



*Mental Health Minnesota is the voice of lived mental health experience.*

*We carry that declaration forward as we work to advance mental health and well-being for all, increase access to mental health treatment and services, and provide education, resources and support across Minnesota.*

February 9, 2022

Dear Members of the Senate Committee on Human Services Reform Finance and Policy:

I write today to convey Mental Health Minnesota's opposition to SF2845 – Department of Behavioral Health creation and transferring of duties of a state agency.

First, we are very concerned about pulling behavioral health out of DHS, which manages Medicaid benefits as well as a number of other programs and services utilized by people living with mental illness and/or substance use disorder. Given the important role that Medicaid plays in mental health and substance use disorder care, particularly for those living with serious mental illness, we do not believe that behavioral health services should exist in an agency separate from DHS.

We also believe that creation of a Department of Behavioral Health would create yet another silo of services, further isolating mental health and substance use disorder care from overall health care. It is our position that we need health care to care for the whole person, and separating physical and mental health is simply not reflective of individual reality or the need for a more integrated and collaborative approach to health care.

As an affiliate of Mental Health America, I have discussed this proposal with affiliates in other states, and those that have a greater division between behavioral health and other health care services, including Medicaid, have noted that they believe it discourages an approach to health care and services that address people's needs in the most effective and efficient ways.

We have significant needs in our mental health system of care, and need significant investments in all levels of care, from upstream services that help people stay well in their communities to crisis services and hospitalization. Creation of another department would certainly require dedication of significant financial resources and result in unnecessary duplication at a time when that financial investment could instead be directed to building capacity in our mental health system to meet current and projected needs.

Thank you for your consideration of our concerns.

Sincerely,

Shannah C. Mulvihill, MA, CFRE  
Executive Director