

April 8, 2025

Dear Chair Fateh and the Senate Higher Education Committee:

We are writing to oppose the cuts to funding for the Addiction Medicine Fellowship in the Higher Education omnibus bill, which would end HCMC's Addiction Medicine Fellowship program.

Substance Use Disorder care is a critical part of the mental health system. Nationwide, 34.8% of adults with a mental illness also have substance use disorder (SUD), and 46.6% of adults with a serious mental illness have a co-occurring SUD. That's a total of 20.4 million adults in the United States with co-occurring disorders. The combination of SUDs and mental illnesses "results in more profound functional impairment; worse treatment outcomes; higher morbidity and mortality; increased treatment costs; and higher risk for homelessness, incarceration, and suicide than if people had only one of these disorders," according to the Substance Abuse and Mental Health Services Administration (SAMHSA).

Current best practices indicate that most people should receive treatment for *both* their substance use disorder(s) *and* their mental illness(es). Tragically, only 18.6% of adults in the U.S. do.

It takes many people a long time to seek help for a substance use disorder, so it's crucial that treatment is available for them once they are ready to take that step. SUD recovery is not linear; most people will need treatment multiple times over the course of their lives. But Minnesota SUD service providers do not have the capacity to meet that need. Not only are there currently insufficient numbers of addiction and SUD professionals and programs in Minnesota – existing programs are closing across the state due to underfunding.

SAMHSA has just been gutted, directly resulting in the loss of many millions of dollars of funding to Minnesota substance use disorder treatment and services and overdose prevention programs. Federal staff with deep knowledge about best practices have been laid off.

We need well-trained SUD and mental health professionals entering the workforce now more than ever. We need them because the state is currently in the middle of a mental health crisis and to help mitigate the increased number of cases and acuity of SUD that will result from this loss of prevention services.

The Addiction Medicine fellows go on to save countless lives over the course of their careers. We know difficult budget decisions will need to be made this year – but we cannot afford to lose any SUD professionals. Minnesotans' lives depend on them. We urge you to continue funding the Addiction Medicine Fellowship.

Sincerely,

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