Health and Human Service Priorities for a Robust Ohio Recovery Plan

The American Rescue Plan (ARP) represents a historic opportunity to invest in people, communities and infrastructure. Ohio is set to receive a total $5.36 billion, separated between two allocations, which must be obligated by December 31, 2024 and fully expended by December 31, 2026. Permitted uses for State and Local Fiscal Recovery Fund (SLFRF) dollars include:

- **RECOVER:** Pay for measures that quell the pandemic and prevent outbreaks
- **REPAY:** Premium pay to essential employees or grants to their employers
- **REBUILD:** Invest in water, sewer and broadband infrastructure
- **RESTORE:** Pay for government services affected by loss of revenues caused by pandemic recession. Allows for public sector hiring to reinforce and restore government work

Since these recovery funds were announced on both the state and local levels, many local governments have reached out to their residents to identify and prioritize the needs of their communities through an open, public, transparent process before deciding on strategic, significant investments for a recovery plan.

Already, Ohio has expended more than half of its first state funding allocation, with only $850 million remaining. There has been little to no opportunity for public input on the spending of these funds at the state level. Allocations amended into House Bill 168 were added to the bill on the Senate floor and concurred by the House of Representatives with no opportunity for public testimony or comment.

**Funding of this magnitude warrants a robust planning process drawing on experts and state and community leaders.**

Advocates for Ohio’s Future (AOF) is a nonprofit, nonpartisan coalition of state and local health and human services policy, research and provider organizations united to ensure all Ohioans live healthy lives in quality communities. In an effort to give our member organizations an opportunity to present their ARP state spending priorities publicly, we hosted a hearing via webinar where nine organizations shared their investment proposal, why the dollars are needed and what long-term impact the investment will have. This memorandum summarizes the proposals highlighted in the hearing last week.

**Ohio Association of Foodbanks (OAF)**
Lisa Hamler-Fugitt, Lisa@ohiofoodbanks.org

OAF requests a one-time investment of $25 million for a food and personal care items purchase program and $5 million for capacity-building projects for partner agencies. OAF’s 12 member foodbanks are collectively requesting $153,865,135 to address various needs, including: 1) recruitment and retraining of essential staff, 2) building and operating hub market model agencies, 3) new warehouses and additions, 4) transportation infrastructure including the purchases of semi-tractor trailers, 5) box trucks and vans to increase delivery capacity, 6) warehouse racking, 7) fork lifts, 8) equipment and storage for dry goods, 9) refrigeration and freezers, 10) expansion and construction of commercial kitchens, 11) workforce training and reentry programs, 12) food and personal care purchases, and 13) additional wraparound and direct services and
assistance for clients. The total $183 million foodbanks funding request amounts to $63.40 per person served in fiscal year 2021.

Foodbanks are the de facto grocery store for many families and communities, providing take-home groceries and other food to nearly 1 million Ohioans per month. These funds would allow the foodbanks to expand their reach into communities through food distribution, direct home and agency deliveries, meal preparation, food prescriptions, child and senior food programs, mobile markets and more, as well as provide premium pay and bonuses to essential staff and hire new staff to meet the increased workforce need.

Children’s Defense Fund-Ohio (CDF-Ohio) and Advocacy & Communication Solutions
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CDF-Ohio believes that Ohio must focus ARP funds on supporting the needs of children and families, with a particular focus on nurturing whole child wellbeing. To support this goal, CDF-Ohio proposes ARP investments in School-Based Health Centers and a Child Tax Credit (CTC) Navigator network.

The expansion of School-Based Health Centers (SBHC) would eliminate health and education siloes that inhibit whole child wellbeing. Students’ physical and mental health are critical foundations for success in academics and in life. CDF-Ohio proposes an investment of $25 million per year over 2 years to create a pilot program between the Department of Health, Department of Education, and Department of Medicaid. This pilot program would prioritize schools that serve children of color and children at highest risk of poor outcomes due to other systemic and structural inequities. In this pilot program, funds could be used for capital costs needed to build new health sites, infrastructure for telehealth, personnel to build and grow to a sustainable size including nurses, social workers and counselors, mobile units to serve several sites, communication and community outreach to build trust, and staff training. This request would allow for the creation of approximately 30 projects.

Investment in a CTC Navigator network would assist families in accessing their CTC, which has already proven to be effective in reducing child poverty. There are 116,500 Ohio families that are eligible for CTC payments, but are not receiving them, either because they are unaware or unable to access the new benefits. CDF-Ohio proposes a $10 million investment to establish a Navigator network across the state to assist families in accessing the CTC, which would result in a possible return on investment of nearly $350 million for Ohio’s children and economy.

Ohio Poverty Law Center (OPLC)
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The spending of State Recovery Funds should complement and support the ARP’s other funding streams and take a long-term view for recovery. OPLC urges Governor DeWine and the General Assembly establish a transparent, public process for determining the best use of these funds for an equitable recovery for all Ohioans.

OPLC’s key state ARP spending priorities include:

➢ Address inequities by funding and implementing the Minority Health Strike Force Blueprint
➢ Increase access to behavioral healthcare
➢ Increase childcare capacity and access
➢ Expand broadband access and affordability
➢ Address Ohio’s affordable housing crisis
➢ Outreach for the CTC: OPLC also supports CDF-Ohio’s $10 million proposal for CTC Navigators
➢ Reduce lead exposure: OPLC also supports the Ohio Lead Free Kids Coalition’s proposal for $500 million for residential lead abatement and lead hazard control over the next two fiscal years
➢ support for local emergency rental assistance programs: Local agencies are overwhelmed with applications amid staff shortages. Ohio does not have dedicated state resources to provide support to communities.
➢ Support local civil legal services: During COVID-19, funding for these services plummeted and remains below 2019 levels. This drop in funding coincides with soaring demand for civil legal services among the most at-risk Ohioans.

Coalition on Homelessness and Housing in Ohio (COHHIO)
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Ohio has had a serious and growing affordable housing shortage for years. Even before the pandemic, only 42 affordable rental units were available for every 100 extremely low-income households. Rents have increased 14 percent since January, four times faster than usual. COHHIO’s proposal, which has been signed by over 180 organizations, asks for a $391 million investment in capital initiatives and includes:

➢ $150 million in gap financing through Ohio Housing Tax Credit programs to develop 1,000 units of permanent supportive housing to serve survivors of human trafficking, domestic violence, the chronically homeless, and those with severe and persistent mental health issues.
➢ $150 million in gap financing to leverage 4 percent tax credits and multi-family bond programs to develop and preserve up to 5,000 rental units that would be made affordable to low-income Ohioans
➢ $45 million over three years to update homes for low-income homeowners through CHIP, including expanding home repairs, making accessibility modifications through the Housing Assistance Grant program, and keeping seniors and Ohioans with disabilities in their homes.
➢ $15 million to fund one-time capital projects that increase housing opportunities for homeless youth.
➢ $12 million to expand the FUSE initiative to ensure justice-involved Ohioans have access to housing
➢ $6.75 million to expand the Healthy Beginnings at Home pilot for families at risk of infant mortality.
➢ Creation of a state-administered Landlord Risk Mitigation fund to attract landlords.
➢ Housing supports for people with developmental disabilities, including any smart home investments or updates to equip the home with technology that is needed for self-sufficiency and safety

Enterprise Community Partners
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In Cleveland, recent Census data shows that 26 percent of homeowners are housing insecure, and that number jumps to 51 percent of housing insecure renters. The Ohio Housing Trust Fund is Ohio’s primary and most significant housing resource. Every Trust Fund dollar leverages an additional $3.19 and generates $8 in economic opportunity for the state.

Enterprise Community Partners is proposing a $100 million allocation to the Ohio Housing Trust Fund to enable local nonprofits across Ohio to maintain and repair homes, to increase development and preservation of affordable housing, and to prevent and end homelessness.

Enterprise is also proposing a $100 million allocation for new and existing community and economic development programs to empower Ohio’s families through housing, job creation, financial stability and food security. Some of these programs include Healthy Foods for Ohio, the Historic Preservation Tax Credit,
The Ohio Council of Behavioral Health & Family Services Providers
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The Ohio Council’s ARP spending proposal includes investments in:

➢ Workforce recruitment and retention: Funds should be prioritized to support workforce development and sustain the existing community behavioral health workforce. This should include: 1) support for clinical supervision, 2) loan forgiveness, 3) tuition reimbursement, 4) recruitment and retention bonuses, and 5) funding to support community awareness efforts to elevate the value of careers in behavioral health.

➢ Crisis services expansion: Expand access to necessary crisis services including: 1) supporting development and implementation of mobile crisis response statewide for adults, youth and children, 2) crisis stabilization services, such as a behavioral health-specific urgent care or emergency room, 3) support for a firehouse model funding for all crisis services, meaning a staff is always available, rather than the traditional fee-for-service model.

➢ Access to housing and housing supports: Funding a full continuum of safe, supportive and affordable housing options for families, individuals with severe mental illness, persons in recovery from addiction, and young adults (18 to 26-year-olds) experiencing mental, emotional and behavioral health issues. This should also include resources for rent and utility subsidies, as well as resources for residential treatment and recovery housing providers to use for ongoing and needed repairs.

➢ Mental health peer services: Funds could be used for providers to invest in programming utilizing mental health peers, parent peers and youth mentor services. Additionally, building capacity for consumer-operated programs, clubhouses and other models for social and relational connection is recommended.

➢ Reinvestment in the full range of substance use disorder services: Designating funds for prevention, treatment and recovery supports for alcohol use disorder (AUD) and/or co-occurring AUD and stimulant misuse/abuse. Harm reduction strategies across all substance use disorders, including needle exchanges and access to fentanyl testing strips.

➢ Technology, infrastructure and capital investments: Funds could be used to support: 1) Health Information Exchange (HIE) implementation and ongoing costs, 2) telehealth equipment and software for staff and clients, 3) equipment including durable laptops, tablets, cell phones, WIFI and broadband access, 4) software and VPN upgrades to support remote work, and 5) capital investments in facilities, vehicles and other equipment.

➢ Expanding jail and correctional services: These funds could be used to support services including: 1) all forms of Medication Assisted Treatment (MAT) in local and state correctional settings, 2) provider in-reach to jails, prisons and institutional settings, and 3) engagement services to assist with transition and ensure engagement in treatment upon release.

➢ School-based services: Funds could be used for prevention, consultation, treatment and school staff development.

The Ohio Council encourages that funds be directly distributed to providers as often as possible to reduce administrative barriers and to support expeditious implementation of services regardless of county of residence.
Ohio Council for Home Care and Hospice (OCHCH)
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The COVID pandemic exacerbated a nationwide healthcare workforce shortage. Home care is unique in that it is competing with institutional based care and agencies are losing workers to facilities that can give sign-on bonuses and higher wages.

OCHCH proposes that a portion of the $517 million Ohio is allocating to Home and Community-Based Services (HCBS) programs from ARPA funds be made available in two separate lump-sum payments to providers for recruitment, retention and training of personal care aides and nursing staff, for both home health agencies (skilled care) and home care agencies (non-medical care). Workforce is the lifeblood of HCBS services. Without providers to serve patients, there is no service care that can be provided in the community. Workforce is the most immediate and pressing problem threatening HCBS.

Ohio Workforce Coalition (OWC)
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OWC supports partner asks for investment in broadband access, mitigating the benefit cliff, and adult education and technical training integration.

OWC also proposes ARP funds be invested in:

➢ Workers: Ohio should offer retroactive hazard pay to workers in direct care, childcare, and retail service jobs to address needs of essential workers to help them stabilize their families, particularly workers of color disparately impacted by COVID-19. Hazard pay should be made accessible for gig workers and those working multiple low-wage jobs
➢ Employers: Ohio should ensure that grants or other allocations of funds to employers are directly tied to the quality of the jobs and workplaces offered, including opportunities to improve retention, add emergency funds or support racial equity work. We must prioritize investments for employers who are in turn investing in their workers.
➢ Systems: Investments in infrastructure, including broadband, should be developed to include integrated adult basic education and ongoing post-employment career coaching. Workforce investments should be developed and decided with significant impact from practitioners, job seekers and workers across the state and should require clear outcomes reporting that is disaggregated by race, gender, employment status and other indicators.

OWC asks for increased transparency in ARPA planning and spending discussions at the state level.

Policy Matters Ohio (PMO)
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Childcare workers, home health and personal care aides, teaching assistants and nursing assistants are among our most essential workers, yet each of these jobs pays under $30,000 per year and workers in these positions were most at risk of COVID-19 exposure.

PMO proposes $50 million be invested for one-time hazard payments to help essential workers and their families with income at or below 200 percent of the federal poverty level to pay for basic household needs such as food, housing, child care and/or utilities. This proposal would award $1,000 one-time payments to support 50,000 Ohio families.
Ohioans Deserve a Voice in Their Recovery

AOF urges the DeWine Administration, the General Assembly, and state officials to seek out additional public input through an ARP planning process. Ohioans deserve a voice in their recovery, and Ohio can’t justify spending $5.36 billion without extended opportunities for public engagement and testimony. We hope this document serves as a stepping stone towards the public planning process that Ohio desperately needs.

Sincerely,

Kelsey Bergfeld
Director, Advocates for Ohio’s Future

AOF is a nonprofit, nonpartisan coalition of over 500 state and local health and human services policy, advocacy and provider organizations that strive to strengthen families and communities through public funding for health, human services, and early care & education. We work to empower and support nonprofit organizations in the critical work they do, especially as it relates to lifting up the most vulnerable among us.