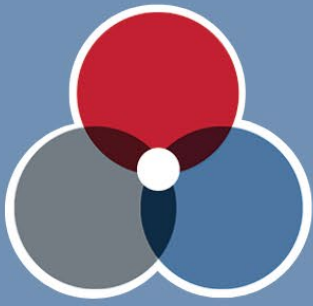




Shifting Support

State Budget changes
impacting Ohio's HHS agencies



Introduction

The conclusion of the budget process for fiscal year (FY) 2026 and 2027 has made notable expenditures across Ohio departments and agencies. House Bill 96 of the 136th General Assembly (GA) provides \$44.42 billion of federal and state appropriation to the General Revenue Fund (GRF) in FY 2026, and \$46.08 billion for FY 2027. State GRF appropriations amount to \$29.84 billion in FY 2026 and \$30.72 billion in FY 2027. There is a grand total of \$99.53 billion for FY 2026 and \$101.16 billion in FY 2027 across all funds. This provides an overview of spending in the major health and human services agencies and focuses on the major programmatic changes in this budget.

Ohio Department of Health

The Ohio Department of Health (ODH) works with over 110 local health departments across the state, as well as health care providers and public health associations to protect and promote public health. ODH received a [total appropriation of \\$978.6 million in FY 2026](#) and \$989.7 million in FY 2027. This equates to a 14.1 percent increase and 1.1 percent increase in funding, respectively. The increase in funding reflects additional anticipated federal awards over the biennium as GRF decreases 13.0 percent from FY 2025 spending.

Harm Reduction

While harm reduction-related initiatives are funded across different areas in the budget, such as in the Department of Behavioral Health (DBH), the final budget overall included less dedicated funding for harm reduction than the Governor's initial proposal. The Governor had earmarked up to \$250,000 a year for local harm reduction efforts within the Department of Health's budget, and this earmark was removed in the final budget. While not an ODH budget provision, as it was included in the Board of Pharmacy's budget, it is worth noting that the final budget expands beyond fentanyl testing strips, items that may be lawfully possessed and used to test for the presence of drugs and to prevent drug poisoning, without being in violation of Ohio's drug paraphernalia laws.

Disease Prevention

One of the most important jobs that ODH is tasked with is disease prevention and public health preparedness activities. These activities prevent diseases and promote health through assessment and interventions. The activities, funded through numerous line-items, which are indicated in the table below, received \$102.4 million in FY 2026 and \$103.2 million in FY 2027. The largest item is the HIV/AIDS prevention and treatment activities line-items, which fund prevention and care activities.



Item	Type of Funding	FY 2025 Actual	FY 2026 Appropriation	FY 2027 Appropriation
Local Health Department Support	GRF	\$2,379,000	\$2,379,000	\$2,379,000
Breast and Cervical Cancer Screening & Services	GRF & Federal	\$1,713,489	\$1,690,549	\$1,699,779
HIV/AIDS Prevention & Treatment Activities	GRF & Federal	\$57,856,897	\$56,307,779	\$56,320,351
Public Health Laboratory Activities	GRF	\$11,404,556	\$17,878,355	\$18,180,238
Environmental Health/Radiation Protection	GRF	\$5,405,749	\$5,241,349	\$5,241,615
Chronic Disease, Injury Prevention, & Drug Overdose	GRF	\$7,848,990	\$2,218,750	\$2,195,097
Preventive Health Block Grant	Federal	\$8,745,525	\$11,800,000	\$12,154,000
Infectious Disease Prevention & Control	GRF	\$4,750,508	\$4,924,753	\$4,988,016
Total		\$100,104,714	\$102,440,535	\$103,158,096

Lead Prevention

Historically, ODH provided funding to local governments for projects to address lead in homes. Previously, this was done through two different line-items. The first was the Lead Abatement line-item, which received a 96.8 percent cut in funding from \$7.9 million in FY 2025 to \$250,000 in each fiscal year of the biennium. The other line-item was the Lead-Safe Home Fund Program, which distributed \$1.2 million in FY 2025 to remove lead from homes and received no funding in the final budget. The only provision that was expanded in the final budget to address lead is the Lead Abatement Tax Credit, which was increased from \$10,000 to \$40,000, yet the total amount of tax credits that can be issued decreased from \$5.0 million to \$3.0 million.



Ohio Department of Medicaid

House Bill 96 (H.B. 96), as enacted by the 136th General Assembly, contains provisions that affect everything from Medicaid eligibility to payment structures to oversight and healthcare services. We'll walk through some of the major Medicaid and health related provisions highlighting some impacts, some fiscal effects and broader implications for the Ohio Department of Medicaid (ODM) providers, and ultimately, patients.

Increased verifications

Now, ODM must use third-party data sources to verify eligibility. These practices aim to increase accuracy and while this practice was already occurring, further checks may also increase bureaucracy. H.B. 96 also eliminates the requirement for individuals with incomes above 150% of the federal poverty level to pay premiums under the Medicaid buy in for workers with disabilities program.

Workers with disabilities

H.B. 96 also eliminates the requirement for individuals with incomes above 150% of the federal poverty level to pay premiums under the Medicaid buy in for workers with disabilities program. This eases access to Medicaid for working people with disabilities although ODM will lose associated premium revenue throughout this process. **The net effect is essentially an increase in program accessibility which reinforces employment incentives for Ohioans living with disabilities.**

Nursing facility rates and patient driven payment model

The budget bill includes an increase in access to a phased in program for the patient driven payment model where calculations for nursing facilities direct care rates will gradually shift beginning in fiscal year 2026. ODM must submit quarterly progress reports, and the transition is intended to be budget neutral.

Managed care oversight

ODM now must expand its financial dashboard to include actuarial metrics and per-member-per-month (PMPM) service reports. The implementation of this measure aims to increase transparency for lawmakers and the public. As it relates to increasing data transparency, ODM must also improve MCO data cross-checking with other state and federal databases.

Children's hospitals

As it relates to prioritizing funds, there is an earmark for lodging services for children's hospitals to reduce financial impacts on families of children with increased health needs.



Programmatic changes

Those who are found to have committed Medicaid fraud have mandated penalties of restitution up to 200 percent of the amount paid for claims found due to fraudulent Medicaid eligibility. And ODM must also report errors relative to presumptive Medicaid eligibility.

Diversity, Equity, and Inclusion is also prohibited, though there are limitations for disability-related services. Additionally, to the extent allowed by federal law, ODM is unable to use Medicaid funds that cover gender affirming care.

Ultimately, H.B. 96 incorporates a blend of eligibility checks and oversight measures that could potentially reshape Medicaid in Ohio.

Trigger language

Currently, the Federal Medical Assistance Percentage (FMAP) is set to cover 90% of the cost of individuals in Group VIII or the Medicaid expansion population. **H.B. 96 includes a provision that if the FMAP is set below 90% for Group VIII**, then the Ohio Department of Medicaid (ODM) will be mandated to create a plan to transition individuals who are no longer eligible to private insurance or charity care.

2026 and 2027 appropriations

Below are the future appropriations fiscal years (FY) 2026 and FY 2027, along with the actual budgeted amounts for FY 2024-2025.

Source	2024	2025	2026	2027
GRF - State	\$5,755,955,473	\$6,625,953,317	\$6,474,246,701	\$6,757,969,461
GRF - Federal	\$12,596,999,157	\$14,152,193,615	\$14,579,248,389	\$15,361,659,183
Federal Fund Group Subtotal	\$11,539,881,915	\$12,101,748,733	\$13,344,375,652	\$14,161,485,838
Dedicated Purpose Fund Group Subtotal	\$4,481,948,008	\$4,917,756,366	\$5,401,099,961	\$5,595,435,866
Holding Account Fund Group Subtotal	\$13,743,037	\$6,651,472	\$14,001,665	\$14,001,665
Total	\$34,388,527,590	\$37,804,303,503	\$39,812,972,368	\$41,890,552,013



Mental Health & Addiction Services | Behavioral Health

The DBH was appropriated \$1.23 billion in FY 2026 and \$1.25 billion for FY 2027. Over half (52.2%) of the sources for the budget comes from the GRF. Other significant sources are Federal (29%) and state non-GRF (18.8%).

The Department of Behavioral Health Greenbook has made several notable [changes](#):

- The name changes of the agency from the Ohio Department of Mental Health and Addiction (OMHAS) to the Department of Behavioral Health (DBH).
- DBH is also directed to collaborate with other government institutions/entities to develop and deploy a system of statewide mobile crisis services. This will be done if federal and state funding is adequate.
- HB 96 also creates state block grants, which use GRF appropriations to provide flexible funds for ADAMHS boards. There are six block grants that were created. The allowed uses will be defined by the DBH Director. The six block grants are: Prevention State Block Grant, Crisis Services State Block Grant, Mental Health State Block Grant, Substance Use Disorder State Block Grant, Recovery Supports State Block Grant, and the Criminal Justice State Block Grant.

Continuum of Care Line Item

The Continuum of Care line item is responsible for delivering funds to ADAMHS boards as block grants. These earmarks will be used to support various activities across SUD, mental health, and recovery.

Fund	Line Item	FY 2025	FY 2026	FY 2027
GRF	Continuum of Care	\$104,605,007	\$104,080,000	\$104,080,000

The Continuum of Care line item was appropriated \$104 million for FY 2026 and FY 2027. This line item contains earmarks listed below, which operate as state block grants delivered to ADAMHS boards. The earmarks within the Continuum of Care Line item are responsible for mental health, substance use disorder, recovery, and mobile response and stabilization.

- The Mental Health State Block Grant funds mental health and recovery support. This includes treatment of people with mental illness, cross system collaboration to serve adults in criminal justice, and other areas of focus to improve mental health.



- The Substance Use Disorder State Block Grant funds alcohol and drug addiction recovery and services. This includes stabilization centers, cross system collaboration, and efforts regarding recovery and addiction support.
- The Recovery Supports Block Grant funds provisions that can be used for things such as peer support, minor facility improvements of residential institutions that under class two and three, psychotropic/substance use disorder treatment medication to reduce unnecessary hospitalization, and community reintegration.
- The Mobile Response and Stabilization services line item is responsible for supporting MRSS in Ohio.

Fund	Line Item	FY 2026	FY 2027
GRF	Mental Health State Block Grant	\$69,500,000	\$69,500,000
GRF	Substance Use Disorder State Block Grant	\$9,500,000	\$9,500,000
GRF	Recovery Supports Block Grant	\$19,500,000	\$19,500,000
GRF	Mobile Response and Stabilization Services	\$4,000,000	\$4,000,000

In addition to these appropriations, H.B. 96 created a process that allows the DBH to establish the certification of behavioral health clinics (CCBHCs). Other provisions within this language also contain rules that will coordinate between federal, state, and local levels to assist with developing these entities.

The DBH will coordinate with state, federal, and local government to establish CCBHCs. CCBHCs are responsible for providing 24/7 crisis service, care allocation, and all-inclusive treatment. The DBH can only certify CCHBCs with the necessary funds from the state and federal level.

Opioid and addiction response

State Opioid Response: \$170 million from federal grants each fiscal year to bolster activities related to harm reduction, treatment and recovery, stimulant use disorder, and other co-occurring disorders. Activities address the opioid epidemic coordinate workforce support, training for medication-assisted treatment, and early intervention.

The main priority of the line item is to support harm reduction practices, reducing unintentional overdose morbidity, preventing youth drug and alcohol use, and increasing addiction treatment.



Fund	Line Item	FY 2025	FY 2026	FY 2027
3HB1	State Opioid Response	\$99,572,804	\$170,000,000	\$170,000,000

Substance Abuse Block Grant

The Substance Abuse Block Grant is a federally funded line item. Target populations and services are: Early intervention for HIV/AIDS, pregnant women or women and women with dependent children, and intravenous drug users. The line item delivers \$87 million from federal grants to bolster local boards for prevention, treatment, and recovery.

Federal priorities from the Substance Abuse and Mental Health Services Administration ([SAMHSA](#)) stipulate that a 20% minimum of funds should be spent for primary prevention. [Primary prevention](#) is a practice that aims to reduce disease before it can inflict injury.

Fund	Line Item	FY 2025	FY 2026	FY 2027
3G40	Substance Abuse Block Grant	\$80,540,792	\$87,000,000	\$86,000,000

Crisis Infrastructure

The crisis services and stabilization line item is a new line item that creates the Crisis Services State Block Grant. This is a block grant distributed to ADAMHS boards to fund crisis services. Examples under this are substance use and mental health crisis stabilization centers, crisis prevention services, and cross-system collaborative efforts.

Fund	Line Item	FY 2025	FY 2026	FY 2027
GRF	Crisis Services and Stabilization	\$0	\$17,000,000	\$22,000,000

988 Suicide Crisis

Previous [research](#) from Community Solutions detailed the importance of the 988 Crisis Lifeline for Ohioans. The Lifeline [expands](#) broader knowledge of mental health services offered by the state of Ohio. The 988-suicide crisis line was created from the National Suicide Hotline Designation Act of



2020, which re-established the 10-digit code to a shorter three-digit code. With the creation of the lifeline, states were directed to transition to the number.

For the first year of the implementation of the lifeline, DBH used \$20.1 million dollars of federal funds. During the budget process for this biennium, the governor proposed changing both the source of funding for 988 and funding it at a higher level than what ended up in the final version of the budget. The initial proposal was to use marijuana tax, however, that language was removed from the budget.

In the previous biennium, HB 33 of the 135th GA created fund 5AA1 line item for the 988-suicide crisis lifeline. This line item had a disbursement of \$23.5 million in FY 2025. The passed budget transfers the appropriation in fund 5AA1 to the GRF.

While funding levels in 2026 are slightly higher than 2025 and essentially static to 2025 in 2027, it is expected that there will be increased demand and use of the 988 line as more people learn about it, which is why the Governor’s budget initially funded the line at \$34,191,840 in FY 2026 and \$41,298,200 in FY 2027.

Fund	Line Item	FY 2025	FY 2026	FY 2027
GRF	988 Suicide Crisis	\$0	\$25,500,000	\$23,000,000



Aging Services

The Ohio Department of Aging (ODA) was appropriated \$127,930,872 for FY 2026 and \$131,571,109 for FY 2027. Most of the funds are from federal at 66.6 percent, followed by 20.2 percent from GRF, and 13.2 percent from the Dedicated Purpose Fund.

Overall, the agency is getting a decrease in funding compared to FY 2025 when they were allocated \$169,984,281. Between FY 2025 and FY 2026, there was a decrease by 24.7 percent, however, there will be an increase from FY 2026 to FY 2027 at 2.9 percent.

Long-term services and supports (LTSS) and PACE

As mentioned in our [previous article](#), long-term care supports line items are funds to cover administrative expenses associated with PACE, PASSPORT, and Assisted Living. Throughout the budget process, the long-term care budget (federal) line item remained the same at \$7,462,626 for FY 2026 and \$7,979,625 for FY 2027. However, the Senate reduced the amount of funds for the state share of the long-term care budget for FY 2027 to \$5,399,477.

Overall, the total funding for long-term care support increased by 22.2 percent from FY 2025 to FY 2026. There will be another five percent increase for the total funding of long-term care support from FY 2026 to FY 2027. So, what does this mean for PACE? ODA will still be able to issue an RFP for an organization to become a PACE center in underserved counties. PACE services were offered in Cuyahoga, Franklin, Lorain, and Summit Counties as of August 2025. In 2026, PACE services will extend to Ashtabula, Hamilton, Lucas, Mahoning, Montgomery, and Trumbull counties.

A presumptive eligibility provision was added during the budget process. However, if the applicant is later determined to be ineligible for PACE, then the PACE organization that conducted presumptive eligibility determination must cover the costs of PACE services offered to the individual during the presumptive eligibility period.

Fund	Line Item	Actual FY 2025	FY 2026 Appropriation	FY 2027 Appropriation
GRF	Long-Term Care Budget- State	\$4,613,008	\$5,222,432	\$5,339,447
3C40	Long-Term Care Budget- Federal	\$5,765,222	\$7,462,626	\$7,979,625
	Total Long-Term Care Budget	\$10,378,230	\$12,685,057	\$13,319,102



Personal Needs Allowance

There will be an increase in the personal needs allowance (PNA) for older adults living in nursing facilities. According to the [American Council on Aging](#), a PNA is the amount of money a Medicaid recipient in a nursing care facility can keep for their personal income per month. A PNA pays for a resident's personal expenses that are not covered by Medicaid such as vitamins, clothing, magazines, and haircuts.

Originally, a Medicaid recipient obtained 50 dollars' worth of PNA as an individual, and 100 dollars per couple. Governor Mike DeWine vetoed only the specific language that establishes the minimum amounts. Hence, the legislative language [in the state budget](#) explains that "...the monthly personal needs allowance shall be not less than seventy-five dollars for an individual resident and not less than one hundred fifty dollars for a married couple if both spouses are residents of a nursing facility and their incomes are considered available to each other in determining eligibility."

Governor DeWine's [veto message](#) exclaims that ODM will work on the increase through their administrative rulemaking authority. ODM offered a [comment period](#) from September 10, 2025, to September 17, 2025. The rule is currently under review.



Department of Job and Family Services

The Department of Job and Family Services (ODJFS) administers public assistance programs including the Supplemental Nutrition Assistance Program (SNAP) and the Temporary Assistance for Needy Families (TANF) program, oversees child support payments and unemployment services, along with other job readiness programming. The agency's stated mission is "to improve the well-being of Ohio's workforce and families by promoting economic self-sufficiency and providing assistance to some of Ohio's most vulnerable citizens."

Highlighted here are the significant changes in this budget, compared to the last biennium, while the continued core functions of the agency are covered [here](#). The Community Services Block Grant and other energy assistance programs will move from the Department of Development (DEV) to ODJFS, accounting for the significant increase in federal funding from 2026 to 2027. Additionally, the administration of Ohio Benefits, which is the online benefits portal for several public assistance programs, will shift from the Department of Administrative Services to ODJFS.

Overall, over \$2 billion dollars, both state and federal, flow through ODJFS in 2026 and over \$3 billion in 2027. The federal, state, and local governments work collaboratively to fund, supervise, administer, and provide the services that fall under the auspices of ODJFS.

Source	FY 2024 Actual	FY 2025 Actual	FY 2026 Appropriation	FY 2027 Appropriation
GRF	\$1,046,897,140	\$526,749,169	\$505,424,268	\$507,368,199
Dedicated Purpose/Internal Service (DPF/ISA)	\$107,251,891	\$56,993,017	\$79,080,000	\$416,484,963
Fiduciary/Holding Account (FID/HLD)	\$89,798,618	\$76,947,293	\$122,500,000	\$122,500,000
Federal (FED)	\$2,881,887,471	\$2,023,116,481	\$1,773,986,488	\$2,092,041,882
Total	\$4,125,835,120	\$2,683,805,961	\$2,480,990,756	\$3,138,395,044

Assistance programs moving from Development to Job and Family Services

Some programs, currently housed at DEV, will move to ODJFS beginning in FY2027 (the second year of the biennium).



- Percentage of Income Payment Plan (PIPP) Program,
- Home Energy Assistance Program (HEAP),
- Home Weatherization Assistance Program (HWAP), and
- Targeted Energy Efficiency and Weatherization Program

DEV and ODJFS are tasked with developing a transition plan for these programs to ensure smooth and continued operations, including the consumer outreach elements of the programs.

The Community Services Block Grant, also currently housed at DEV, is a federal program that provides funding to states to address the causes and conditions of poverty, support communities and promote self-sufficiency.

At the state level, most of the funding is passed through to community action agencies (CAAs) who work at the local level to target the funds to the needs of individual communities. Shifting these programs over to ODJFS brings most of the assistance programs that aim to address poverty and target families who have low incomes under the umbrella of one agency.

Upgrading the unemployment compensation (UC) system

Ohio's unemployment system's technology has long needed an upgrade. This budget funds this upgrade with a fee on employers. The "technology and customer service fee" will equal no more than 0.15% of wages paid per covered employee from employers who contribute to UC and a service fee of no more than \$13.50 for nonprofit organizations that file or renew a surety bond, which is insurance for nonprofits that protects against things like theft and fraud. This [upgrade](#) aims to modernize the benefits and appeals process and has already begun with expected completion in 2026.

SNAP waiver to limit certain categories of food/drink

The GA included in its final version of the budget a provision that requires Ohio via ODJFS to apply for a waiver to the United States Department of Agriculture (USDA) that would limit the use of SNAP benefits for certain sugary foods and beverages. While the requirement to apply for the waiver remained (as did the requirement to reapply each year if the waiver request is not approved), the Governor vetoed the definitions of sugary foods and beverages in the budget language, citing the complexity that these specific definitions brought to getting a waiver approved and implemented.

The Governor directed ODJFS to convene a working group to develop waiver recommendations "for the most efficient and effective implementation that best supports public health." This working group will release its final recommendations this fall.



Department of Children and Youth

The Department of Children and Youth (DCY) was established by Governor Mike DeWine through the 2024-2025 budget process. This biennium (2026-27) is the first in which DCY is operating as an agency for both years. The [mission of the agency](#) is to “provide efficient and effective services to children and their families that will promote positive, lifelong outcomes for all youth.” Nearly all infant, child and youth serving programs now operate under DCY, including childcare, child welfare, maternal and infant health, and other services for children.

Source	FY 2024 Actual	FY 2025 Actual	FY 2026 Appropriation	FY 2027 Appropriation
GRF	\$0	\$730,106,449	\$940,943,531	\$946,543,566
Dedicated Purpose	\$0	\$63,224,609	\$46,428,086	\$36,486,762
Federal	\$0	\$1,122,440,964	\$1,663,655,784	\$1,609,281,500
Total	\$0	\$1,915,772,021	\$2,651,027,401	\$2,592,311,828

Changes to publicly funded childcare and childcare policy

Childcare Choice voucher

The 2026-27 budget made a collection of changes to publicly funded childcare (PFCC) that DCY will implement. Families in Ohio are initially eligible for PFCC if their income is equal to 145 percent of the federal poverty level or below. They can maintain access to PFCC as their incomes rise to 300 percent of the federal poverty level with a sliding copay scale. Childcare advocates and the Governor sought to increase initial eligibility for childcare in this budget. While eligibility for PFCC remains at 2024-25 levels, a continuation of the Childcare Choice voucher program was included in the 2026-27 budget which provides access to childcare for families with incomes up to 200 percent of FPL. To the family, this eligibility expansion from 146 percent of FPL to 200 percent of FPL means increased access and will function similarly to PFCC. The funding mechanism though for the voucher portion of the program brings into question whether it is sustainable beyond this biennium. The initial launch of the voucher program, in 2024, was funded with one-time federal American Rescue Plan funds. The continuation in this budget is funded partially with federal childcare dollars and partially with TANF funds. Both sources are stretched thin to meet the demand for childcare and programs and services for poor people.



Source	FY 2024 Actual	FY 2025 Actual	FY 2026 Appropriation	FY 2027 Appropriation
3H70 ALI 830604 Childcare (FED)	\$0	\$362,503,309	\$646,049,427	\$591,221,224
Earmark from ALI 830605, TANF			\$50,000,000	\$50,000,000
Total			\$696,049,427	\$641,221,224

PFCC rates and payments

Per the budget, DCY will implement new rate and payment policies. The changes related to rates include:

- “(1) requiring payments to be made prospectively to PFCC providers,
- (2) changing the contractual payment rate for PFCC to the rate established in DCY rules, instead of the lower of the provider’s customarily charged rate and the rate established in rules, and
- (3) requires DCY, beginning not later than July 5, 2026, to calculate PFCC payments based on a child’s enrollment rather than on the child’s attendance.”

DCY must also develop payment policies associated with a child’s enrollment status: hourly (fewer than 10 hours of care per week), part-time (between 10 and fewer than 33 hours of care per week) and full-time (33 or more hours per week), with no categories beyond these allowed. Home based providers, categorized as either type A or type B, saw an expansion in the number of children that they can care for in these settings based on changes in the budget bill.

Childcare Cred program

The budget established the [Childcare Cred program](#) a three-way partnership between an employer and an employee and the state (DCY) to split the cost of childcare. The state (DCY) share is 20 percent, while the employer and employee each contribute 40 percent of the cost of childcare. Employees whose household income is between 200 and 400 percent of the FPL are eligible if his/her employer participates in the program. Employers can engage one or more eligible employees in the program. Childcare Cred is modeled after programs in other states, including [Michigan](#), and is funded at \$10 million in only the first year of the biennium. Employees must utilize a licensed childcare provider in the state. Employers and employees can [submit an application](#) to DCY from September 1, 2025 through May 1, 2026.



New initiatives

Responsible Fatherhood Initiative

The DCY budget includes \$5 million in FY 2026 and \$15 million in FY 2027 to support the development and implementation of the Responsible Fatherhood Initiative. DCY is tasked with working with a nonprofit organization to develop and implement the initiative and subsequently award grants to nonprofits that engage in outreach and awareness and provide support to fathers.

Child wellness campuses

Child welfare agencies across the state have at times faced the [vexing problem](#) of a lack of suitable placements for children in their custody. There has been [media coverage](#) of children spending the night (or multiple nights) in county buildings due to a lack of placement options in residential or other appropriate settings. Early on, DCY gathered a working group of experts to address this issue. Child wellness campuses were identified as a part of the solution to this issue. Funding to establish wellness campuses is included in the 2026-27 state budget, at \$10 million per fiscal year. The wellness campuses would be established regionally and selected by DCY through a competitive selection process. An eligible entity will be able to provide all necessary services and would need to show that there are local funding commitments to support all the start-up costs and be able to maintain services on an ongoing basis.

Conclusion

The major changes included in the state budget have begun to roll out. We continue to see more guidance on the budget's new initiatives weekly. Agencies are also unpacking the impact of federal level changes on the state budget. Community Solutions will continue to monitor and share the impact of state and federal changes.

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Ohio's HHS agencies



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