

The Ohio Psychological Association
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Chairperson Jones and members of the Senate Health and Human Services Committee thank you for the opportunity to speak in Senate Bill 300. My name is Dr. Bobbie Celeste and I am a licensed, practicing psychologist who resides in Columbus. I work as the Director of Professional Affairs for the Ohio Psychological Association. I would like to talk about the public need for more trained psychological providers who can not only provide assessment and behavioral health treatments, but also prescribe medication for their patients with mental health and addiction disorders.

The State of Ohio through the Kasich administration and the Ohio General Assembly has been engaged in a number of major behavioral health policy changes. In addition, to the efforts to stem the scourge of drug addiction, there have been three other significant initiatives: Infant Mortality Commission, the Ohio Health Transformation Behavioral Health Re-Design and the Joint Legislative Committee on Multisystem Youth. Each of these processes have led to the provision or recommendation for new behavioral health services from pre-natal care to senior citizens.

The Infant Mortality Commission wisely recommends additional screening for mothers both pre and post pregnancy. This important step helps identify mothers who need treatment for depression which we know is a factor in poor maternal care and attention which can contribute to infant mortality. Providers need to be trained and ready to assist women in a culturally competent manner that leads to on-going trust and confidence in their providers. Untreated post partum depression at it's worse can lead to psychosis. Caught early, it can be treated quickly and successfully.

The BH Re-design group has worked at adding new services that can now be funded under Medicaid in the state of Ohio and are looking at additional community based services that could be added at different times as children and

youth are moved into managed care in 2017 for their physical health and in 2018 for their behavioral health needs. New services that will be available include home and community based services that can now be funded in the state Medicaid menu especially for children, youth, and their families. However, even before the addition of these clinically evidenced-based services, the state continues to have a lack of available professionals who can see patients and prescribe needed medication.

The Joint Legislative Committee on Multisystem Youth under the leadership of the Chair Randy Gardner and member Senator Peggy Lanier and Co-chair Rep. La Tourette, through their recommendations tried to address the terrible problem of custody relinquishment. Imagine have a child who through no fault of your own has a severe mental health disease and a developmental disability. After using many health care services, your private insurance benefits are exhausted and you have run out of money, having already taken a second mortgage on your house and sold your second car, even though you need it because you and your spouse both work. And you still cannot pay for the services that your child needs. After working with the areas public systems that are available to try and help these families it becomes clear that there is only one way presently to fund mental health treatment for a child with these serious illnesses and that is having the parents relinquish custody to the child protection agency because when they take custody, the child becomes eligible for Medicaid. One of the five recommendations is to develop a system of specialized emergency care for these youth who need treatment. However, the state already lacks enough capacity to treat current needs of parents, youth and children. So we have a situation where thru Re-design and Recommendation of the Joint Committee, additional services are being recommended at a time when we already are short of mental health providers.

The latest outcome research is clear that many with less serious mental disorders can be well-treated with psychotherapy and other evidenced based behavioral interventions. However, research also is clear that many with more serious and specific mental illnesses such as bipolar disorder must have psychotropic medications along with behavioral health treatments. For those who need both

types of treatment, prescribing psychologists can provide another option that will contribute to the number of providers able to offer the best evidenced based treatments in an integrated manner in cooperation with the patient's physician.

As you look at the issues around psychologists being able to prescribe psychotropic medication I wanted to provide you with some of the documents that we have consulted in our study of the issues of training and safety in order to build capacity. I'd especially like to draw your attention to the page with the colorful infographic.

Prescribing psychologists are by no means the only answer, but we believe it can be one of the ways to increase the workforce without costing money to the state.

Thank you and I'd be happy to answer any questions.