

**Testimony on Behavioral Health Funding for Nursing Facilities and Basic Care**  
**Senate Appropriations Human Resources Division**  
**March 26, 2025**  
**House Bill 1012**

Chairman Dever and members of the Committee, my name is Nikki Wegner, President of the North Dakota Long Term Care Association (NDLTCA). I represent 182 nursing, basic care, and assisted living facilities. Thank you for the opportunity to testify today.

NDLTCA respectfully requests support for the amendment added to HB 1012 by the House, allocating \$2 million to implement a specialized behavioral health program for individuals with complex behavioral symptoms in skilled nursing and basic care settings.

Caring for individuals with complex behavioral health needs has traditionally fallen outside the scope of long term care facilities; however, the demand for such care continues to grow. What's needed is a model that provides timely access to specialized support while building the capacity of long term care staff to manage these challenges effectively.

Following my remarks, Behavioral Health Solutions will outline a proposed approach that offers essential behavioral health support and on-site staff training to help meet this need across nursing and basic care settings.

### **Background**

During the interim, in partnership with the North Dakota Department of Health and Human Services (DHHS) and the North Dakota Hospital Association, a broad stakeholder group was convened to address ongoing challenges in caring for individuals with complex behavioral health needs who also qualify for skilled nursing care.

Participants included representatives from DHHS—Aging Services, Long Term Care Medicaid, the State Long Term Care Ombudsman, the State Hospital, and the Human Service Centers—along with the ND Hospital Association, Sanford Health, Altru, Prairie St. John's, Rural Psychiatry Associates, the Alzheimer's Association, the Center for Rural Health, the ND Medical Association, Quality Health Associates, the Department of Corrections and Rehabilitation, and others.

The goal of the working group was to identify system-wide barriers in serving individuals with complex behavioral health needs, particularly the lack of appropriate settings and infrastructure which has led to persistent bottlenecks across care systems. Through this process, two distinct populations were identified. One includes justice-involved individuals who require skilled nursing care. While some existing facilities may be able to serve some in this group with the right support, additional specialized settings are necessary to safely care for those with a history of sexual or violent offenses.

The second population—and focus of the proposed program—includes individuals with challenging behavioral symptoms, often alongside dementia or physical disabilities requiring long term care. Behaviors such as aggression, agitation, or delusions can be difficult to manage, and

many providers lack the confidence to admit or retain these individuals due to the absence of reliable crisis response support. As a result, these individuals often end up in emergency departments, leading to prolonged hospital stays, increased costs, and care environments that are not equipped to meet their needs.

Most skilled nursing and basic care facilities lack the necessary clinical resources, programming, and training to serve this population. The proposed solution embeds behavioral health specialists in long term care settings to provide support, train staff, and build capacity ensuring individuals receive appropriate care while equipping providers to safely and confidently serve this growing population. Behavioral Health Solutions will collaborate with existing providers to expand in-state capacity and promote long-term sustainability.

To expand on the specifics, I now introduce **Dr. Kristina Kovacs** who will share data from **Behavioral Health Solutions** and outline the significant return on investment for implementing targeted behavioral health services in long term care facilities.

This \$2 million funding request represents an opportunity to strengthen the continuum of care, reduce costs, enhance care, and prevent unnecessary hospitalizations.

Thank you for your time, and I welcome any questions.

Nikki Wegner MS, OTR/L, President  
North Dakota Long Term Care Association  
1900 North 11<sup>th</sup> Street, Bismarck, ND 58501  
(701) 222-0660; [nikki@ndltca.org](mailto:nikki@ndltca.org)