March 24, 2025

SENATOR JOHN HOFFMAN, CHAIR

HUMAN SERVICES COMMITTEE
MINNESOTA STATE SENATE

Chair Hoffman and Committee Members,

On behalf of Woodland Centers, I writing in support of Senate File 2647.

Woodland Centers is a private non-profit 501(c)(3) comprehensive community mental health center established in 1958. We serve seven rural counties in the west central region of Minnesota – Chippewa, Big Stone, Kandiyohi, Lac Qui Parle, Meeker, Renville, and Swift. Woodland Centers catchment area encompasses approximately 5000 square miles with a population of approximately 114,000. Approximately 75% of the clients served at Woodland Centers are enrolled in Minnesota Health Care Programs and another 15% are enrolled in Medicare. Approximately 90% of our clients are eligible for sliding fee scale reductions and around 85% of these individuals are provided a 100% sliding fee scale reduction. Woodland Centers serves approximately 5,000 unduplicated individuals each year ranging in age from toddlers to the elderly.

SF 2647 helps expand access to substance use disorder treatment and increase efficiencies for our valuable licensed clinical staff by allowing them to work at the top of their licenses and integrate across mental health and substance use disorder care.

An increasing number of mental health and SUD clinics and agencies provide co-occurring and integrated services. They employ licensed mental health professionals and LADCs, among a full staff spectrum, across their service lines. In this workforce shortage and service access shortage, these agencies are needing to expand access to treatment to clients we serve and be able to best use their clinicians' time. However, in a Medical Assistance licensed SUD program under MN Statutes Sec. 245G, only licensed alcohol and drug counselors (LADCs) are authorized to provide treatment services.

The field of substance use disorder is going through substantial changes – integrated services models, the onset of ASAM 4 criteria and substantial increased demand for substance use disorder services. Despite increasing demand, access to treatment remains delayed due to a severe shortage of Licensed Alcohol and Drug Counselors (LADCs), particularly in rural areas. This workforce gap results in long wait times, staff burnout, and significant barriers to care. Agencies and programs are shrinking or shuttering their services out of lack of workforce and sustainable reimbursements.

SF 2647 directly addresses these challenges by expanding the pool of professionals eligible to conduct SUD assessments—the critical first step in accessing care. By allowing trained mental health professionals, clinical trainees, and registered nurses to complete comprehensive assessments, this bill increases the number of qualified providers, reducing delays and ensuring individuals receive timely support.

SF 2647 also strengthens treatment coordination by expanding the professionals who can assist clients in navigating services. Effective treatment coordination is essential to long-term recovery, ensuring individuals can access the care and community resources they need at the right time.

Furthermore, the bill calls for a study on removing unnecessary restrictions that prevent licensed health professionals from providing SUD care within their scope of practice. Eliminating these barriers is crucial in addressing the substance use crisis and ensuring every available healthcare professional can contribute to expanding access to treatment.

We thank you for yours and the legislature's good work for our mental health and substance use disorder system. We encourage you to support SF 2647 as next step to integrating care around our whole clients and communities and ensuring access to treatment services for Minnesotans.

Sincerely

Chief Executive Officer

Ashley Kjos, Psy.D., L.P

Woodland Centers