

Testimony of Dr. Katherine Junger

Director of Systems Integration, Cincinnati Children's Hospital Before the Joint Medicaid Oversight Committee, May 29, 2025

Chairman Holmes, Vice Chair Romanchuk, Ranking Member Liston and Members of the Committee.

Thank you for the opportunity to speak today. My name is Dr. Katherine Junger. I'm a clinical psychologist and Director of Systems Integration at Cincinnati Children's Hospital. My work focuses on improving children's health across Southwest Ohio by expanding access to mental, behavioral, and developmental health care, building service capacity, and coordinating support across systems that serve kids.

We are one of the largest pediatric mental health providers in the nation, and we see firsthand how policy decisions impact the health and well-being of Ohio's children. Our services span the treatment continuum from community-based prevention all the way to inpatient care. Even before the pandemic, the mental health needs of children in our region were growing at an unsustainable rate. Our emergency room visits for mental health concerns more than doubled from 2011 to 2017 from ~4,000 to 8,000k and our system struggled to keep up. Families waited weeks—or longer—for care and kids' conditions worsened.

We, like many other agencies in our region, make every effort to respond to the growing need. We have trained more providers, expanded services in schools and primary care, and opened new crisis-focused outpatient programs. Cincinnati Children's alone saw outpatient visits grow from nearly 80,000 in 2014 to 200,000 in 2022. Even with the largest inpatient pediatric psychiatry program in the country, we still couldn't meet the need.

One major barrier was that our treatment continuum had critical gaps, especially for intensive, family-focused treatments for youth with complex mental, behavioral, and developmental health needs which led to ongoing and escalating crisis cycles. This meant that instead of serving youth in their communities, an emergency room and/or inpatient admission was often needed.

That's why OhioRISE has been a game-changer.

OhioRISE is a Medicaid innovation that supports intensive, community-based mental health services—exactly where they're needed most. It allows for mobile crisis teams, in-home therapy, and respite care—so children can get the right care, at the right time, in the right place. They mean that a child in crisis can get intensive help and still sleep in their own bed at night. It's not just better care—it's better policy.



As just one example, thanks to OhioRISE, Youth Villages launched a new intensive, home-based treatment in Hamilton County for youth involved with child welfare and juvenile justice systems. This model treats youth and caregivers together in their homes multiple times a week, improving health, academic, and social outcomes. The program is currently serving 24 youth and actively expanding to meet high demand.

Before OhioRISE, these youth often cycled through emergency departments, psychiatric hospitals, detention facilities, sometimes ending up in far-away congregate care. Now, they receive specialized care at home, supported by coordinated wraparound teams. This not only improves outcomes but frees up high-acuity hospital services for those who need them most.

Through OhioRISE mechanisms, Cincinnati Children's is also preparing to open the first Psychiatric Residential Treatment Facility (PRTF) in our region—so that youth with the most severe needs can stay in-state, close to loved ones, instead of being sent hundreds of miles away. OhioRISE has already reduced the number of youth in that out-of-state care from 90 in 2023 to 60 in 2024 and is building capacity to eventually serve every Ohio youth in-state. Keeping kids close to home is paramount for their long-term success.

OhioRISE is also breaking down barriers to access. Programs that were once out of reach—like Cincinnati Children's partial hospitalization programs for neurotypical youth and youth with neurobehavioral concerns—are now available to families who need them. And by dramatically expanding access to wraparound care, OhioRISE is helping thousands more families navigate not just mental health needs, but also school challenges, physical health needs, child welfare involvement, disability services, juvenile justice requirements—all under one coordinated plan.

The program has also strengthened the mental health workforce—a critical need in our state. OhioRISE has created diverse new jobs across the care continuum. Additionally, ensuring that youth are seen at the appropriate level of care helps reduce provider burnout. Clinicians are less stretched to serve youth whose needs exceed the setting, like those with complex, high acuity needs being treated by school-based therapists when intensive, multi—system interventions are warranted.

This is what families need to heal—and what our state needs to thrive.

Thank you for your time and for your commitment to the children and families of Ohio.