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Members of the Senate Finance Committee:

On behalf of NAMI Minnesota, we are writing to share our comments on the SF 2669. We are grateful for the inclusion of many of the Mental Health Legislative Network's (MHLN) priorities including provisions to:

- Fund first episode bipolar programs
- Fund school-linked mental health
- Prohibit charging for mobile crisis services
- Extend audio-only telehealth coverage
- Increase reimbursement rates for inpatient and outpatient mental health services
- Fund solutions to the crisis of children boarding in emergency rooms, with counties, or in juvenile detention facilities

In a year with many budget concerns, we are pleased to see many provisions that will improve the lives of people with mental illnesses and their families. We also want to share a concern that one provision was left out. For years, families seeking voluntary mental health treatment for their children have been forced to go through the child protection system. It took many years to establish the policy that allows families to now use the "third path" for voluntary treatment, avoiding the arduous and often invasive child protection process. Funding was finally provided through the behavioral health fund to cover these costs, however, the rate set last year was too low.

SF 1561 contains the small provision and it was heard in Health and Human Services this year as part of the MHLN's Solutions to Children Boarding bill. We urge the committee to include this funding. It would be a simple and inexpensive fix to raise the rate in the behavioral health fund, but it would have a lasting impact on families who are seeking residential care for their child's mental health.

Thank you for your time and attention. Please reach out to us with any questions or for further discussion.

Sincerely,

Sue Abderholden, MPH Executive Director

Elliot Butay Senior Policy Coordinator