



Ohio Alliance Of Recovery Providers

**Senate Bill 105
Opponent Testimony
Senate Community Revitalization Committee
May 31, 2023**

Chairman Johnson, Vice Chair Hoagland, Ranking Member Sykes, and members of the Senate Community Revitalization Committee, thank you for the opportunity to offer comments on Senate Bill 105. My name is Thomas Stuber, I am the President and Chief Legislative Officer for The LCADA Way (based in Lorain, Erie, Cuyahoga counties), but today I come to you representing the Ohio Alliance of Recovery Providers (OARP) for which I serve as President.

OARP is a statewide organization made up of forty-three addiction treatment providers, certified by the Ohio Department of Mental Health and Addiction Services, whose members work together as a system to help clients move from active addiction to productive citizenship. Our member organizations work to increase access to treatment and develop a recovery-oriented system of care for all Ohioans. Through our professional networking and idea sharing, we have created a collective knowledge of best practices for optimal care and share this information with state and national legislators. At the end of my testimony, you will see a map showing where our members operate throughout the state.

SB 105, as currently drafted, would make a number of changes that OARP either supports or is neutral on – this includes allowing for the optional restructuring of county ADAMH boards' composition, certifying recovery housings residences, and changing ORC language from “alcoholism” to “alcohol use disorder.” However, I would like to focus my testimony on a few specific provisions in the bill that we oppose.

This legislation would create a new and formal role for the boards in the certification and licensing processes. Currently, OhioMHAS handles the application process for initial and renewal provider certification, as well as investigations of providers. SB 105 would require ADAMHS boards to provide input and recommendations to OhioMHAS for all initial and renewal certification and provider investigations. We believe this is unnecessary and will only add more time to the lengthy process. OhioMHAS effectively handles these things already, and quite frankly, not all providers contract with their local ADAMHS board. Why should an ADAMHS board be allowed to comment on a provider's certification when the provider may not have a previous relationship with that board and absolutely no guarantee that the ADAMHS board will contract with the provider after they are certified? Adding a third party to these processes only creates bureaucracy where OhioMHAS already has the staff, resources, and

experience to get the job done right. **We ask that these provisions be removed from the bill and returned to current law.**

I think most people would agree that when any two parties come to the negotiating table, they should come as equals and hopefully reach an equitable agreement. Where boards and providers are concerned, the law is clear (Sec.340.036(D)):

“If a party to a contract entered into under this section proposes not to renew the contract or proposes substantial changes in contract terms, the other party shall be given written notice at least one hundred twenty days before the expiration date of the contract.”

The law tells us that both parties have the option to take action as long as they give enough notice. Ohio law also clearly details what happens when either a board or a provider cannot agree:

“During the first sixty days of this one-hundred-twenty-day period, both parties shall attempt to resolve any dispute through good faith collaboration and negotiation in order to continue to provide services and supports to persons in need. If the dispute has not been resolved sixty days before the expiration date of the contract, either party may notify the [OhioMHAS] director of the unresolved dispute. The director may require both parties to submit the dispute to another entity with the cost to be shared by the parties. Not later than twenty days before the expiration date of the contract or a later date to which both parties agree, the other entity shall issue to the parties and director recommendations on how the dispute may be resolved.”

SB 105, however, removes the 120-day notice requirement and dispute resolution process and replaces it with a provision that is far from equal, and it will pit board against provider. This is what the bill says:

“The terms of the contract shall include a process by which the board may terminate the contract before it is scheduled to expire, for any cause the board considers necessary for the early termination of the contract, and a process by which a provider may appeal the board's decision regarding the early termination.”

Much has been said about the lawsuits filed over the 120-day notice requirement. So the only thing I would like to add to that conversation is this – as I just read, the law is very clear about giving notice of contract termination or changes. When one of those parties violates Ohio law and terminates the contract without giving 120 days’ notice, what other recourse is there than to file litigation? OARP is a unique association. Yes, we are all behavioral health and recovery providers, but we are also the CEOs, the COOs, the CFOs, and the Executive Directors of our respective organizations. I say this because much of our member meetings are spent discussing business practices as they are about how we can better serve our clients and patients. We are nonprofit businesses. When a board violates Ohio law and terminates a contract without giving the required notice, it is devastating to our business, to our ability to pay our employees, and most of all, it is devastating to those in our care receiving treatment. The people we serve are in the midst of what will likely be the most difficult thing they will ever do. Disrupting their

treatment plan, taking them away from the therapists that they have come to trust, and quickly attempting to find them nearby treatment can be detrimental to a person in recovery. The reason the law goes to such lengths to avoid terminating a contract is right there in the language – “in order to continue to provide services and supports to persons in need.” **For this reason, we ask that the 120-day notice and dispute resolution process remain in law.**

Last year, the Ohio Department of Mental Health and Addiction Services (OhioMHAS) spent much of 2022 convening the ORC Chapter 340 Review Stakeholder Workgroup which sought to identify code sections in need of review or modernization, define specific challenges, and explore recommended solutions through a transparent and public process. Chapter 340 is the section of the Ohio Revised Code addressing alcohol, drug addiction, and mental health services. We are proud of the collaboration between the many stakeholders who participated, including the ADAMHS boards, and we hope you get a chance to read the final report. There is much we agree on and much we can do to modernize Chapter 340, and SB 105 certainly starts that conversation. We stand ready to work with Chairman Johnson, Ranking Member Sykes, and all the members of this committee to improve recovery treatment across the state.

Thank you again for the opportunity to share our thoughts on SB 105 on behalf of the Ohio Alliance of Recovery Providers. I would be happy to answer any questions you may have.

Where does OARP operate?

With forty-three providers, OARP operates over 200 facilities across the state. Services include assessment, sub-acute detox, medication assisted treatment, non-intensive and intensive outpatient, partial hospitalization and residential treatment, individual and family counseling, peer mentoring, drug screening, wellness and case management, prevention, gambling treatment, and recovery housing.

1. Addiction Services Council
2. Alvis
3. Catalyst Life Services
4. Center for Addiction Treatment
5. CommQuest Services
6. CHC Addiction Services
7. Compass Family and Community Services
8. CompDrug
9. Coshocton Behavioral Services
10. The Counseling Center Inc.
11. The Crossroads Center
12. Family Recovery Center
13. Family Recovery Services
14. First Step Home
15. Guernsey Health Choices
16. Health Recovery Services
17. Hitchcock Center for Women
18. House of Hope
19. Interval Brotherhood Home
20. Lake-Geauga Recovery Centers
21. The LCADA Way
22. McKinley Hall
23. Meridian HealthCare
24. Morgan Behavioral Health Choices
25. Muskingum Behavioral Health
26. Neil Kennedy Recovery Clinic
27. New Direction
28. The Nord Center
29. Ohio TASC Association
30. Oriana House
31. Perry Behavioral Health Choices Inc.
32. Pickaway Area Recovery Services Inc.
33. Pike County Recovery Council
34. The Prospect House
35. The Recovery Center
36. Recovery Resources
37. Recovery Services of NW Ohio
38. Recovery/Prevention Resources of Delaware & Morrow Counties
39. Sojourner Recovery Services
40. Stella Maris
41. Talbert House
42. Thrive Peer Recovery Services
43. Urban Ounce of Prevention Services

