



April 9, 2025
Senate Human Services Committee

Dear Chair Hoffman and Committee Members,

On behalf of Children's Minnesota, I am writing to offer comments on SF3054, the Senate Human Services Omnibus Bill. Children's Minnesota is the state's largest pediatric health care system, serving patients from all 87 counties and 60 percent of counties in surrounding states. Nearly half of our patients are insured through Medicaid.

Children in Minnesota are experiencing a mental health crisis, too often boarding in hospital emergency departments waiting for the right level of care to become available. In 2024 kids boarded at Children's Minnesota more than 1,200 times while waiting to access the community-based services they need, a substantial increase from the year prior. Included with this letter is a document that provides additional information specific to children boarding in our hospitals.

One of the biggest barriers we face in finding placement for these patients is getting MnCHOICES assessments completed. We rely on our county partners to complete these assessments, but have found that, too often, there is confusion over which county can complete an assessment for a specific patient or we find ourselves wanting to have an assessment completed in order to best assess placement options, while our partners want to wait to complete the assessment until placement is found. The inefficiencies in this process result in the same conclusion – more children waiting in the hospital to access the support they need.

These inefficiencies can be addressed by expanding who can be a MnCHOICES assessor, clarifying process timelines and strengthening accountability within the system. While these solutions are not currently included in SF3054, we appreciate that conversations on this issue will continue as budget bills are finalized.

Sincerely,

Amanda Jansen, MPP
Director of Public Policy
Children's Minnesota

A broken system: THE JOURNEY OF A CHILD IN CRISIS

SITUATION

10 year old brought to the emergency department by caregiver for behavioral concerns.*



Multiple diagnoses (ADHD, PTSD) with limited coping skills and challenges regulating behaviors.

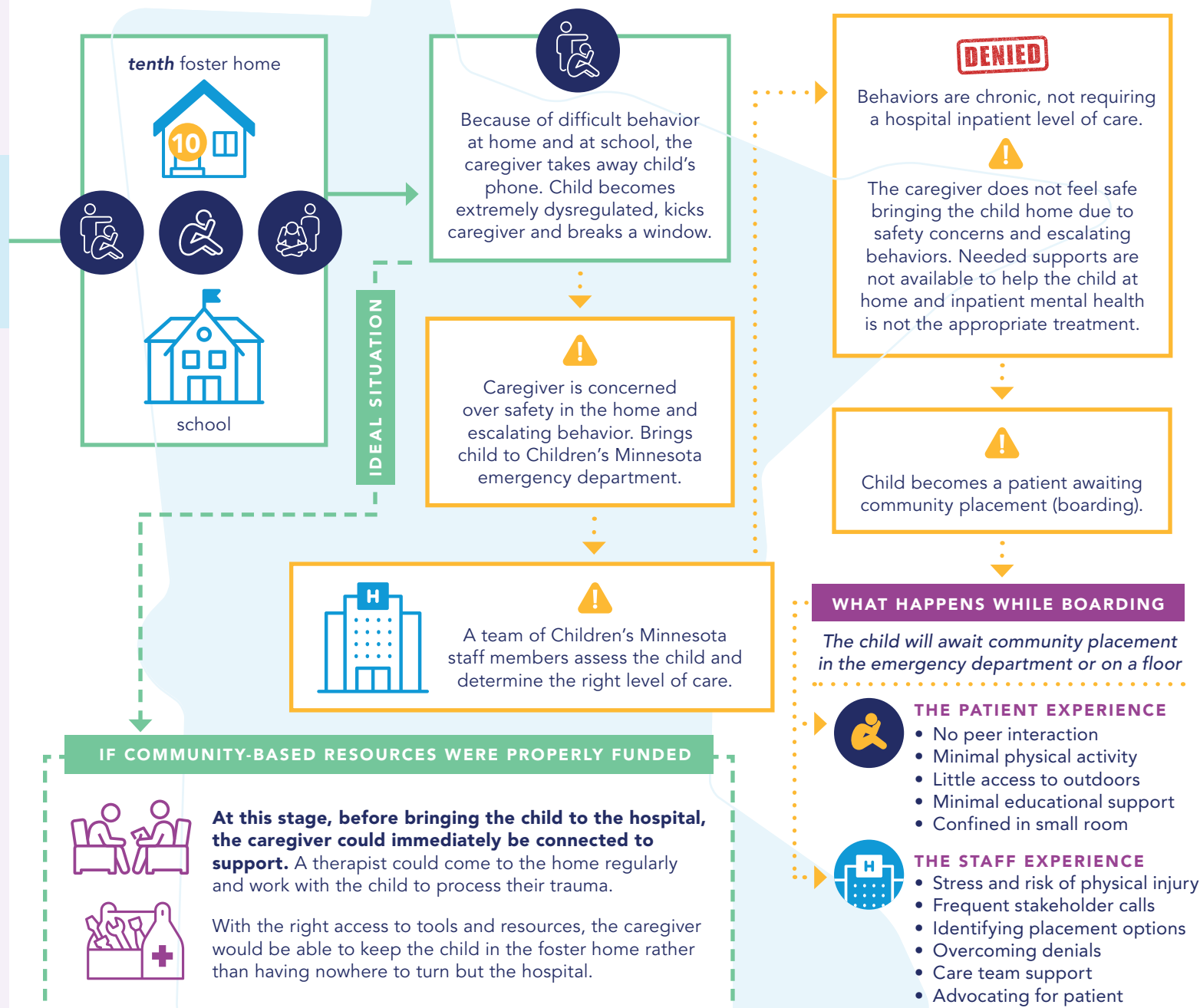
HISTORY

- Experienced past trauma, including witnessing domestic violence, parental substance abuse and was removed from birth family's care at 7-years old.
- Placed in 10 different foster homes.
- Verbally and physically aggressive when dysregulated, particularly towards caregivers.

For more information, please contact:

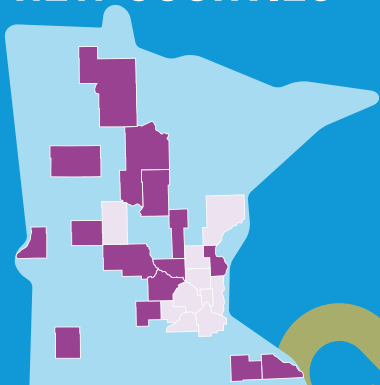
Amanda Jansen,
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PATIENTS IMPACTED BY THE BOARDING CRISIS

In 2024, we saw patients from
16 NEW COUNTIES



MOST IMPACTED GROUPS

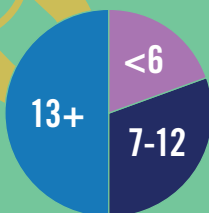
African American/Black
Caucasian/white
Multi-race

THIS HAS A WIDE
IMPACT ON ALL
COMMUNITIES

77.4%

are reliant on

MEDICAID



PATIENT AGES

In 2024, kids boarded
at Children's Minnesota

1200+

TIMES

a substantial increase from 2023

54%

are under guardianship

OF THE COUNTY

In 2025, state leaders must focus on policy changes to help children with the most complex behavioral health needs. Significant investments are needed to improve access to the continuum of mental health care, including increasing Medicaid reimbursement rates and alleviating the boarding crisis.



COMMON CHARACTERISTICS AMONG PATIENTS BOARDING:

- Multiple past placements
- More than 3 hospital visits over the past year
- Neurodivergent, developmental delay, low level of functioning
- History of aggression, sexualized behaviors, running away
- Chronic self-harm, substance abuse
- Multiple medical conditions

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