



**Essentia Health**

**House Education Committee**

**SB 2244**

**March 12, 2025**

Chairman Heinert, Vice Chairman Schreiber-Beck, and House Education Committee members:

My name is Dr. Stephanie Grondahl. I am a practicing pediatrician and serve as Physician Division Chair at Essentia Health in Fargo. Essentia Health is an integrated health system serving patients in Minnesota, North Dakota, and Wisconsin. Essentia Health combines the strengths and talents of more than 15,500 employees, including more than 2,350 physicians and advanced practitioners, who serve our patients and communities at our 14 hospitals, 80 clinics, six long-term care facilities, six assisted living and independent living facilities, 7 ambulance services, 29 retail pharmacies, and one research institute.

On behalf of Essentia Health, I submit this testimony in opposition to SB 2244, a bill that will negatively impact patient care for vulnerable children. Although the bill primarily relates to parental involvement in a child's education – on which Essentia Health does not take a position – the following language would prevent a physician from providing critical care in an innumerable number of situations:

Page 2, Lines 13-17:

- e. Make and consent to a physical or mental health care decision for the child;
- f. Access and review any health or medical record relating to the child;
- g. Consent in writing before a biometric scan of the child is made, shared, or stored;
- h. Consent in writing before a record of the child's blood or deoxyribonucleic acid is created, stored, or shared, unless authorized pursuant to a court order[.]

The American Academy of Pediatrics publishes guidance for the complexities inherent in treating an adolescent. Varying factors come into play such as the child's maturity level to fully understand medical consent. In most situations, parental consent is not only encouraged but required before proceeding with treatment.

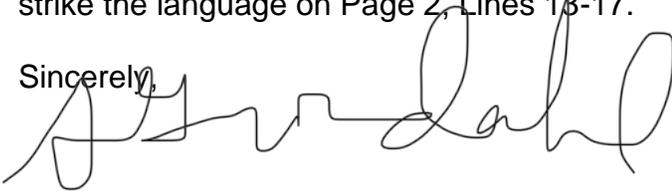
However, adolescents seek treatment for conditions that they would not otherwise seek if disclosure to a parent or guardian was first required. For example, a child suffering sexual or physical abuse by a parent or guardian will seek treatment without notifying a parent or guardian. Under the current language of SB 2244, that child would now need to obtain consent from a parent. In many cases, that parental consent would need to come from the abuser. Likewise, children subject to trafficking or exploitation would be deterred or prevented altogether from seeking critical treatment.

Similarly, mental health is an increasingly prevalent condition many children face today. They often seek treatment for self-harm or general anxiety and depression. Requiring children to

obtain parental consent will undoubtedly deter them from seeking such treatment. In many cases, a child chooses to not disclose their treatment because it can trigger retaliation by a parent who is also diagnosed with a mental health condition. The consequences of such disclosure can result in physical or mental harm to the child. Consequently, SB 2244 would lead to numerous situations where the child refuses to seek treatment altogether, which can lead to exacerbated conditions or suicide.

The intent of the bill as it relates to medical treatment is to ensure decisions are made by a parent or guardian. However, the bill does not contemplate the situation where a child does not have a caring parent or guardian who makes health care decisions with the child's best interest in mind. It further deters a child from seeking mental health treatment during a time of increasingly prevalent mental health conditions. In short, the bill as currently written will lead to untreated medical conditions for our children. Accordingly, I respectfully request the Committee strike the language on Page 2, Lines 13-17.

Sincerely,

A handwritten signature in black ink, appearing to read 'Stephanie Grondahl', written over the word 'Sincerely,'.

**Dr. Stephanie Grondahl**  
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Essentia Health  
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