

# SFY 2014-15 Budget

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## Preservation of current housing and investment in new options for people with behavioral health conditions

**Problem:** For optimal recovery, Ohioans with behavioral health conditions need supports such as housing, employment and peer support, all of which are not covered by Medicaid. Safe, affordable housing that is not dependent upon the acceptance of treatment is a critical component of stability and recovery. Having one's own home — whether it is an apartment, a furnished room, or a house — is key. Ohio lacks the array of permanent supportive housing options for people with mental illness or addiction. Without it, homelessness cannot be prevented and institutional recidivism from places such as jails, prisons, nursing homes and psychiatric hospitals will be more difficult to reduce. The cost for care in a state psychiatric hospital averages about \$590.00/day while housing in the community is substantially cheaper.

Additionally, the L.C. v. Olmstead ruling promotes the least restrictive environment of the individual's choice. Therefore, Ohio must establish a presence around the importance of quality permanent housing for persons with severe and persistent mental illness.

**Solution:** Investments made in housing over the last biennium by mental health and addiction services include:

- \$10 million in Community Mental Health investment in Governor Kasich's state capital budget: These funds are used for projects identified by local boards of mental health and addiction services to assist the housing stock in the community.
- \$1 million Adult Care Facility Critical Repair Grant (ACF): In January 2012, the Ohio Housing Finance Agency (OHFA) Board approved ODMH to administer an award of \$1 million from the Ohio Housing Trust Fund to provide funding for critical repairs at licensed Adult Care Facilities (ACFs) throughout the state. The intent for use of the funds will be to assist ACFs in making critical repairs needed to maintain the structural integrity of the facility to ensure habitability. ODMH received 184 pre-applications from eligible ACFs, and 115 met all the requirements and will be receiving funding for one or more of their identified priorities. ODMH identified four categories for funding requests for projects to preserve the longevity of the facility: structural defects, heating and plumbing defects, electrical hazards, and safety features. Many of the projects have already been approved to start repair work.
- \$1 million Capital Investment Program (CIP): ODMH/OHFA Permanent Supportive Housing Capital Investment Pilot Program – In FY12 OHFA reserved \$1 million from the Housing Trust Fund specifically to assist ODMH-funded Permanent Supportive Housing projects with minor repairs and renovations. In the first year, there were seventeen applications covering 27 individual properties received by OHFA and ultimately eighteen projects were selected for funding. In FY12, OHFA reserved another \$1 million from the Housing Trust Fund to continue the program to provide funding for existing ODMH capital mortgaged properties for repairs and renovations. This year, the program funded fewer projects, but put more funding into the projects to provide more renovations and upgrades.
- \$500,000 sober housing project: Oftentimes, a person in the early stages of recovery may need a place to stay that is a safe, alcohol- and drug-free environment. Sober housing is a setting where a person in sobriety can find peer support and establish healthy and safe routines that promote a lifetime of sobriety. Many units are gender-based and may include an array of other supports, such as parenting education, that are helpful to the family unit.
- \$500,000 of federal block grant funding has been used to offer mini-grants to communities to assist with housing planning, help local communities with their local match responsibilities for Housing Trust Fund projects, and train individuals on housing advocacy and competency.

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**Executive Budget and Impact:** The Executive Budget includes several initiatives – called Recovery Requires a Community – to assist nursing home residents under the age of 60 who have a primary diagnosis related to mental illness and want to move back into the community. On average, Ohio Medicaid spends \$102,500 per year for Medicaid services in a nursing home for an individual under the age of 60 who is reasonably physically healthy but has a diagnosis related to severe and persistent mental illness. Many of these individuals could be served in less restrictive, clinically appropriate settings at lower taxpayer expense.

For more information, please see “Rebuild Community Behavioral Health System Capacity/Recovery Requires a Community” (<http://www.healthtransformation.ohio.gov/LinkClick.aspx?fileticket=X8HY4spx0QA%3d&tabid=156>)

**Background:** Goals for Ohio MHAS’s adult housing policy include collaborating in efforts that strengthen a continuum of community housing options ranging from adult care facilities (ACF) to supportive housing to home ownership.

Policy focus areas are:

1. Assist local systems in the development of new housing for people with severe and persistent mental illness.
2. Preserve existing housing stock for people with severe and persistent mental illness. (Focus on bricks and mortar)
3. Increase the sustainability of housing for people with severe and persistent mental illnesses. (Focus on operating)
4. Improve residential services for people with severe and persistent mental illnesses.
5. Increase access to housing and housing services for AOD population.

