



Minnesota's Behavioral Health System: An Overview

Paul Fleissner | Behavioral Health Division Director

Neerja Singh | Behavioral Health Clinical Director

Sue Abderholden | NAMI, Executive Director

Behavioral Health Policy Division Committee Meeting

January 13, 2021

Presentation overview

- Prevalence
- Historical context
- Children's mental health services
- Adult mental health services
- Substance use disorder treatment services
- Funding
- Community supports
- System transformation
- Gaps
- Coordination with other systems



Prevalence in 2019

- **182,781 adults with serious mental illness and children with serious emotional disturbance**
- Estimated 5.2% of all U.S. adults with serious mental illness
 - 65.5% received mental health treatment during the year
 - 6.5% Female / 3.9 % Male
 - Nearly \$1.2 billion state expenditure

- **64,166 drug and alcohol admissions**
 - 68.13% White / 31.87% BIPOC or Other

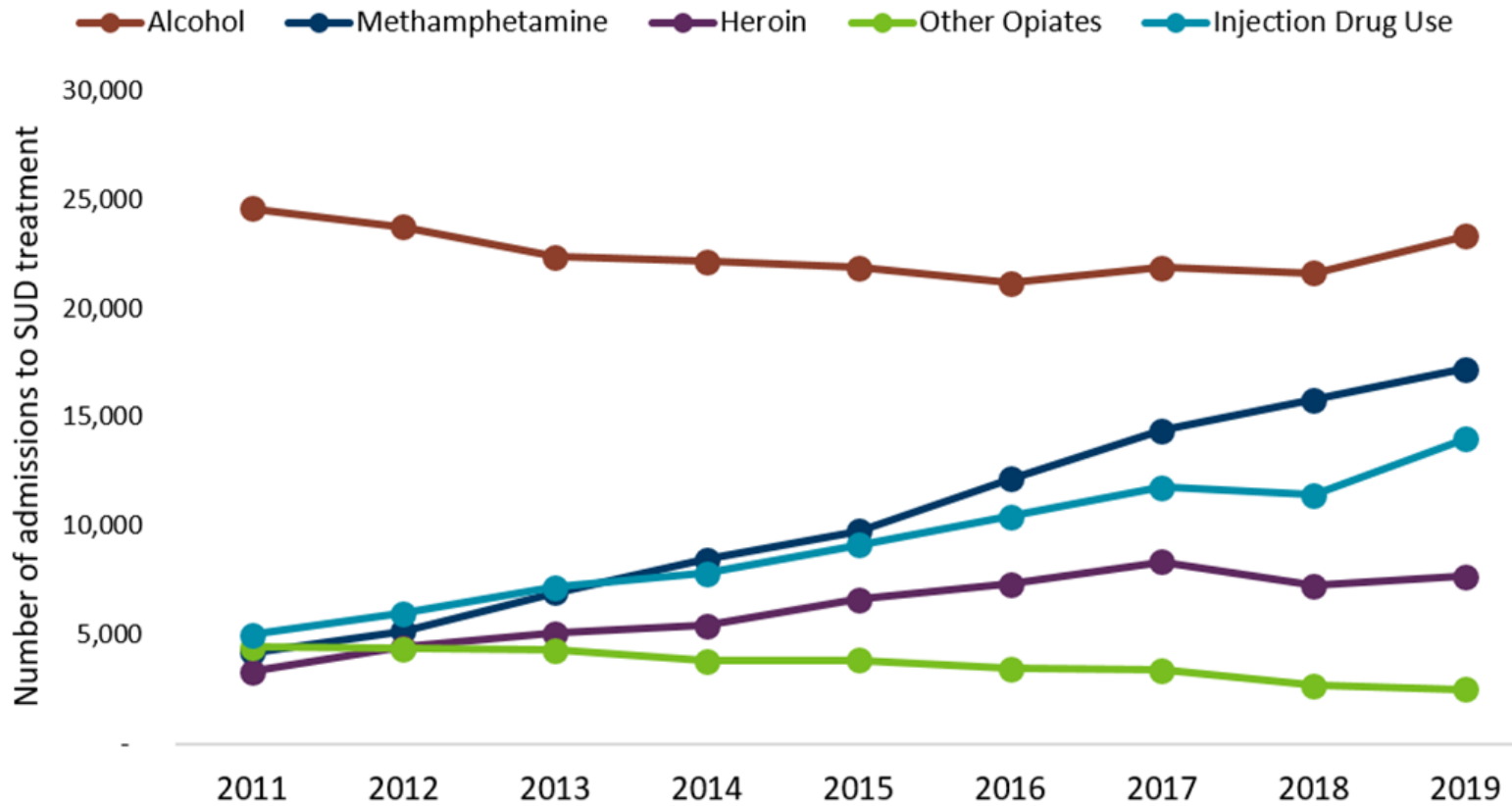


- **Primary substance used at admission:**
 - 38.11% alcohol
 - 27.33% methamphetamine
 - 34.56% injectable drugs, heroin, and other opiates

Sources:

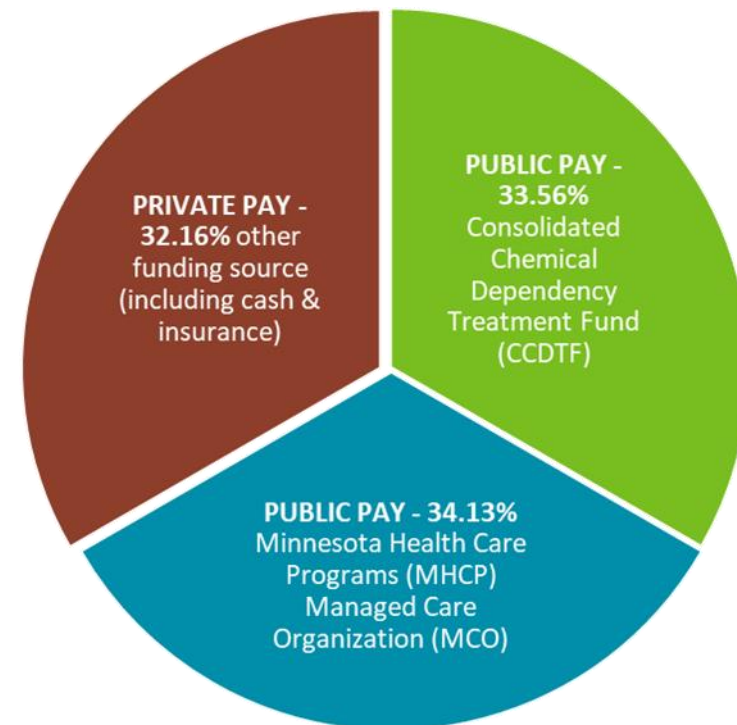
- Substance Abuse and Mental Health Services Administration (SAMHSA);
- Drug and Alcohol Abuse Normative Evaluation System (DAANES)

Alcohol remains the primary substance used at admission to substance use disorder treatment for adults in Minnesota. In 2019, methamphetamine was the second leading substance used at admission to treatment.

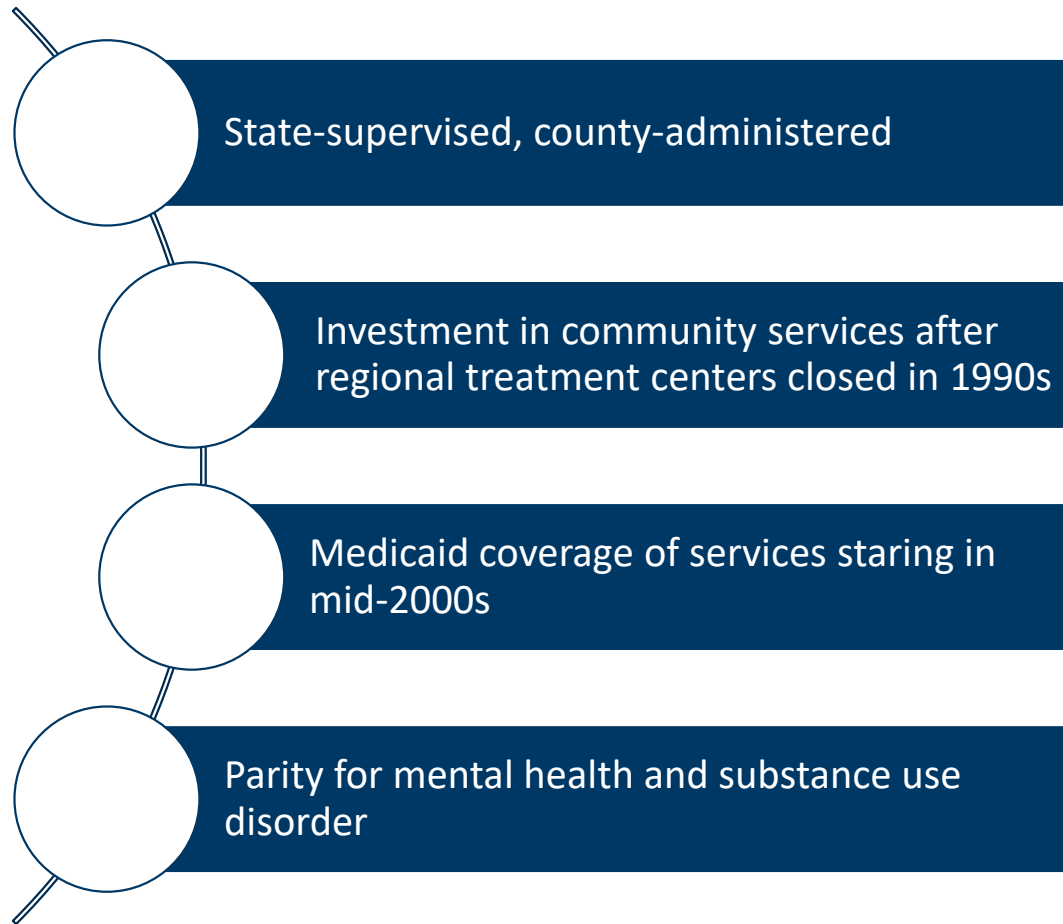


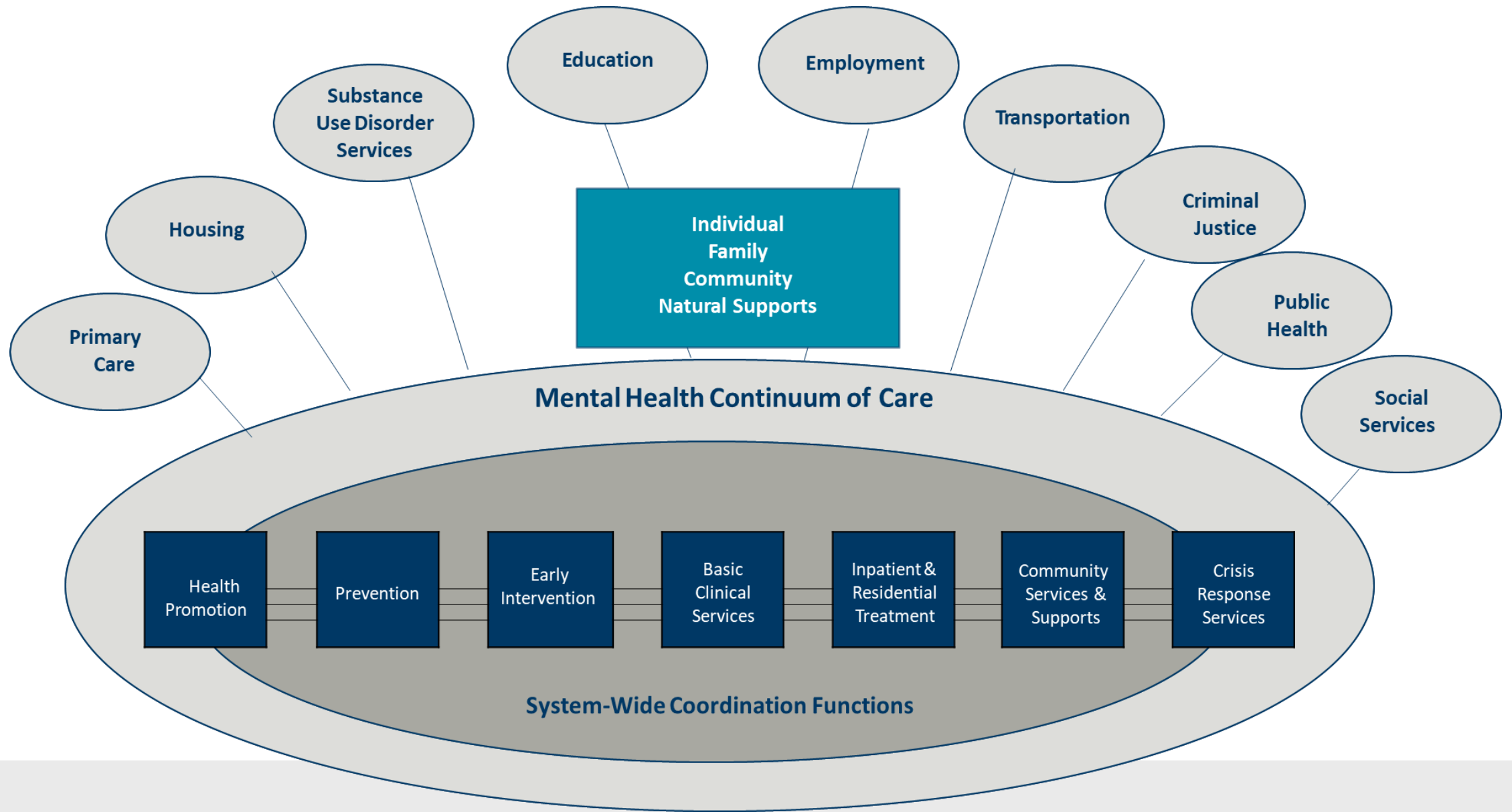
Prevalence in 2019

- Seven out of 10 people receiving SUD treatment in Minnesota have their services paid for through public dollars (DAANES 2019)



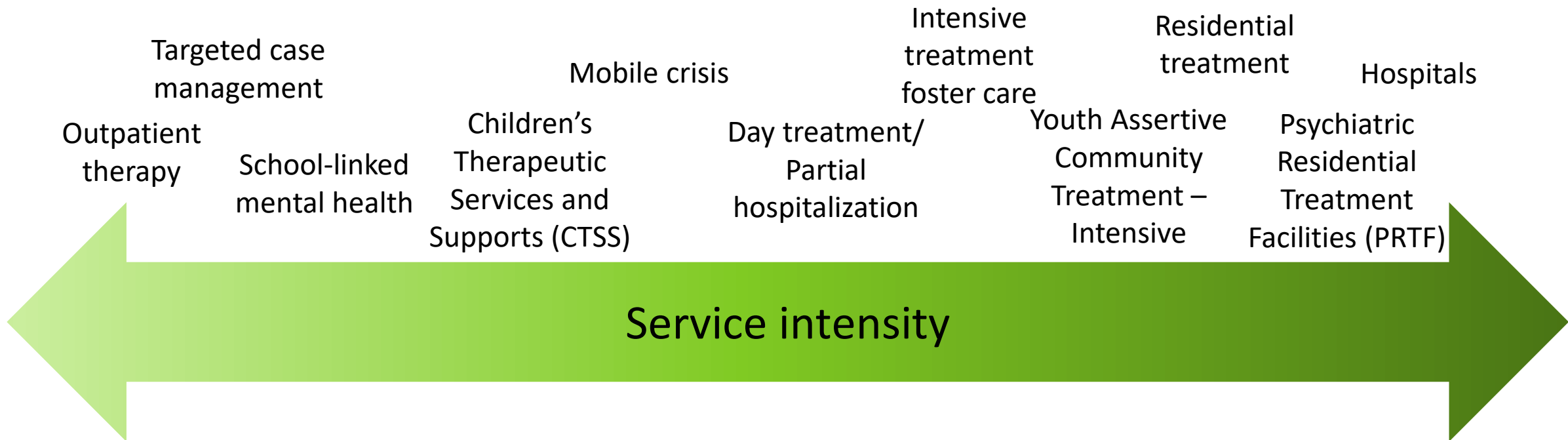
Historical context





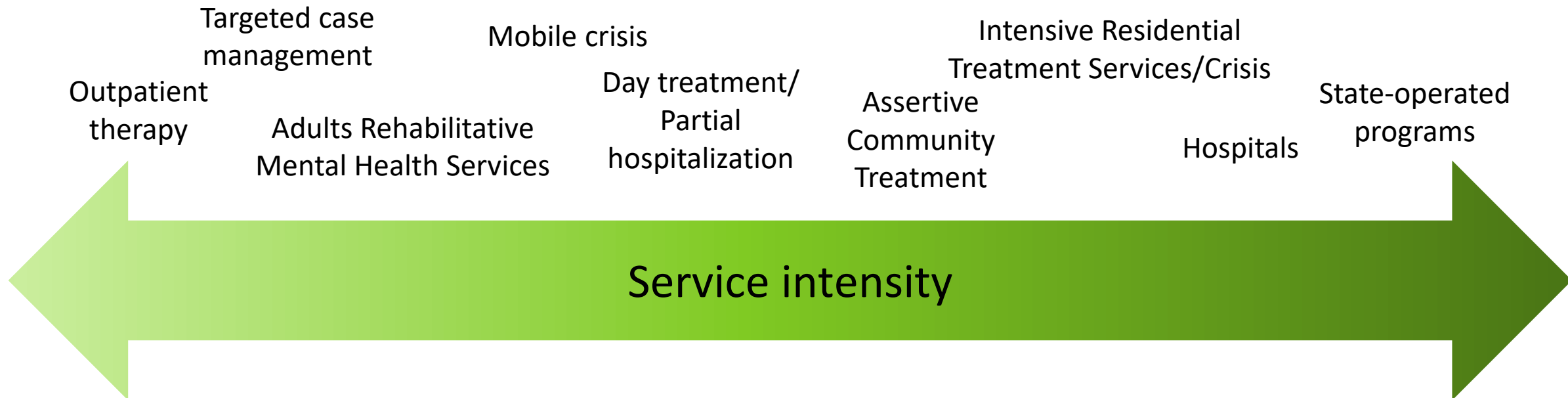
Minnesota's continuum of children's mental health services

Children's mental health continuum of services



Minnesota's continuum of adult mental health services

Adult mental health continuum of services



Minnesota's continuum of substance use disorder treatment

Continuum of Services: substance use disorder treatment

- Outpatient
- Residential (Low, medium, high, committed complex)
- Withdrawal management/detox
- Opioid Treatment Program
- Integration of Substance Use Disorder and Mental Health
- Tobacco prevention and compliance
- Problem gambling prevention and treatment
- Peer recovery support services
- Hospital

Shift to health care model

- Behavioral Health Fund

Grants

Medicaid

Private insurance (parity)



Community supports

Supportive Housing / Housing Stabilization Services

Targeted Case Management

Waivers

Personal Care Assistance / Community First Services and Supports

Behavioral Health Homes

System transformation

- Recovery-oriented levels of care
- Certified Community Behavioral Health Clinic (CCBHC) Model
- 1115 Substance Use Disorder System Reform Demonstration
- Telemedicine and Telehealth



Coordination with other systems

Housing

Employment

Criminal
Justice

K-12
Education

Colleges/
Universities

Health Care

Public Health

Housing
Agencies and
Resources

Communities

People We
Serve

Crisis services

Opioid crisis

Inequitable access among BIPOC (Black, Indigenous and People Of Color) communities

Culturally responsive services

Workforce shortages

Unique challenges posed by pandemic

Uniform Service Standards

Community-based behavioral health rates

Questions?



Thank You!

- **Paul Fleissner**

- Paul.Fleissner@state.mn.us

- 651-964-5264

- **Neerja Singh**

- Neerja.Singh@state.mn.us

- 651-431-2246