

Chair Hoffman and Committee Members:

I am writing as a member of the Priority Admissions Review Panel, as I have learned that the SF 2628 language was changed at the 11th hour without consultation with the Review Panel.

5.11 ~~(c) Patients described in paragraph (b) must be admitted to a state-operated treatment~~
5.12 ~~program within 48 hours of the Office of Executive Medical Director, under section 246C.09,~~
5.13 ~~or a designee determining that a medically appropriate bed is available. This paragraph~~
5.14 ~~expires on June 30, 2025.~~

Of particular concern are lines 5.11-14, as the lines stricken out are an essential component of the bill and of our big picture work to decrease the occurrence of mentally ill patients waiting in jails for appropriate care.

6.10 Sec. 5. **[253B.1005] ADMISSION TIMELINES.**
6.11 **Subdivision 1. Admission required within 48 hours. Patients described in section**
6.12 **253B.10, subdivision 1, paragraph (b), must be admitted to a state-operated treatment**
6.13 **program within 48 hours. This subdivision expires upon the effective date of subdivision**
6.14 **2.**
6.15 **Subd. 2. Admission required within ten days. Effective upon capacity at secure forensic**
6.16 **mental health treatment facilities operated by Direct Care and Treatment reaching 431 fully**
6.17 **staffed and operational beds, capacity at Anoka-Metro Regional Treatment Center reaching**
6.18 **132 fully staffed and operational beds, and the total capacity at adult community behavioral**
6.19 **health hospitals operated by Direct Care and Treatment reaching 115 fully staffed and**
6.20 **operational beds, patients described in section 253B.10, subdivision 1, paragraph (b), must**
be admitted to a state-operated treatment program within ten calendar days.

Lines 6.11-13 are in direct opposition to what the Review Panel had unanimously agreed upon. Admission within 48 hours is an unattainable goal with present capacity and, if this is passed as it is currently written, DCT will continue wasting time with lawsuits for failing to comply with an arbitrary and unachievable mandate instead of focusing on building capacity and the many other goals outlined in our report and in this bill.

We all agree that jails should not be mental health facilities. Investment in building mental health capacity, as recommended in our report, is a much better use of the state's money and time than the folly that would ensue if the 48-hour rule returns.

The sunset clause in the now-stricken verbiage is intended to keep the pressure on DCT and other stakeholders to keep building that capacity and not grow complacent with the status quo that is not working for anybody.

Thank you for your consideration.