crossroadshealth.org

**Shayna L. Jackson**
MSSA, LISW-S
Chief Executive Officer

**Dianne Vogt**
Board Chairperson

**Board of Directors**
Harold Abraham
Daniel P. Arian
Steve Baldini
Nate Bell
John Berger
Dr. Mel Chavinson
Steve Ciuni
Melissa Cole
Mike Crislip
Darren Crook
Daniel Gold
Chris Gravius
Nancy W. Hanna
Leon Kambani
Rebecca Mansell
Janet Morse
Linda Perlic
Joe Popely
Judith Rich
John F. Schindler

**Honorary Board**
Gail A. Allison
Harold W. Babbit
Eva Dolan
Cindy Eickhoff
joan gelb
Ron M. Harrington
James R. Hill
Joan Hill
Pamela B. Keefe
Nancy-Clay Marsteller
Sandra J. Philipson
Richard W. Pogue
Karen Silver
David Skrabec
Marc A. Stefanski
Ron Toivonen
Michael W. Wise

**Office Locations**
**Munson Road**
8445 Munson Road
Mentor, OH 44060
Voice 440-255-1700
Fax 440-205-2417

**Mentor Avenue**
9220 Mentor Avenue
Mentor, OH 44060
Voice 440-354-9924
Fax 833-209-8465

**Early Childhood Services**
1083 Mentor Avenue
Painesville, OH 44077
Voice 440-358-7370
Fax 440-358-7373

**Family Wellness Center**
35104 Euclid Avenue #300
Willoughby, OH 44094
Voice 440-497-1977

**North Coast House**
440-352-7271

**Linea Telefonica Hispana**
440-205-2444

May 30, 2023

Terry Johnson, Chair
Community Revitalization Committee
SB 105

Dear Chair Johnson and Committee Members:

I appreciate the opportunity to submit testimony on SB 105, as it pertains to the ADAMH Boards. My name is Mike Matoney with New Directions and Crossroads Health in Northeast Ohio, both organizations contract with ADAMHS boards.

Senate Bill 105, as currently drafted, contains several provisions that are controversial, complex, and have not been vetted with all system stakeholders. Specifically, we have significant concerns with the following:

**Elimination of the 120-day notice and dispute resolution process in board/provider contracts:**

•The120-day notice provision is a fundamental patient protection that ensures continuity of care when contracts are amended or terminated. Removing this notice would introduce uncertainty and volatility for private businesses, create a power imbalance in the board/provider contracting process, and put patients at risk during any transition process.

•The 120-day notice and dispute resolution process are the only consistent contract requirements mandated under Ohio law. These provisions were placed in statute over a dozen years ago to provide contractual balance between boards and providers while ensuring a continuity of care for the community. Other than those two parameters, contracts vary greatly from county to county and region to region. From a business perspective, providers seek uniformity, stability, and efficiency in the contract process so providers can focus their resources on patient care and health outcomes.

•Under current law, both boards and providers may seek to change or terminate the contract, and if there is disagreement, the dispute resolution process is outlined in law. SB 105 removes the dispute resolution process and instead requires the contract include a process by which only the board can terminate the contract early for any cause the board considers necessary.

**Redundant and burdensome regulations:**

•SB 105 gives ADAMHS boards a new and formal role in the OhioMHAS certification process. OhioMHAS would have to notify boards of all new and renewal certification/licensure applications within 14 days of receipt. The board will then have 30 days to respond with any feedback, and they can even request a meeting with OhioMHAS within the first 14 days of the review period. This extraordinary regulatory process would cause additional delays and uncertainty for providers seeking to open business, hire employees, and expand services in

crossroadshealth.org

**Shayna L. Jackson**
MSSA, LISW-S
Chief Executive Officer

**Dianne Vogt**
Board Chairperson

**Board of Directors**
Harold Abraham
Daniel P. Arian
Steve Baldini
Nate Bell
John Berger
Dr. Mel Chavinson
Steve Ciuni
Melissa Cole
Mike Crislip
Darren Crook
Daniel Gold
Chris Gravius
Nancy W. Hanna
Leon Kambani
Rebecca Mansell
Janet Morse
Linda Perlic
Joe Popely
Judith Rich
John F. Schindler

**Honorary Board**
Gail A. Allison
Harold W. Babbit
Eva Dolan
Cindy Eickhoff
joan gelb
Ron M. Harrington
James R. Hill
Joan Hill
Pamela B. Keefe
Nancy-Clay Marsteller
Sandra J. Philipson
Richard W. Pogue
Karen Silver
David Skrabec
Marc A. Stefanski
Ron Toivonen
Michael W. Wise

**Office Locations**
**Munson Road**
8445 Munson Road
Mentor, OH 44060
Voice 440-255-1700
Fax 440-205-2417

**Mentor Avenue**
9220 Mentor Avenue
Mentor, OH 44060
Voice 440-354-9924
Fax 833-209-8465

**Early Childhood Services**
1083 Mentor Avenue
Painesville, OH 44077
Voice 440-358-7370
Fax 440-358-7373

**Family Wellness Center**
35104 Euclid Avenue #300
Willoughby, OH 44094
Voice 440-497-1977

**North Coast House**
440-352-7271

**Linea Telefonica Hispana**
440-205-2444

Ohio communities. Coupled with the elimination of the 120-day notice, this bureaucratic provision may leave a community without any services.

•Further, while boards could offer comments and provide feedback on any provider seeking certification, licensure, or a renewal–the boards would have no obligation to contract with those providers. This unfair balance of power and government intrusion would impact community behavioral health providers, but also hospitals, FQHCs, and other providers of mental and behavioral health services.

•The bill also grants boards with expanded roles in any OhioMHAS investigation (notice and outcome report) and mandates that OhioMHAS conduct an investigation if requested by a board within 14 days.

Bottomline: Senate Bill 105 would create an imbalance by unnecessarily expanding government oversight of healthcare businesses, grows government, expand regulations, and needlessly inserts greater bureaucracy and uncertainty into the delivery of mental health and substance use disorder services while diverting scarce resources away from patients and into administrative activities.

Finally, the ADAMHS board contracts are out of step with contemporary payer relationships and requirements. There is no standard for accountability, transparency, or procurement of taxpayer funded services through the ADAMHS board system. Regardless of how small the contract, boards routinely require providers to disclose proprietary or sensitive business information that then becomes a public record. Further, boards continue to require providers, by contract, to follow processes and use forms that are out-of-date and associated with administrative rules rescinded when Medicaid established a fee schedule in 2011. Simply put, no other payer–public or private–demands the level of intrusion into the provider's business. This is costly, staff intensive, and diverts resources from clinical service delivery.

Respectfully submitted,

Mike Matoney, MBA, LICDC-CS

Crossroads Health and New Directions