

House Bill No. 1468

January 28, 2025

Link: <https://legiscan.com/ND/text/HB1468/id/3066310>

**St. Alexius Medical Center
Bismarck, ND**

Organizational Representative:

Sister Nancy Miller - Director of Mission Integration

Situation:

As the Director of Mission Integration at St. Alexius Medical Center, I am given the responsibility to lead our hospital's Community Health Needs Assessment (CHNA). As both the Director of Mission Integration and as a Benedictine Sister of Annunciation Monastery, leading this project fulfills my passion and my commitment to both St. Alexius and to the Benedictine values of hospitality, respect and compassion that I aspire to live. The data collected during the CHNA strongly indicates the need for comprehensive behavioral health services in Bismarck/Mandan and the entire West/Central region that St. Alexius serves. There is an indicated need for adult and adolescent inpatient/acute behavioral health services. This identified need has to be addressed quickly yet with great care and planning that reflects those values of hospitality, respect and compassion. In other words - Let all be received as Christ.

Background:

Information gathered by multiple sources including the Center of Rural Health at UND and NDSU Center for Social Research during both our last and current CHNA continues to identify behavioral health as the number one community need in our service area. North Dakota youth report higher rates of mental health conditions compared to five years ago, with 23 percent of children and adolescents experiencing one or more mental health conditions.³ More than a third, or 35 percent, of high school youth reported feeling sad or hopeless almost every day for two weeks or more in the last year.⁴ In 2023, 18 percent of high school students seriously considered suicide in the last year.⁴ Certain groups of people report even higher rates of mental health outcomes, a result of years of added barriers that make it harder to access support systems and treatment. Youth of color and LGBTQ+ youth report higher rates of feeling sad or hopeless and seriously considering suicide.^{4,5} The teen suicide death rate in North Dakota is 13.7 per 100,000 teens.(Kids Count DataCenter) In the last decade with the population of ND growing exponentially especially in the Western and Central Regions, these needs only continue to increase.

Finally over the past 140 years, the Benedictine Sisters have always kept a close eye on the emerging health care needs of this area. Providing education was our primary reason for coming to Dakota Territory in 1878. Soon it became apparent that healthcare was needed and on May 6, 1885 St. Alexius opened its doors to those in need. This effort was certainly a work graced by God with hard work from the sisters. But it was also a collaborative effort that could not have happened without cooperation of the wider civic community. Today is no different. We ask for your care, concern and support. Health care needs continue especially in the area of Behavioral Health. This is our next service, in a long line of services, that the Sisters feel needs to be enhanced to best serve not only our Catholic Community but for all those who seek care at St Alexius. Together we can make a difference in the lives of so many people. Thank you.

Organizational Representative:

Raumi Kudrna, MSN, RN - Chief Nurse Executive, Bismarck Market

Assessment:

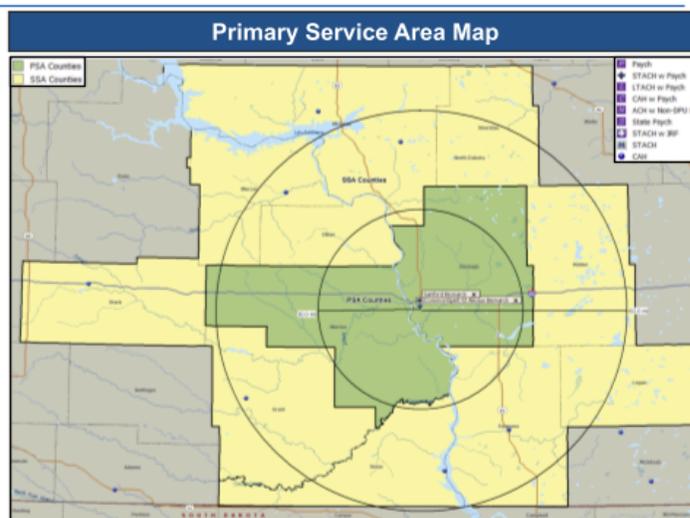
In an effort to respond to our community’s needs, St. Alexius partnered with LifePoint Health, a national Behavioral Health Provider, to gather data on the specific needs of the region we serve. The catchment area used in the assessment focused primarily on the central third of ND extending north to south from the Canadian border to SD (outlined below). This data was presented last summer to the Interim Human Services Committee. The data is based on the Treatment Advocacy Centers National Need Methodology and assumes an average need of 40 beds per 100,000 residents. This analysis identifies an unmet bed need of 37 for Central ND.

St Alexius is poised for growth in this area of identified need. We currently provide full spectrum behavioral health services to both the adult and adolescent patient population. We are on pace to open our new Partial Hospitalization Program (PHP) for day programming within the next 2-3 months. This service will have the capacity to grow to 32 patients served daily. In our current footprint, we have 18 inpatient behavioral health rooms with the availability to build out an additional 30 inpatient beds immediately adjacent to the area we currently occupy. This would bring our total inpatient capacity to 48 single occupancy rooms. Preliminary assessments indicate a need for an 18 adult and 30 adolescent/children split. We are committed to working alongside the State of ND to determine the most appropriate approach for filling these in demand beds.

Bismarck, ND: Behavioral Health Market Overview

PSA Hospitals			
Psych Hospitals within PSA	Type	BH Beds	ADC
CommonSpirit St Alexius Bismarck	STACH w Psych	25	11.9
Sanford Bismarck	STACH w Psych	20	9.7
	Total	45	21.6

PSA Demand	
Population	203,753
Beds per 100K Population	40.0
Beds Needed for Market	82
Existing Beds in Market	45
Unmet Bed Need	37



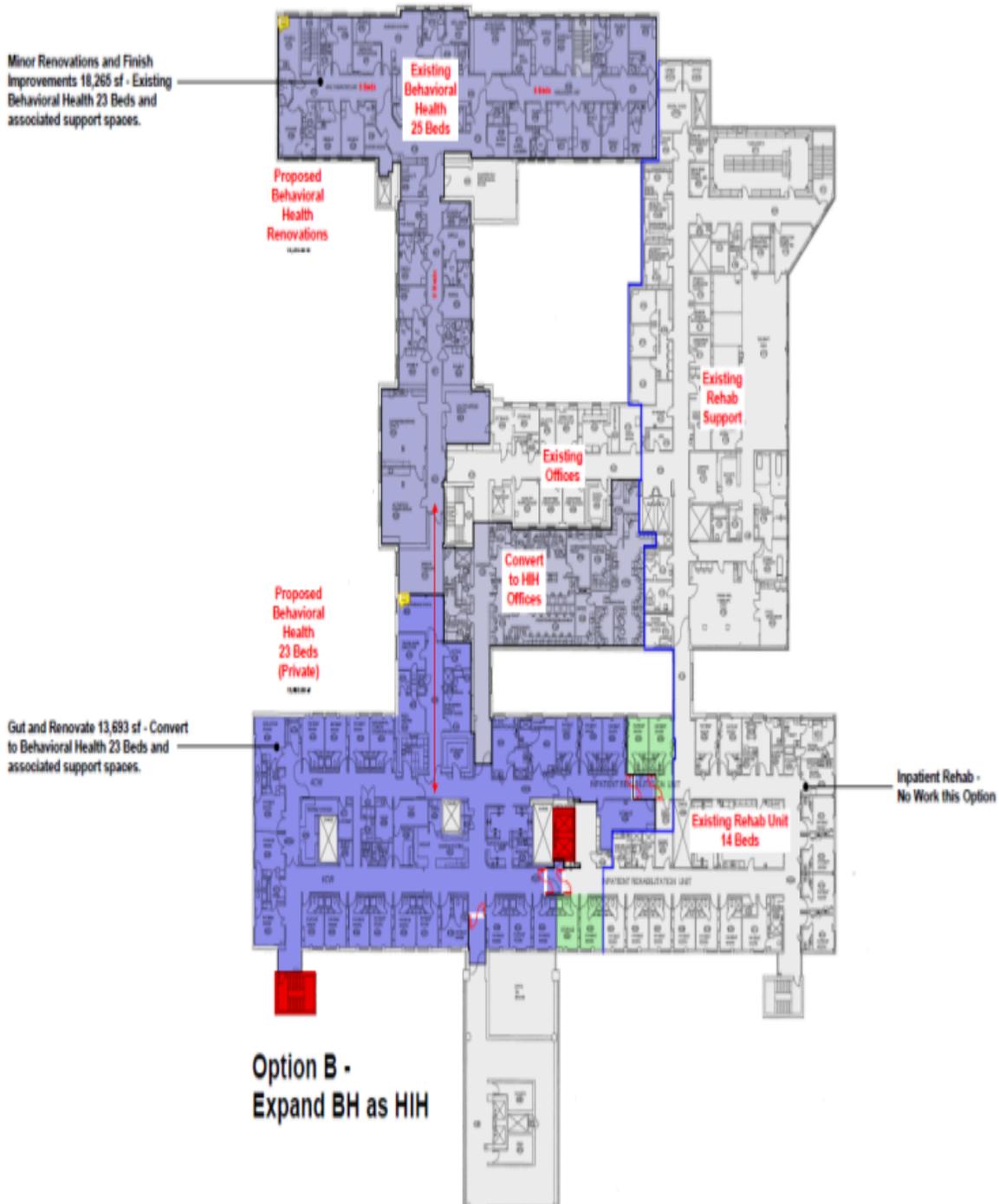
Notes

- The Service Area used to define the market is Morton, Burleigh, and the surrounding counties
- There are currently 45 existing behavioral health beds in the market, including St. Alexius’ 25 beds
- Assuming an average need methodology based on the Treatment Advocacy Center’s National Need Methodology of 40.0 beds per 100,000 population, the PSA has an **unmet bed need of 37 beds**
- St. Alexius’ internal demand, and the unmet bed need in the market, support St. Alexius’ vision for a **48-Bed behavioral health facility**

Recommendation:

In response to the identified need, St. Alexius is seeking \$16M in funding to build out our 4th floor inpatient behavioral health unit to 48 single occupancy rooms (net increase of 30 beds).

Expand BH as HIH



Draft Facility Renovation Estimates

*Preliminary Program and Budget to be confirmed	Convert vacated Peds to expanded BH with private rooms. Upgrade existing BH. HIH license of BH.
Total Duration in Months:	12
Allocated Space (SF):	
Cosmetic	
Minor Renovation	18,265
Major Renovation	13,693
New Construction	
Shelled Construction	
Shell Buildout - Hospital	
Shell Buildout - MOB	
Canopies & Overhangs	
Total Allocated Space	31,958
Budget Categories:	
Planning & Consultants	\$ -
Sitework & Utilities	\$ -
Environmental	\$ -
Testing	\$ -
Demolition (if over \$50,000)	\$ 273,860
Construction	\$ 10,157,175
Contingency	\$ 1,015,718
Design Fees & Reimbursables	\$ 1,218,861
Building & Impact Fees	\$ -
Tenant Buildout	\$ -
Other - [Define]	\$ -
Equipment & Furnishings	\$ 1,100,000
Land	\$ -
I/S & Telecom	\$ 1,022,656
Totals	\$ 14,788,270
Interest	\$ 503,040
Overhead	
Totals	\$ 15,291,310

Areas of Focus:

Workforce & Staffing - St. Alexius has begun the process of building flexible, hybrid job descriptions to build roles that provide care across the continuum, including professional development of our current team members. We will begin recruiting immediately for full time Nursing and Mental Health Therapists. We will leverage our staffing agencies to contract for both International and traveling staff. Operationally, St. Alexius will need to staff for a daily census of 48 to meet the necessary volumes to drive the business plan.

Psychiatrists - Currently, St Alexius employs a Child Psychiatrist and has telemedicine options for Adult and Geri Psych services. We are also currently recruiting for a second Child Psychiatrist and a second Adult Psychiatrist.

Funding - The \$16M requested is intended to fund the capital construction costs. All other start up and operational costs will be assumed by the facility.

Timeline - Once funds are secured, St Alexius would look to begin construction in October 2025. Construction is estimated at approximately 12 months with a goal of being open and operational by September 2026.

All operational planning would be in partnership with the State of ND and other Behavioral Health Partners to ensure a system of care approach for providing Behavioral Health care in Central and Western ND.