



## **SENATE FINANCE COMMITTEE**

Chair Dolan

Vice Chair Burke

Ranking Member Sykes

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Tara Britton, Director of Public Policy and Advocacy

Chair Dolan, Vice Chair Burke, Ranking Member Sykes and members of the Senate Finance Committee, thank you for hearing my testimony today. My name is Tara Britton and I am the Director of Public Policy and Advocacy at The Center for Community Solutions, a nonprofit, nonpartisan think tank that aims to improve health, social and economic conditions through research, policy analysis and communication. I am here today to offer testimony on proposals in the budget regarding maternal mortality and adult protective services (APS), and to support the inclusion of proposals developed by the multi-system youth joint study committee.

### Maternal Mortality

In the United States, women are dying from complications related to pregnancy and childbirth at a higher rate than other industrialized nations, and the rate is increasing. Approximately 700 women die each year in the U.S., and thousands more experience complications, often viewed as “near misses” of a maternal death. Non-Hispanic black women are dying at a rate 3 to 4 times that of non-Hispanic white women. The most recent data available for Ohio shows that between 2008 and 2014 there were 408 pregnancy-associated deaths. This data, from 2014, is also the most recent data available on maternal deaths in Ohio. Over the last 18 months Community Solutions has worked to improve awareness and knowledge of maternal mortality in Ohio. We would like to thank the Governor and his administration, as well as the House of Representatives, for including language in the budget that supports Ohio’s Pregnancy-Associated Mortality Review Committee (PAMR), situated at the Ohio Department of Health. The PAMR committee reviews all maternal deaths in Ohio. We have additional items that we recommend be incorporated into the Am. Sub HB 166 to further strengthen this committee and its review of all maternal deaths in the state.



- Annual reporting: The current budget language requires reporting of this data only every 3 years. We already know that there is a significant lag in reporting of this information and think it is imperative that we are informed annually about the reviews of maternal deaths in Ohio in order to learn from deaths that have occurred and prevent future deaths.
- More timely requests and submission of information related to each death: A proposed amendment requires ODH to request information related to a maternal death within 30 days of learning it has occurred, and then any entity that receives a request for information/data must submit it to ODH within 60 days.
- Integration/recognition of severe maternal morbidity (“near misses”): In addition to reporting on maternal deaths, ODH will issue reports on severe maternal morbidity in Ohio.
- Diverse representation on the committee: Language in the proposed amendment includes a representative from the Commission on Minority Health and ensures that the committee is made up of experts on maternal health.

Codifying this committee and offering legal protections to those entities reporting the data are important first steps taken in the as introduced and House-passed budgets. We support making these additional changes as they will further strengthen the committee. Having timely and complete data on this issue is an important step toward implementing measures to prevent maternal deaths and improve maternal health and wellbeing. A recent CDC report on maternal deaths stated “no single intervention is sufficient; reducing pregnancy-related deaths requires reviewing and learning from each death, improving women’s health, and reducing social inequities across the life span, as well as ensuring quality care for pregnant and postpartum women.”<sup>1</sup> Community Solutions is committed to working alongside the General Assembly and the administration to carry this issue forward now, and beyond this budget, and to work to support implementation of on-the-ground changes to prevent maternal deaths.

#### Adult Protective Services

Community Solutions has a long history of advocating for a strong adult protective services (APS) system in Ohio.

- At current budget levels, each county receives around \$31,000 for APS.

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<sup>1</sup> [https://www.cdc.gov/mmwr/volumes/68/wr/mm6818e1.htm?s\\_cid=mm6818e1\\_e](https://www.cdc.gov/mmwr/volumes/68/wr/mm6818e1.htm?s_cid=mm6818e1_e)



- The House-passed budget includes an increase to the APS line item (line item 600534), a strong move in the right direction to protecting Ohio's older adults. This increase brings the line item from \$2.74 million each year of the biennium to \$4.23 million each year of the biennium. This would provide about \$48,000 per county in Ohio.
- Community Solutions supports an increase to at least \$5.72 million each year, which would allow an allocation of \$65,000 per Ohio county, to support one full-time, designated APS caseworker.

With a system long overdue for increased support, we want to continue to discuss an overall increase in the line item to \$10 million per year, which would provide support for a full-time worker and wraparound supports to help older adults remain safe in their communities.

### Multi-System Youth

Community Solutions has been working among a coalition of stakeholders committed to achieving the best possible outcomes for multi-system children and youth. You have heard from a panel of experts and families with lived experience, but I want to share that Community Solutions is pleased to see the inclusion of language in the House-passed bill that develops a multi-system youth action plan that includes implementing the recommendations of the Joint Legislative Committee on Multi-System Youth. There remains a need for a dedicated, flexible funding source to address the myriad issues and barriers faced by children and families and we look forward to continuing this conversation with the General Assembly and Governor DeWine's administration.

Thank you for the opportunity to testify today. I would be happy to answer any questions.