

Representative Peter Fischer, Chair
Behavioral Health Subdivision
MN House of Representatives
February 23, 2022

Chair Fisher and Members of the Behavioral Health Policy Committee,

On behalf of Sanford Health, I am writing to convey our support for HF 3215, and urge this committee to pass this important legislation, which will provide emergency funding for mental health workforce relief using federal relief funding support.

Sanford Health's Behavioral Health programs serves patients across the largely rural communities of Western Minnesota, with our major behavioral health facilities based in Thief River Falls and Bemidji. Our program in Thief River Falls includes both inpatient and outpatient mental health services, along with an Intensive Residential Treatment Services (IRTS) program, which can care for up to 15 adults at a time, who on average stay for 90 days in the program. Our Pathfinders Children's Treatment Center in Thief River Falls also specializes in pediatric psychiatry and psychology. Our program at Bemidji also provides both inpatient and outpatient mental health services, and has a program to provide Medication Assisted Therapy in a clinical setting to help those working toward recovery from opioid use disorder. Bemidji also provides IRTS and Residential Crisis Stabilization Services at the Sanford Health PrimeWest Residential Support Center, along with establishing a Mobile Crisis Unit. Outside of Thief River Falls and Bemidji, we have seen major demand growth for mental health services across our entire footprint, which extends from Baudette and Thief River Falls down to Worthington and Luverne.

In addition to our existing facilities, we have also broken ground on a new Behavioral Health Center in Bemidji, scheduled to open in the fall of 2022. This facility, funded in partnership between the state of Minnesota, Beltrami County, and the Sanford Foundation, will be approximately 12,000 square feet and include psychiatric inpatient rooms, along with Northwest Minnesota's first EmPATH (Emergency Psychiatric Assessment Treatment and Healing) unit. This unit will provide a calm setting when patients who are experiencing a mental health emergency. This unit will provide individually tailored care for patients from nurses, psychiatrists, psychotherapists, licensed alcohol and drug counselors, and skills-based service providers, along with providing culturally responsive care that reflects our unique geographic placement near the Red Lake, White Earth, and Leech Lake Nations.

We have seen major growth in the demand for mental health services in our communities of all kinds. Unfortunately, the workforce to meet this demand has not kept pace. According to the US Department of Health and Human Services, Minnesota is currently only meeting 33.5% of the need for mental health care services. In calendar years 2021 and 2022, our state's community mental and chemical health program struggle to provide services under the ongoing pandemic and the extreme workforce crisis. These have compounded pre-pandemic sustainability issues, including workforce shortages, reimbursement rates that do not meet the actual cost of services, and the growth in reporting and regulatory administrative requirements. Facilities across the state have had to close programs, services, and locations/access points. Programs like these are necessary and prevent patients from needing to access services at places like Emergency

Departments (EDs) which are not always the right location to get appropriate mental health and chemical health care. In many rural communities, there is no backup for community mental health program, and hospitals and EDs will be the only source of care for these patients. The closure of these programs causes a ripple effect that will affect all health care in a community. These programs are vital, and need help in attracting the staff that our communities need.

Please support investment of this one-time ARPA Immediate relief funding to sustain access to current community mental and chemical health services. This support will allow programs across the state to advance intermediate and longer-term strategies, including:

- Streamlined, and reduced, reporting and regulatory burdens, which will allow providers to focus on direct care delivery and not reporting requirements;
- Rate reform on MA rates for mental and chemical health programs. We support the DHS study the Legislature passed in 2021. We strongly encourage DHS to first analyze community mental health.

Sanford Health urgently asks the Committee to increase resource investments into our community-based mental and chemical health care infrastructure by passing H.F. 3215 to for this emergency bridge funding to sustain access to our current services and community infrastructure. If we continue to let our community-based care infrastructure crumble, there will be nowhere for clients to be discharged back to or preventive care, treating illness before it requires inpatient hospital care.

Thank you for considering our request.

Sincerely

Molly M. Carmody, JD
Senior Legislative Affairs Specialist- Minnesota
Sanford Health