

Chairman Nelson and members of the committee,

My name is Emma Quinn, and I am a constituent of District 46 in Fargo. I am testifying today in support of HB 1012 regarding fully funding the Behavioral Health Division. I am a consumer of behavioral health services in North Dakota and live with a lifelong serious mental illness. I have worked in the behavioral health field for the past 6 years. I have worked as a peer support specialist and care coordinator for Free Through Recovery and Community Connect. Currently, I work as the Business Development Manager for ShareHouse where I connect with behavioral health providers across the state of North Dakota with one main question "How can I help?". I hold consumer positions on the North Dakota Behavioral Health Planning Council and the Medicaid Medical Advisory Committee. I strongly believe that everyone should have access to good affordable behavioral health services no matter where you live. I have spent the last 6 years studying and advocating for better behavioral health services in North Dakota, and the views I express here today are of my own and not on behalf of an employer or committee.

We have a great team at the state lead by Pam Sagness and the programs implemented by the state have changed countless lives. By investing in behavioral health, we are making a difference in every single North Dakotan's life. Mental health and addiction does not discriminate, and everyone knows someone that has struggled. Investing in behavioral health is more than just helping people get their mental health back on track or helping people find recovery. It is about investing in families, it's about parents not having to bury their children due to overdoses and suicides, and most importantly it's about lifting people up so that they can one day lift others up as well.

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We have a lot of things going for us here in North Dakota but there is still plenty of work to be done. The one thing I constantly hear about when talking to other providers is the lack of workforce, so providers are unable to expand services. Right now, companies are just stealing employees from each other. We simply do not have enough behavioral health professionals coming into the workforce to keep up with the demand.

The number of Licensed Addiction Professionals that are entering the workforce is dwindling and this is alarming. Peer supports are a wonderful way to boost the workforce, however they do not replace clinicians and as a state we need to be doing more to invest in our own citizens so that way they want to come work in the behavioral health field and stay in North Dakota. This is why the Behavioral Health Workforce Administrator is vital to growing our workforce. This position is advancing Aim 7 of North Dakota's Behavioral Health strategic plan. Which if you are unfamiliar, Aim 7 has the goal of engaging in targeted efforts to recruit and retain a qualified and competent behavioral health workforce. Private providers are often looking to the state for guidance and without proper staffing across the division the quality of services will be affected.

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Currently the SUD voucher only pays for treatment but not medical care. I did not realize what a barrier this was for people receiving care until my office was placed directly next to ShareHouse’s admission department.

If we want to be the healthiest state in the nation, then it is critical that we fund people's medical care when they are in a residential facility. People in active addiction are not prioritizing their physical health and are often delaying recovery in order to get their physical health care under control so that they can be cleared to come to treatment. It is hard enough to make a phone call and ask for help let alone actually show up and do the work, please do not make it harder for people to get help.

Lastly, we need to be investing in recovery housing. Treatment for both mental health and substance use disorder are just one piece to recovery. People cannot focus on getting healthy if they are worried about where they will live and how they will survive. Stable supportive housing is one of the fundamental pieces to the recovery puzzle and there are many barriers that play a part in why people can't find housing. Currently the Recovery Housing Assistance Program (RHAP) has a waitlist of providers wanting to help but there is not enough money in the program to help ensure people find housing after treatment.

I hope my testimony has helped highlight the wonderful programs that we already have in place and shed light on some of the holes that still exist in our system. I have always looked at our state's behavioral health as an echo system where everyone plays a part and where every part is equally important. We must build a new state hospital as well as investing in community based programs, it is the only way we will be able to get a handle on this behavioral health crisis. I ask that you fully fund our behavioral health division and give them room to grow so that every North Dakotan can have the opportunity to be happy and healthy.

Thank you for your time and I am prepared to answer any questions that you may have.

-Emma Quinn