

Monitoring, reviewing, and evaluating the allocation and adequacy of mental health and substance abuse services in North Dakota

Focusing on wellness and recovery that is consumer and family driven For more information: https://www.hhs.nd.gov/bhpc

What is Behavioral Health?

- Refers to mental health and substance use disorders, life stressors and crises, and stress-related physical symptoms. Behavioral health care refers to the prevention, diagnosis and treatment of those conditions. (https://www.ama-assn.org/delivering-care/public-health/what-behavioral-health)
 - Behavioral health and mental health are often used in the same way, but mental health is really a piece of the overall picture of behavioral health

2025 Behavioral Health Planning Council Legislative Priorities

- Full funding of Health and Human Services Behavioral Health agency priorities to include:
 - State hospital replacement funding
 - Expanded school-based behavioral health services
 - o Collaboration with housing initiatives to integrate behavioral health systems with housing plans
- Identified Gaps in Statewide Minimum Service Expectations
 - Crisis Services limitations on the distance mobile crisis units travel mean the majority of the state does not have access
 - Local care options investments in local options for care will help ease the overcrowding at the state hospital
 - Residential and Partial Hospitalization Programs
 - Expansion of geriatric psychiatric facilities
 - Community-based residential programs for court-ordered treatment
 - Increase capacity for medical detoxification in underserved areas
 - Programs for underserved populations
 - Youth, pregnant/parenting individuals, and rural populations
 - Inclusion of culturally responsive behavioral health traditional healing services in state funded recovery
 - Supported housing
 - Access and equity in recovery housing programs
 - Integration of behavioral health services with ongoing housing plan
- IMD Waiver The Council continues to oppose the IMD Waiver, but support other options to reach the same goals
 - State plan changes to increase days of care
 - o SUD voucher set aside for IMDs
 - Increased flexibility to address gaps
 - Increased coordination between providers and the state
 - Establish rigorous monitoring framework

To be in contact with leadership of the Behavioral Health Planning Council to respond to your questions or for requests for further information, email the Council's contracted facilitator, Janell Regimbal at ianell@insighttosolutions.com.