

Dear Director Sears and Director Plouck:

Since the concept of Behavioral Health Redesign emerged, NAMI Ohio has been a strong, if not the strongest, supporter of the intent of redesign. NAMI Ohio is supportive of the efforts to integrate behavioral health with physical health, and to focus on better outcomes for the people that we represent. We believe the process has been transparent and everyone has had significant input. However, we have had lingering concerns about whether or not implementation can commence on July 1, 2017 as scheduled.

At times, NAMI Ohio is disillusioned with the resistance to change in our behavioral health system. This resistance has clouded the ability of many of us to tell the difference between legitimate concerns that will impact our loved ones, and concerns that are the result of the desire to maintain the status quo in the system. It is likely that there are both legitimate concerns and concerns that come from a resistance to change. Nevertheless, the Ohio Department of Medicaid (ODM) and the Department of Mental Health and Addiction Services (OMHAS) must be congratulated for dealing with NAMI Ohio's number one concern. Namely, that technical issues such as rule, IT and workforce readiness may result in systemic problems with implementation that could impact our loved ones' access to care.

NAMI Ohio believes that the state's commitment to maintaining the capacity to immediately respond to technical problems during implementation associated with claim submission, coding and other operational issues is vital as implementation moves forward. ODM and OMHAS have assured NAMI Ohio that processes will be in place to quickly respond to any care access issues raised by individuals and/or their families, and have categorically stated that NAMI Ohio will be given a formal role in this process of rapidly responding to people experiencing problems accessing care that may arise from the changes being implemented. ODM and OMHAS have also committed to conducting a review of their processes after 30 days of implementation to make sure that everything possible is done to make this transition person and family friendly.

NAMI Ohio's support of the July 1st implementation date is due in part to our desire to see the vitally needed new services in redesign come online for individuals with the most severe illnesses. Our loved ones have waited too long for access to services included in the redesign such as assertive community treatment and, perhaps more importantly, the intensive home based treatment services for kids at risk of out of home placement because the severity of their behavioral health condition. This desire to ensure rapid access to these new services far outweighs any concerns we have over problems that could arise from operational issues that ODM and OMHAS have committed to addressing immediately.

Finally, the NAMI Ohio Board of Directors has directed me to work with our affiliates to assist us in a process that allows our loved ones the ability to receive quality mental health services in a timely manner. This process will develop in a way that can work with OMHAS to respond immediately to situations that put our loved ones in harm's way.

On behalf of NAMI Ohio and our Behavioral Health Redesign Committee, I want you both to know that you are the most significant individuals that we will rely on during this process to ensure successful

outcomes for our loved ones. Thank you for your ongoing commitment to ensuring that Behavioral Health Redesign is person and family centered. In the event that you have any questions, please contact me.

Sincerely,

A handwritten signature in dark ink, reading "Terry L. Russell". The signature is written in a cursive style with a large, stylized "T" and "R".

Terry L. Russell
Executive Director