



March 31, 2022

Senator Melissa Wiklund
Minnesota Senate
2227 Minnesota Senate Bldg.
St. Paul, MN 55155

Representative Jennifer Schultz
Minnesota House of Representatives
473 State Office Building
St. Paul, MN 55155

RE: SF4013 / HF 4307 Governor's Supplemental Budget proposal

Dear Senator Wiklund and Representative Schultz,

We write today on behalf of Hennepin County, Hennepin Healthcare System, NorthPoint Health and Wellness Center, and Hennepin Health, in support of many items included in the Governor's supplemental budget proposal SF4013/HF4307.

Mental Health Adult Day Treatment rate increase (97.21-97.25) – Hennepin Healthcare provides outpatient mental health adult day treatment (ADT). ADT rates have been the same since 2004. Designed as a group process, COVID-19 has made meeting in groups unsafe, leading to lower enrollment. ADT's lower enrollment and low rates have made keeping mental health staff more difficult as we compete with providers who offer more profitable services and salaries, and rehiring for a program that is in limbo is not an option. We must invest now in this service or it will not survive.

Expanding Mobile Transition Units and Person-Centered Discharge Planning (97.7-97.19) – We are supportive of resources to ensure patients are discharged to appropriate settings. In our health system, delayed discharges have doubled over the last year from 20 delayed discharges per day to 40 delayed discharges – these are patients who are no longer in need of a hospital level of care, but may not have an appropriate place to transition. The mobile transition units will focus on adults and children and assist them in transitioning to a lower level of care, including Psychiatric Residential Treatment Facilities (PRTFs), group homes, or foster homes, and community-based services.

Emerging Mood Disorder Grant Program (43.20-43.23) As one of only three First Episode Psychosis providers in Minnesota, we support including emerging mood disorders *with psychosis*. Expanding into any mood disorder could be too large, but adding affective psychotic disorders is very possible. We encourage DHS to engage stakeholders in the development of this option and what model is used.

Expanding support for Psychiatric Residential Treatment Facilities (PRTF) (117.8 – 117.21) and Inpatient Psychiatric and Psychiatric Residential Treatment Facilities (116.28-117.7) Youth in need of mental health care have entered our emergency department in record numbers in recent months. We support investments in appropriate inpatient, residential and community services that will provide the care a child and their family need, and will prevent boarding in Emergency Departments when there is nowhere else for them to go.

Doula enrollment (99.8-99.16) We are in support of doula agencies and individual doulas enrolling with DHS as a provider and eliminating the requirement for licensed supervision. Doulas improve outcomes for moms and babies, and barriers should be removed to increase diversity and the ability of doulas to provide care.



Workforce Incentive Grants (104.22-105.4) to pay retention and incentive payments, loan and tuition and child care to our front line workers will be incredibly important to supporting behavioral health, disability, housing and older adult support workers.

Expanded coverage for Minnesota Health Care Programs (98.7-99.6 and 99.17-99.32) We support expanding Medical Assistance eligibility for youth formerly in foster care and providing coverage under the MinnesotaCare program to undocumented children.

Medical Assistance benefit and program enhancements for substance use disorder (51.24-52.28) housing stabilization services (47.23-49.44) and COVID-19 vaccination (115.29-116.2) Substance use disorder (SUD), housing instability and COVID-19 are all health crises that have emerged or been exacerbated during the past two years and require urgent responses. Facilitating direct access to SUD treatment services, expanding support for housing stabilization and transition services and improving COVID-19 vaccination efforts are timely and effective interventions to support Minnesotans enrolled in Minnesota Health Care Programs.

Investments in infrastructure supporting MNsure (119.10-119.22) MNsure is an essential access point for Minnesotans purchasing health care coverage. Investing in the MNsure platform helps to reduce administrative complexities and modernizes health care infrastructure to eliminate access barriers for Minnesotans and to mitigate administrative burden for State and county staff.

If we may provide any additional information to you on the above provisions or any other topics, please contact Kaade Wallace, Kaade.wallace@hennepin.us, 612-559-0447; or Susie Emmert susie.emmert@hcmcd.org, 651-278-5422.

Sincerely,

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