



TO: SEN. JOHN HOFFMAN AND REP. MOHAMUD NOOR

FROM: BRIAN ZIRBES, MARRCH EXECUTIVE DIRECTOR

SUBJECT: FEEDBACK ON SF 2934

DATE: MAY 3RD, 2023

Chairs Hoffman and Noor--

The Minnesota Association of Resources for Recovery and Chemical Health (MARRCH) is a professional association of addiction treatment professionals and organizations striving to raise awareness about addiction and the power of recovery. We represent more than 150 agencies/organizations and thousands of individuals (Licensed Alcohol and Drug Counselors, students, other behavioral health professionals) with members in every region of Minnesota. As a collective body, MARRCH works to educate, support and guide individuals and agencies while speaking with a unified voice in public policy venues. We appreciate the opportunity to provide timely feedback for this Conference Committee.

The MARRCH Pathways to Recovery bill was developed with input from current/previous consumers of services as well as from our membership. The MARRCH provisions needing consideration for inclusion (HF 1486-Frederick/SF 1862–Abeler) are listed below. These provisions have already passed off the House floor and are generally seen as non-controversial changes to policies:

- Allow former students to continue to practice during the 90-day window between the end of their practicum hours and issuance of their license, provided they are paid by their employer, supervised by an LADC supervisor and continue working at the same site.

- Update the mandated HIV training program for staff.
- Allow facilities that meet supervised living facilities (SLF) Class A licensure standards to provide withdrawal management programs (currently, facilities have to meet SLF Class B licensure standards created for non-ambulatory patients).
- Allow documentation of significant events within 24 hours rather than on the day of the event.

The MARRCH provisions needing consideration for inclusion (From HF 2628-Frederick/SF 2499–Abeler) include:

- Waive reissue fees for critical identity documents that often get lost during active addiction.
- Provide reasonable flexibility in treatment hour requirements based on patient circumstances.
- Require DHS to provide existing industry data to treatment providers in a usable format.
- Establish a workgroup with DHS to ease patient transition from treatment to recovery by allowing for simplified access to support services when leaving treatment.

A provision in the Health and Human Services conference committee would implement an 8% rate increase for community based mental health and substance use disorder (SUD) services. Such an increase would provide financial stability for these programs while we await the new rate methodology in coming years. We ask this committee to consider a rate increase for SUD services if the HHS conference committee is not able to carry it. We are hopeful that a rate increase, and the remaining items delineated above can be adopted in conference.

MARRCH Support for items in the Governor’s Budget:

- All policies and resources supporting children’s prevention e.g. behavioral health school-linked grants and treatment e.g. children’s residential services. Our system is not structured to support our youth and young adults.
- All policies and resources supporting and combatting the opioid epidemic including overdose prevention, bad batch alert systems and harm reduction methods.

- All culturally responsive policies and investments. We support the traditional healing methods proposed and encourage consideration of other culturally responsive methods of service. Minnesota should not be one of the leading states in disparities. Furthermore, please ensure that dedicated funds for these services are not canceled to the general fund. If DHS is not able to award all of the funds to culturally specific groups; please allow for a second tier of grants to be considered so that all funds can be used to correct disparities in Minnesota.
- The progress of moving American Medicine of Addiction Science (ASAM) standards into statute is widely supported. We encourage in the future further refining of statute to remove extraneous language that is not ASAM related to be removed to decrease administrative burdens on the field.

MARRCH members participated in the Sober Home Recommendations Workgroup. To this point we have the understanding that the final recommendations to the Legislature have not been provided yet. There is overlap between SUD providers and sober homes. We have concerns that policy is being advanced without this crucial information.

Thank you for the work you do on behalf of our fellow Minnesotans. We are committed to building an effective system of prevention, treatment, and recovery for substance use disorders in our great state.

Respectfully submitted,

Brian Zirbes MA, LADC, LPCC

Executive Director–MARRCH