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01/21/2025

Chairperson Ruby and Members of the Human Services Committee,

Re: Support for HB1337 – Funding Mental Health and Substance Use Disorder Treatment in County Jails

My name is Jana Theisen and I am a resident of Grand Forks, North Dakota. I am a Licensed Clinical Addiction Counselor and Licensed Master Social Worker through the state of North Dakota and have served Fargo, Grand Forks, and surrounding rural areas since 2009. I am writing to express my support for HB 1337. I work as an Addiction Counselor at Agassiz Associates, PLLC in Grand Forks and since 2018 our agency has worked determinedly with staff from Grand Forks Public Health and the Grand Forks County Correctional Center to provide essential behavioral health services to individuals who are incarcerated. In 2021, Walsh County Health District, Walsh County Sheriff's Office and the Walsh County Correctional Center sought out these vital services for inmates in their county jail as well. I am proud to have been a part of establishing these programs by completing substance use disorder assessments, individual sessions, and group sessions to inmates at both correctional centers. Each day, we watch these programs continue and grow and see the benefits.

Upon incarceration, individuals lose access to essential health benefits such as Medicaid, Medicare, Veteran Benefits, and in most cases private insurance due to loss of employment. This leaves our jails unable to provide critical mental health and substance use disorder treatment. Without these funds and access to services, the risk for release and reincarceration is great and results in a revolving door in the jail instead of the rehabilitation these individuals need.

HB 1337 would fill this funding gap, allowing providers to continue to serve individuals while incarcerated and improve rates of recovery, public safety, community health and reduce recidivism. The Substance Use Disorder Voucher through the Behavioral Health Division has been beneficial but there are many challenges inmates face while attempting to access the voucher and the inability to provide group telehealth programming limits beneficial services. In addition, there is no such voucher available for mental health treatment, which plays a critical role in recovery from addiction as rates for dual diagnosis (mental health and substance use disorders both being diagnosed in an individual) are around 56%.

In my work as an Addiction Counselor, I see how incarceration and a lack of access to services can perpetuate a cycle of incarceration by exacerbating trauma and mental health concerns. Often, individuals with dual disorders "self-medicate" by using substances and are incarcerated for their use or behaviors related to their addiction. Jails often have restrictions on medications approved for treatment of mental health and the therapy services will serve as a beneficial addition. The work that I've done with inmates has allowed me to recommend services and, in some cases, assist in coordinating admission into residential treatment immediately upon release from incarceration. In addition, I've provided education on topics such as relapse prevention, coping skills, addiction and much more, and assist them with identifying resources and supports upon release. Many inmates express concern regarding release, for example being released around 5:00AM, sometimes on a weekend when there are limited agencies available to provide support. Offering services to incarcerated individuals inside the jail allows for safety and relapse prevention planning as well allows providers to establish relationships so there is greater likelihood of continued care and follow-up upon release.

I strongly urge the committee to support HB 1337 and recommend its passage. The bill is a meaningful step toward improving outcomes for individuals and communities.

Thank you for your time and consideration in this matter. Please feel free to contact me at <u>jtheisen@agassizassociates.com</u> or (701) 331-9750 with additional questions.

Sincerely,

Jana Theisen