Ohio's Community Behavioral Health Centers, and (5) would provide incentive bonuses to professionals with existing credentials who return to the workforce.⁶

The Centers for Medicare and Medicaid Services approved the use of ARPA HCBS funding for this program in June 2022, but this funding has yet to be appropriated and released by the state, delaying the start of this program.

Additionally, expanded state investments in tuition reimbursement, the development of paid internship and field placement programs in behavioral health organizations, and incumbent worker training programs would begin to address the workforce crisis in the short-term.

The enforcement of insurance parity would also support Ohio's workforce, by not only ensuring that families can access care and insurance companies can cover all needed services, but also so insurance companies can recognize the entire workforce, not just independently licensed professionals.

Furthermore, Ohio must invest in Medicaid covered services, such as coverage for crisis services, the recently launched 9-8-8 crisis help line, and reimbursements that begin to offset inflationary costs and workforce demands.

The MSY Coalition asks for the swift investment in the aforementioned programs to address the workforce crisis facing the behavioral health sector, including home and community-based services.

¹ [Ohio Mental Health and Addiction Services: Understanding Supply and Demand Within Ohio's Behavioral Health System](#)

² [The Ohio Council of Behavioral Health & Family Services Providers: Breaking Point: Ohio's Behavioral Health Workforce Crisis](#)

³ [The Ohio Council of Behavioral Health & Family Services Providers: Breaking Point: Ohio's Behavioral Health Workforce Crisis](#)

⁴ [Release: Governor DeWine Announces Proposal for \\$85M Investment to Grow Ohio's Behavioral Healthcare Workforce](#)

⁵ [Ohio Medicaid ARPA Home and Community Based Services Spending Narrative and Projection](#)

⁶ [Ohio Medical Care Advisory Committee Meeting, August 18, 2022](#)

Continued State Funding

There are three budget line-items dedicated to supporting Ohio's Multi-System Youth:

- (1) **Ohio Department of Developmental Disabilities Line Item GRF 322422:** To provide County Boards of Developmental Disabilities with subsidies for respite services or other services that enable youth with complex needs to remain in their homes and communities.
- (2) **Ohio Department of Medicaid Line Item SDL0 651690:** \$16 million each year of the biennium to prevent custody relinquishment for children, youth and families, and to help recently relinquished children come back into family custody. Funds residential treatment and room and board, which federal Medicaid funds cannot support.
- (3) **Ohio Department of Job and Family Services Line Item GRF 600523:** \$25 million of the total line item is earmarked for multi-system youth services. \$20 million of these funds are distributed by formula to county Public Children Services Agencies to prevent custody relinquishment, support the care of children in the custody of a PCSA, and to provide services and supports necessary to ensure the child's successful transition from a congregate care facility following discharge. PCSAs must pass through at least 10% to the local Family and Children First Council to support services for multi-system youth. The remaining \$5 million supports the Ohio Department of Medicaid State Level MSY Program, the state and local Family and Children First Councils, and community-level grants to build and support local services.

Each of these three line-items support the infrastructure surrounding OhioRISE and fill gaps in the services provided by OhioRISE. OhioRISE was designed to work with and expand the existing system, not to replace existing services. The MSY Coalition asks that funding for these line-items be continued in Fiscal Years 2024 and 2025.

Increased Support for Family and Children First Councils

County Family and Children First Councils (FCFCs) are tasked with coordinating services for multi-system youth and their families and helping them navigate systems. Although OhioRISE is also providing Care Coordination for multi-system youth, there are many youth and families who do not meet the OhioRISE criteria who still need support.

Currently FCFCs receive the following funding from the State:

- (1) **Ohio Capacity Building Funds (OCBF):** \$15,750 to support the administration of FCFCs. Funded through the General Revenue Fund.
- (2) **MSY Capacity Building Funds:** \$3,600 to support the administration of MSY funds, including time spent on MSY applications, contracting with providers, ongoing communication with the Ohio Department of Medicaid, and more.
- (3) **ODJFS Line Item 600523:** FCFCs receive 10% of their county PCSA's MSY allocation through this line-item. These funds cannot be used for administration, but can be used to provide service coordination, high-fidelity wraparound and other supports/services to multi-system youth and their families.
- (4) **Family Centered Services and Supports (FCSS):** This funding amount is dependent upon various factors, including a county's child population. These funds are for direct supports to youth and families and can help fund Service Coordination, Wraparound, respite care, in-home parenting, camps, and peer support.
- (5) **High-Fidelity Wraparound:** In SFY 2023, Ohio Family and Children First announced that FCFCs will be able to access approximately \$12,000 (specific amount depends upon county size) to support the provision of high-fidelity wraparound (HFW). FCFCs must show documentation that staff has received HFW training or will be trained in HFW in SFY 2023.

Many FCFCs operate with only these funds and have FCFC staff do other work to piece together a full-time position. The FCFC Coordinator/Director may also be the Early Intervention Service Coordination (EISC) Contract Manager, do National Alliance on Mental Illness (NAMI) work in the county or do additional work for providers. Other counties are fortunate to have the support of their local systems, such as JFS, mental health, developmental disabilities, schools, Juvenile Court, County Commissioners, Public Health, and more, and receive local contributions to staff their FCFC and provide the needed support to multi-system youth and their families.

The Ohio MSY Coalition supports the Ohio Family and Children First Coordinator's Association ask for:

- (1) **The continuation of HFW support funds beyond SFY2023.** At this time there is no guarantee of continued funding.
- (2) **An increase in OCBF funds.** These funds have decreased over the past 20 years and an increase to a minimum of \$25,000 per county would take FCFCs back to the higher amount received under previous administrations and slightly account for increased costs and inflationary pressure.
- (3) **An increase in MSY Capacity Building Funds** as FCFCs spend much time completing MSY applications, coordinating with providers, contracting with providers (FCFCs may be “charged” by their Administrative Agent to do contracts and many counties require their contracts to be reviewed by the Prosecutor’s Office. This time is charged to the FCFC and often exceeds the \$3,600 provided to FCFCs), processing invoices (many FCFCs are “charged” by the Administrative Agent & Auditor’s Office to process invoices) and do the required follow up.
- (4) **An increase in FCSS funds.** FCFCs appreciate the collaboration of state agencies to provide these funds to FCFCs. Unfortunately, the funds have remained at the same amount since they began. An increase to cover inflation over the years would be appreciated.

STATE BUDGET PRIORITIES

Medicaid

Continuous Medicaid coverage for children up to age 6 and increase general Medicaid eligibility up to 300% of the federal poverty line for families and children



Behavioral health

Full implementation of OhioRISE; address remaining gaps in care and keep flexible state funding; secure additional funding for harm reduction

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Safety net

Create a state-level student loan ombudsman



Maternal + infant health

Medicaid reimbursement for doula services, midwife certification, and improve WIC access

Older adults

Implement PACE expansion and support adult protective services



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