

# North Dakota Behavioral Health Updates

Pamela Sagness, Executive Policy Director  
Department of Human Services



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**Human Services Coronavirus (COVID-19) Information and Resources**

ND Human Services [Open Letter to Stakeholders](#) regarding COVID-19 (March 18, 2020)

			
<p><a href="#">Behavioral Health</a></p>	<p><a href="#">Resources for Individuals and Families</a> Financial help and other resources</p>	<p><a href="#">Provider Q &amp; A</a> Answers to FAQ by program area for providers of services funded through the department.</p>	<p><a href="#">Housing and Homelessness</a> Resources about housing and homelessness</p>
			
<p><a href="#">Program &amp; Policy Changes</a></p>	<p><a href="#">News &amp; Notices</a></p>	<p><a href="#">Provider Resources</a></p>	<p><a href="#">Child Care Providers</a></p>

The Department continues to post other Department COVID-19-related information, including a series of Q&As on the COVID-19 page on our website [www.nd.gov/dhs/](http://www.nd.gov/dhs/) to help ensure that various partner and provider groups have up-to-date information on recommended practices as well as program and policy changes.

### Childcare Emergency Operating Grants

- Extended availability of Childcare Emergency Operating Grants through July 3. Described updated modified operating practices that will go into effect June 1 to further align with K-12 re-start guidance.

### Emergency Rent Bridge

- Started accepting applications for Emergency Rent Bridge program and finalized housing provider registration process. Coordinating with existing housing counseling providers across state to help assure seamless connections for individuals seeking help.

### Human Service Centers

- Updated screening process to identify 1 symptom as trigger for quarantine and testing, as opposed to the original recommended 2 symptoms.
- Identified a tier approach of determining telehealth services versus face-to-face services based on the level of needs of client and their capacity to meaningfully engage in care via telehealth.




## Looking for support during the COVID-19 pandemic for yourself or someone you love?

PROJECT RENEW, a new behavioral health program providing community support services and outreach to individuals impacted by the COVID-19 pandemic, in partnership with Lutheran Social Services of North Dakota.

Call 701-223-1510 (M-F between 8-5pm CT) OR email [renew@lssnd.org](mailto:renew@lssnd.org). Visit [projectrenew.nd.gov](http://projectrenew.nd.gov) for information on coping and well-being, wellness tips, and who to call in a crisis situation.

### Resources for Adults —

**Employer Toolkit: Behavioral Health Resources During the COVID-19 Pandemic** 

**Loss, Grief and COVID-19: How to Support Someone** 


**Suicide Prevention: How to Help a Loved One**

**ND Commissioner of Veterans Affairs Challenge on Suicide Prevention**

**Recognize the signs of child abuse and neglect**

### Resources for Providers —

#### Resources for Providers

**Coping with Stress during the COVID-19 Pandemic: For Emergency Responders** 

Funding opportunities to increase mental health and substance use disorder treatment services during COVID-19 pandemic:

- **Request for Proposal for Mental Illness**

### Resources for Children and Families —

**Parents Lead** 

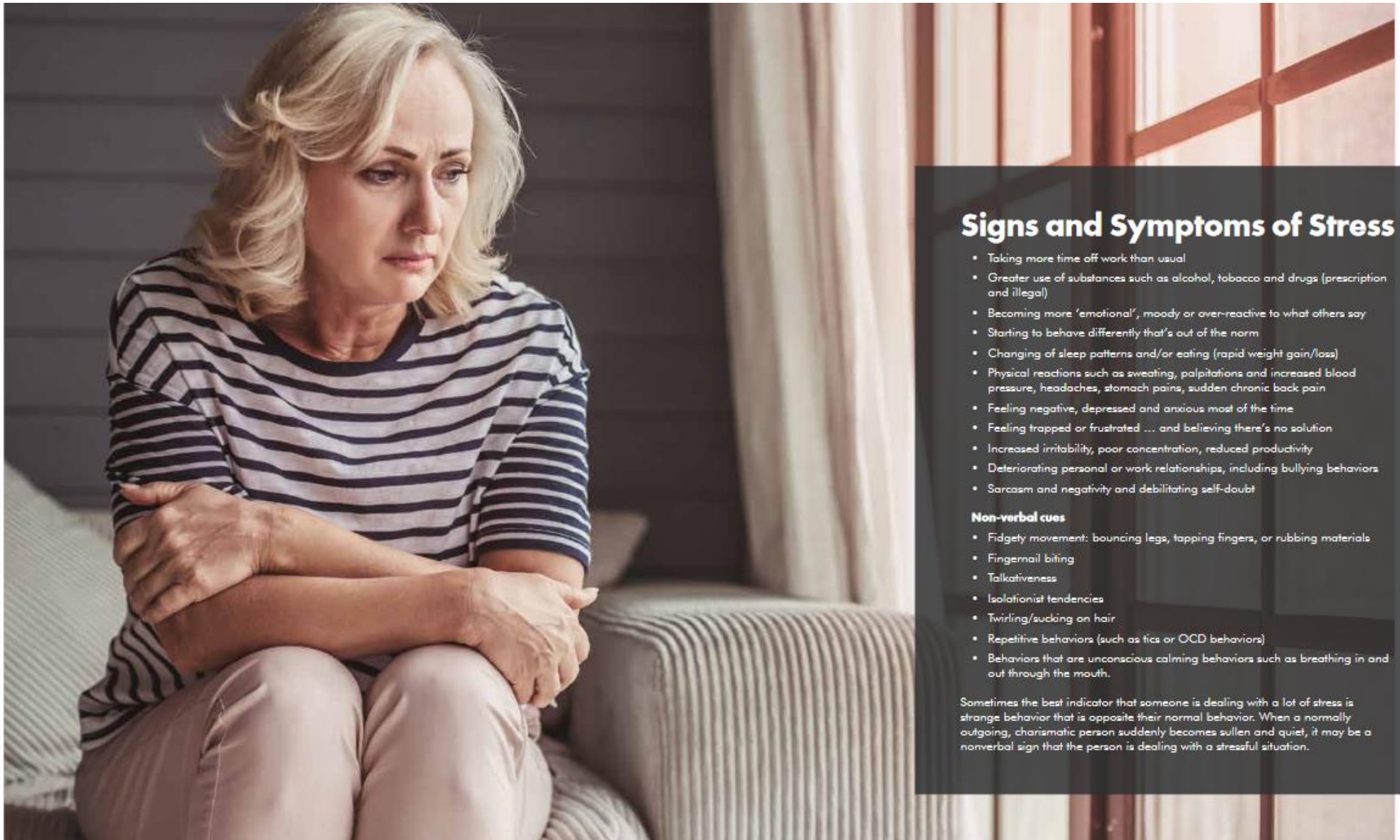
# EMPLOYER TOOLKIT

BEHAVIORAL HEALTH RESOURCES  
DURING THE COVID-19 PANDEMIC

[www.behavioralhealth.nd.gov/covid-19](http://www.behavioralhealth.nd.gov/covid-19)

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## Signs and Symptoms of Stress

- Taking more time off work than usual
- Greater use of substances such as alcohol, tobacco and drugs (prescription and illegal)
- Becoming more 'emotional', moody or over-reactive to what others say
- Starting to behave differently that's out of the norm
- Changing of sleep patterns and/or eating (rapid weight gain/loss)
- Physical reactions such as sweating, palpitations and increased blood pressure, headaches, stomach pains, sudden chronic back pain
- Feeling negative, depressed and anxious most of the time
- Feeling trapped or frustrated ... and believing there's no solution
- Increased irritability, poor concentration, reduced productivity
- Deteriorating personal or work relationships, including bullying behaviors
- Sarcasm and negativity and debilitating self-doubt

### Non-verbal cues

- Fidgety movement: bouncing legs, tapping fingers, or rubbing materials
- Fingernail biting
- Talkativeness
- Isolationist tendencies
- Twirling/sucking on hair
- Repetitive behaviors (such as tics or OCD behaviors)
- Behaviors that are unconscious calming behaviors such as breathing in and out through the mouth.

Sometimes the best indicator that someone is dealing with a lot of stress is strange behavior that is opposite their normal behavior. When a normally outgoing, charismatic person suddenly becomes sullen and quiet, it may be a nonverbal sign that the person is dealing with a stressful situation.

## EMPLOYERS CAN PROMOTE AWARENESS ABOUT THE IMPORTANCE OF BEHAVIORAL HEALTH

Here are some other steps you can take to support the behavioral health of employees:

- Check in with staff frequently during this time; set an expectation for managers to reach out once a week. (Occasional emails, texts, chat are fine but don't make that the only means of communication!) Human beings need personal communication i.e.; familiar voice/face in order to feel safe. For employees who are working remotely, supervisors should call or, when possible, videoconference/video chat at least once a week. Video communication will give the supervisor a better opportunity to identify non-verbal cues for indicators of possible stress.
- Make mental health self-assessment tools available to all employees.
- Offer health insurance with no or low out-of-pocket costs for depression medications and mental health counseling. If you have an Employee Assistance Program, make sure staff know how to get in touch and what it is for.
- Provide free or subsidized lifestyle coaching, counseling, or self-management programs.
- Provide electronic materials, such as brochures, fliers, and videos, to all employees about the signs and symptoms of poor mental health and opportunities for treatment.
- Host seminars or workshops that address depression and stress management techniques, like mindfulness, breathing exercises, and meditation, to help employees reduce anxiety and stress and improve focus and motivation.
- Create and maintain dedicated, quiet spaces for relaxation activities.
- Provide managers with training to help them recognize the signs and symptoms of stress and depression in team members and encourage them to seek help from qualified mental health professionals.
- Give employees opportunities to participate in decisions about issues that affect job stress.
- Ensure staff can access food and other essentials. Many staff are working and don't have time to get supplies, and also may not have the means to stock up as so many Americans are doing right now. This can cause anxiety and stress. Work with local food pantries to see if they can possibly deliver to your building or provide snacks or meals so that staff have something nutritious to eat during their shift.



### Tips for Supervisors

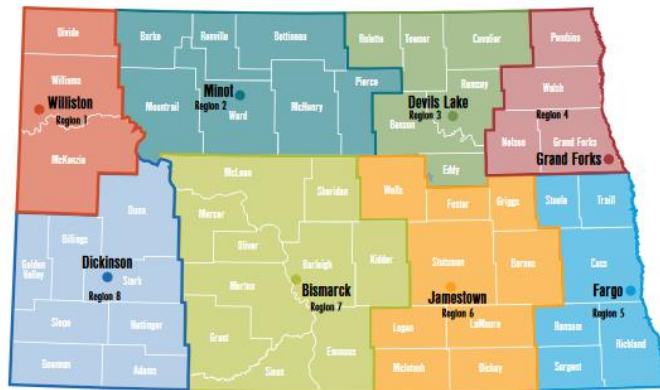
Supervisors will likely see the impacts of stress on employee wellbeing and mental health firsthand. Employees may come to their supervisors when they do not know how to cope with their current situation or circumstances.

Some actions supervisors can take to help in these situations include:

- Understanding the actions Human Resources is taking to provide support to employees.
- Giving explicit permission to take mental health breaks, take walks and engage in other acts of self-care.
- Understanding and accommodating the need for flexible scheduling, when possible.
- Acknowledging the challenges with shared space at home to complete school and work.
- Increase communication and check-ins.
- Ask staff how they are doing and feeling, and how their families are doing - make sure they feel heard and understood.
- Many people are worried about their loved ones during this time and feel the need to connect often. Allowing them time to call family during shifts if needed to check on them.

## Behavioral Health Services: North Dakota Human Service Centers

The North Dakota Department of Human Services Field Services Area, which includes the eight regional human service centers and the North Dakota State Hospital, provides an array of behavioral health care for individuals with mental illness and substance use disorders.



### Northwest Human Service Center: **Region 1**

316 2nd Avenue West  
Williston, ND 58802

**Crisis Line:** 701-572-9111 or toll-free 800-231-7724

### North Central Human Service Center: **Region 2**

1015 S. Broadway, Suite 1B  
Minot, ND 58701

**Crisis Line:** 701-857-8500 or toll-free 1-888-470-6968

### Lake Region Human Service Center: **Region 3**

200 Hwy 2 W  
Devils Lake, ND

**Crisis Line:** 701-662-5050 (collect calls accepted) or toll-free 888-602-8610

### Northeast Human Service Center: **Region 4**

151 S. Fourth St., Suite 401  
Grand Forks, ND 58201 4/35

**Crisis Line:** 701-775-0525 or toll-free 800-845-3731

### Southeast Human Service Center: **Region 5**

2624 9th Avenue South  
Fargo, N.D. 58103-2350

**Crisis Line:** 701-298-4500 or 888-342-4900 or 2-1-1 Helpline

### South Central Human Service Center: **Region 6**

520 3rd Street, NW  
Jamestown, N.D. 58401

**Crisis Line:** 701-253-6304

### West Central Human Service Center: **Region 7**

1237 W. Divide Ave., Suite 5  
Bismarck, ND 58501-1208

**Crisis Line:** 701-328-8899 or toll-free 1-888-328-2112

### Badlands Human Service Center: **Region 8**

300 13th Ave. W., Suite 1  
Dickinson, ND 58601

**Crisis Line:** 701-290-5719



## OTHER SERVICES AND SUPPORTS

### Recovery Talk

1-844-44TALK2

Talk with a trained peer support specialist in North Dakota with lived experience in addition to chat and receive support.

### National Suicide Prevention Lifeline

1-800-273-TALK (8255)

### Disaster Distress Helpline

1-800-985-5990

Provides crisis counseling and support to people experiencing emotional distress related to natural or human-caused disasters

### FirstLink 211

Confidential service available to anyone for listening and support, referrals to resources/help and crisis intervention.

### Behavioral Health Treatment Services Locator

<https://findtreatment.samhsa.gov>

Search for providers by address, city or ZIP code





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# COPING WITH STRESS DURING THE COVID-19 PANDEMIC: FOR EMERGENCY RESPONDERS

News about the coronavirus (COVID-19) is everywhere and concern over this virus can result in families feeling anxious. Parents, family members, and other trusted adults play an important role in helping children make sense of what they hear in a way that is honest, accurate, and minimizes anxiety or fear.

**PARENTS** LEAD.ORG





## NEW Resources

- [Teleworking with Kids at Home: Finding Balance](#)
- [Creating Calm during the COVID-19 Pandemic](#)
- [30-Day Parenting Challenge while Social Distancing](#)
- [Getting Movement in during the COVID-19 Pandemic](#)
- [COVID-19 Pandemic Changes:Your Adult Child Moves Homes](#)
- [How to Talk to Kids if a Family Member Becomes Seriously Ill with COVID-19](#)

Review the resources below to help guide your conversations.

- [Early Childhood](#)
- [Preschool](#)
- [Elementary](#)
- [Middle School](#)
- [High School](#)
- [Supporting those missing milestones because of the COVID-19 pandemic](#)



[Understanding COVID-19 and how germs spread](#)

[Daniel Tiger - How to talk to your kids](#)

[How to talk with your child about the coronavirus](#)

[5 ways to help teens manage anxiety about the coronavirus](#)

[Coronavirus Resources - for Parents & Kids](#)

[Parent/Caregiver Guide to Helping Families Cope With COVID-19](#)

[Parenting in the time of COVID-19](#)

## ND-Specific Updates

[ND Public Instruction](#)

[ND Health](#)



# CRISIS COUNSELING PROGRAM (CCP)

# IMMEDIATE ASSISTANCE PROGRAM (ISP)

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Through June 30, 2020 (potential to extend an additional 7 months)

Short-term disaster relief and crisis counseling services



**PR**  **JECT**

renew



# What is Project Renew?

- Crisis Counseling Assistance and Training Program (CCP) funded by the Federal Emergency Management Agency (FEMA)
  - Aims to help North Dakotans recover from the COVID-19 pandemic through community outreach and access to mental health services
-



# Services

- The Department of Human Services is partnering with Lutheran Social Services to provide behavioral health supports to North Dakotans physically or emotionally affected by COVID-19.
- Services include:
  - Providing brief support services
  - Helping individuals develop and improve coping strategies
  - Connecting individuals to other community resources and agencies
- **Call 701-223-1510 for brief support services from a trained counselor. All calls are free and anonymous.**



**CRISIS HELP IS IN YOUR COMMUNITY**  
Get free and anonymous counseling. **GET FREE AND ANONYMOUS BRIEF SUPPORT SERVICES AT 701.223.1510**



**ND RESPONSE**

Find the up to date information on the coronavirus (statistics, case numbers, precautions)

[Learn more](#)



**BEHAVIORAL HEALTH**

Find behavioral health resources outside of coronavirus assistance (prevention, addiction, mental health)

[Learn more](#)



**PARENTS LEAD**

Find behavioral health resources for parents and caregivers

[Learn more](#)

[Feedback \(+\)](#)



# EMERGENCY GRANT TO ADDRESS MENTAL AND SUBSTANCE USE DISORDERS DURING COVID-19

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April 2020 - August 2021  
\$2 million

Increased treatment and recovery services for:

- Individuals with a mental illness and/or substance use disorder
- Healthcare practitioners with a mental illness

# Emergency Grant to Address Mental and Substance Use Disorders During COVID-19

## IMPLEMENTATION

### Substance Use Disorder Treatment and Recovery Supports

- Sharehouse, Inc.
- Heartview Foundation

### Mental Illness Treatment and Recovery Supports (not Serious Mental Illness)

- Agassiz Associates

### Serious Mental Illness and Co-Occurring Treatment and Recovery Supports

- Public service delivery system, with a focus on Regions 2, 4, 5, 6, and 7.

### Supports for Healthcare Providers with a Mental Illness (not SMI)

- To be determined

### Serious Mental Illness Peer Support via Phone

- To be determined

# COVID-19 EMERGENCY RESPONSE FOR SUICIDE PREVENTION GRANTS

**NORTH DAKOTA SUBMITTED AN APPLICATION 5/22/2020**

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\$800,000 for 16 months in advancing efforts to prevent suicide and suicide attempts among adults age 25 and older in order to reduce the overall suicide rate.

# Behavioral health

A state of mental/emotional being and/or choices and actions that affect **WELLNESS**.

Preventing and  
treating  
depression and  
anxiety

Preventing and  
treating  
substance use  
disorder or  
other addictions

Supporting  
recovery

Creating healthy  
communities

Promoting  
overall well-  
being

# BEHAVIORAL HEALTH IS HEALTH



An aerial photograph of a vast, green landscape with rolling hills and valleys. The terrain is covered in dense green vegetation, with some rocky outcrops visible. The sky is filled with soft, white clouds, and the overall lighting is bright and natural. The text is overlaid on the upper portion of the image.

# THE ROADMAP

## BEGINNING TRANSFORMATION

# TIMELINE

**2014**

Behavioral Health  
Planning Final  
Report  
*Schulte Consulting*

**2016**

ND Behavioral  
Health Assessment:  
Gaps and  
Recommendations

**2018**

ND Behavioral  
Health System  
Study  
*Human Services  
Research Institute  
(HSRI)*

# North Dakota Behavioral Health System Study

April 2018

“A well-functioning behavioral health system attends not only to the intensive needs of children, youth, and adults with serious mental health conditions and substance use disorders but also to the outpatient and community-based service and support needs of individuals, and, critically, to the social and emotional well-being of the majority of the population who have not been diagnosed with a behavioral health condition—especially children, youth, and young adults.”

## North Dakota Behavioral Health System Study

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**BEHAVIORAL HEALTH**

### BEHAVIORAL HEALTH SYSTEM STUDY TIMELINE

1/1/2017 to 6/30/2018	8/1/2018 to 6/30/2019
 <p>Behavioral Health Division in contract with HSRI to conduct an in-depth review of North Dakota's behavioral health system. Final report released April 2018</p>	 <p>Behavioral Health Division in contract with HSRI to initiate and facilitate the implementation of a strategic plan based off the recommendations from the comprehensive study of ND's behavioral health system published April 2018.</p>

### APRIL 2018 BEHAVIORAL HEALTH SYSTEM STUDY

Served as a component of interim legislative committee studies during the 65th Legislative Interim. This report presents the findings from the North Dakota Comprehensive Behavioral Health Systems Analysis, conducted by the Human Services Research Institute (HSRI) for the North Dakota Department of Human Services' Behavioral Health Division.

The 250-page report provides more than 65 recommendations in 13 categories. This set of recommendations is intentionally broad and far-reaching; it is not expected, nor suggested, that stakeholders in North Dakota endeavor to implement all these recommendations at once.

1. Develop a comprehensive implementation plan
2. Invest in prevention and early intervention
3. Ensure all North Dakotans have timely access to behavioral health services
4. Expand outpatient and community-based service array
5. Enhance and streamline system of care for children and youth
6. Continue to implement/refine criminal justice strategy
7. Engage in targeted efforts to recruit/retain competent behavioral health workforce
8. Expand the use of tele-behavioral health
9. Ensure the system reflects its values of person-centeredness, cultural competence, trauma-informed approaches
10. Encourage and support the efforts of communities to promote high-quality services
11. Partner with tribal nations to increase health equity
12. Diversify and enhance funding for behavioral health
13. Conduct ongoing, system-side data-driven monitoring of needs and access



## North Dakota Behavioral Health System Study RECOMMENDATIONS

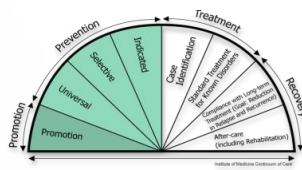
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For more  
information  
about BH in  
ND visit:

<https://www.hsri.org/NDvision-2020>

# Keys to Reforming North Dakota's Behavioral Health System



Support the full Continuum of Care



Increase Community-Based Services



Prevent Criminal Justice Involvement for Individuals with a Behavioral Health Condition

# 1915i MEDICAID STATE PLAN AMENDMENT



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Home / 1915(i) Medicaid State Plan Amendment

# 1915(i) Medicaid State Plan Amendment

During the 2019 legislative session, North Dakota lawmakers authorized the Department of Human Services (Department) to create a Medicaid 1915(i) State Plan Amendment. The amendment allows North Dakota Medicaid to pay for additional home and community-based services to support individuals with behavioral health conditions.

[Download the Application](#)

## Project Status



## Sign up for updates!

Get news from Behavioral Health Division in your inbox.

\* Email

By submitting this form, you are consenting to receive marketing emails from: Behavioral Health Division, 1237 W Divide Ave, Bismarck, ND, 58501, US, <https://www.behavioralhealth.nd.gov/>. You can revoke your consent to receive emails at any time by using the [SafeUnsubscribe@](#) link, found at the bottom of every email. **Emails are serviced by Constant Contact.**



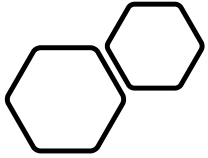
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SERVICE TYPE	DESCRIPTION	AGE
Care Coordination	Coordinates participant care, develops Person-centered Plan of Care plan of care and assists individuals with gaining access to needed 1915(i) and other services.	0+
Training and Supports for Caregivers	Service directed to individuals providing unpaid support to a recipient of 1915(i) services. Services are provided for the purpose of preserving, educating, and supporting the family and/ or support system of the individual.	0+
Community Transitional Services	Non-recurring basic household set-up expenses for individuals transitioning from certain institutions to a private residence where the person is directly responsible for his or her own living expenses. Transition Coordination services are also available	0+
Benefits Planning	Assists individuals considering employment with making informed decisions regarding public benefits and work incentives. Counselors are knowledgeable on public benefits, including Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), Medicare, Medicaid etc.	0+
Non-Medical Transportation	Assists participants with transportation needs to gain access to services, activities and resources, as specified by their plan of care.	0 to 21
Respite	Provided to participants unable to care for themselves. Furnished on a short-term basis because of the absence or need for relief of persons who normally provide care for the participant.	0 to 21
Prevocational Training	Assists participants with developing general, non-job-task-specific strengths and skills that contribute to paid employment	18+
Supported Education	Assists participants who want to start or return to school or formal training with a goal of achieving skills necessary to obtain employment.	5+
Supported Employment	Assists participants with obtaining and keeping competitive employment at or above the minimum wage.	14+
Housing Support Services	Assists participants with accessing and maintaining stable housing in the community.	Six months prior to 18 <sup>th</sup> birthday
Peer Support	Trained and certified individuals with lived experience as recipients of behavioral health services promote hope, self-determination, and skills to participants to achieve long-term recovery from a behavioral health disorder.	18+

\*For a full description read the application draft.



# Peer Support Specialist Certification



## Administrative Rules: 75-03-43 Certified Peer Support Specialists

Public hearing was held at 2:00 pm  
March 26, 2020 in room 210 of the  
Judicial Wing of the State Capitol.

26 March 2020

Public comment was accepted  
through 5:00 pm April 6, 2020.

6 April 2020

Scheduled for Administrative Rule  
Committee meeting June 9, 2020.

9 June 2020



# CERTIFIED PEER SUPPORT SPECIALISTS

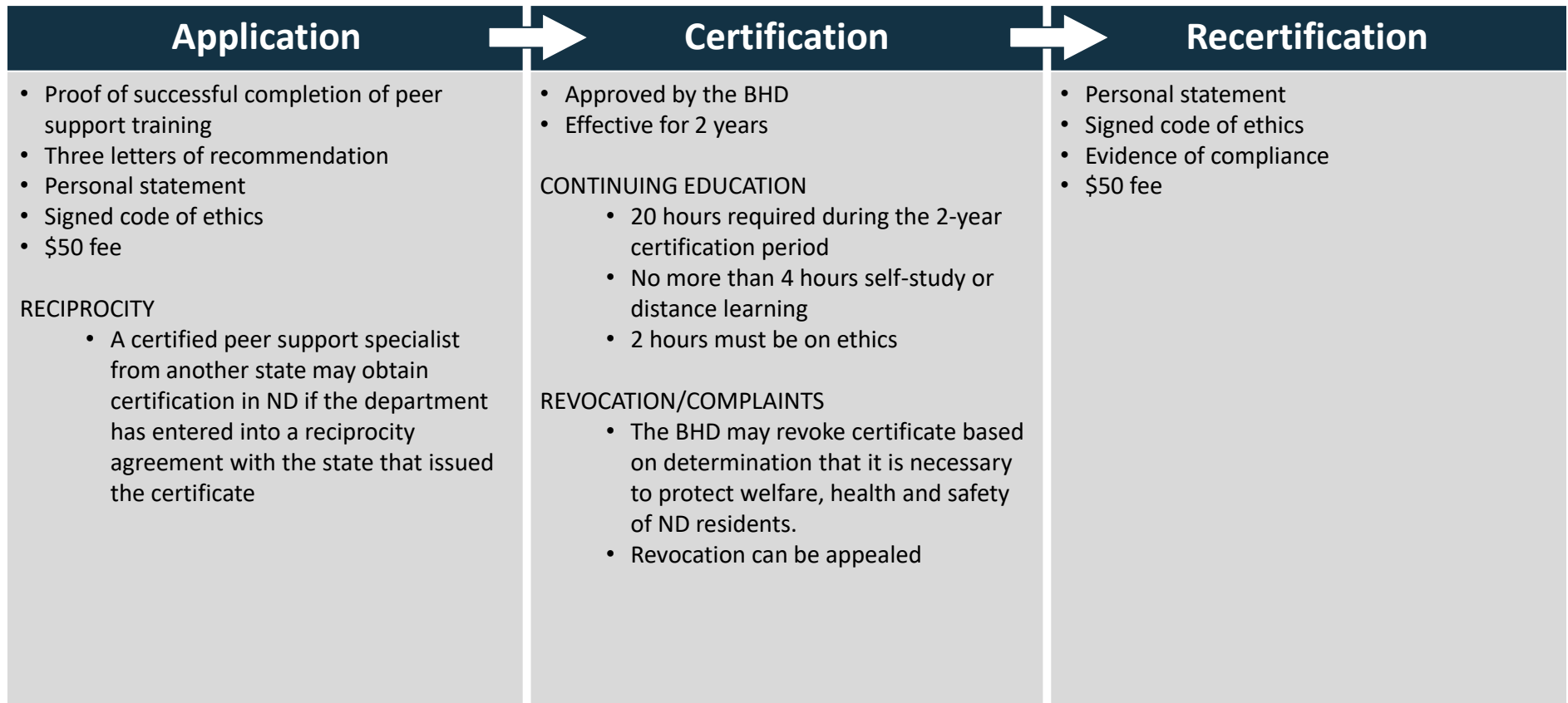
## **Certified Peer Support Specialist I**

- Self-identify as an individual who has personal lived experience and is willing to publicly identify
- At least 18 years of age
- Currently resides/employed within the state
- HS diploma
- Successfully complete division-approved training program

## **Certified Peer Support Specialist II**

- All requirements of a CPSS I, and
- At least 1,500 direct service hours as a peer support specialist.

# OVERVIEW

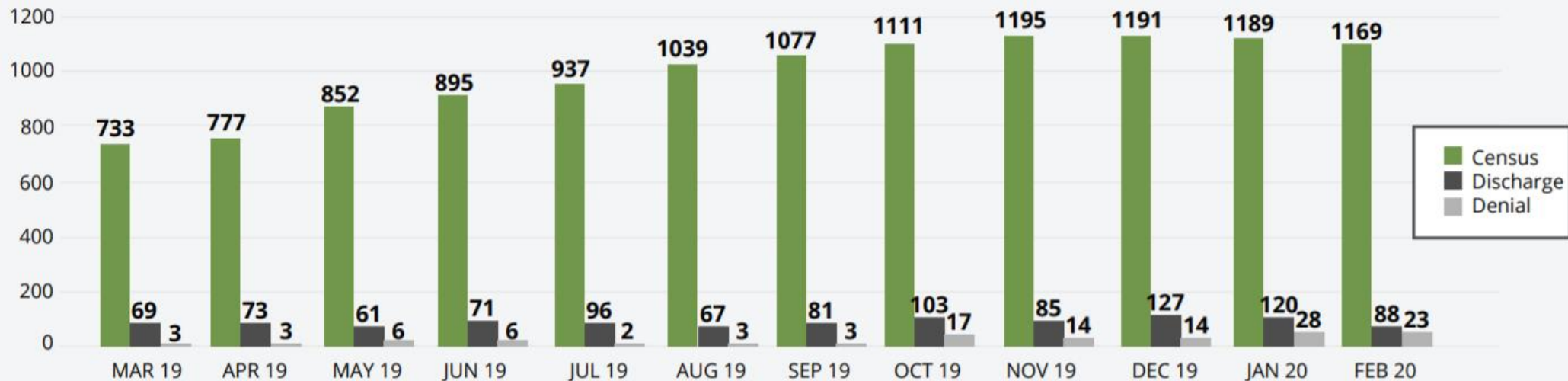


A woman with her hair in a bun, wearing a green long-sleeved shirt, stands with her back to the camera in a field. Her arms are raised, and she is holding a long, thin object, possibly a straw or a piece of wood, which is illuminated by the warm, golden light of a sunset. The background shows a blurred field and a distant treeline under a bright sky.

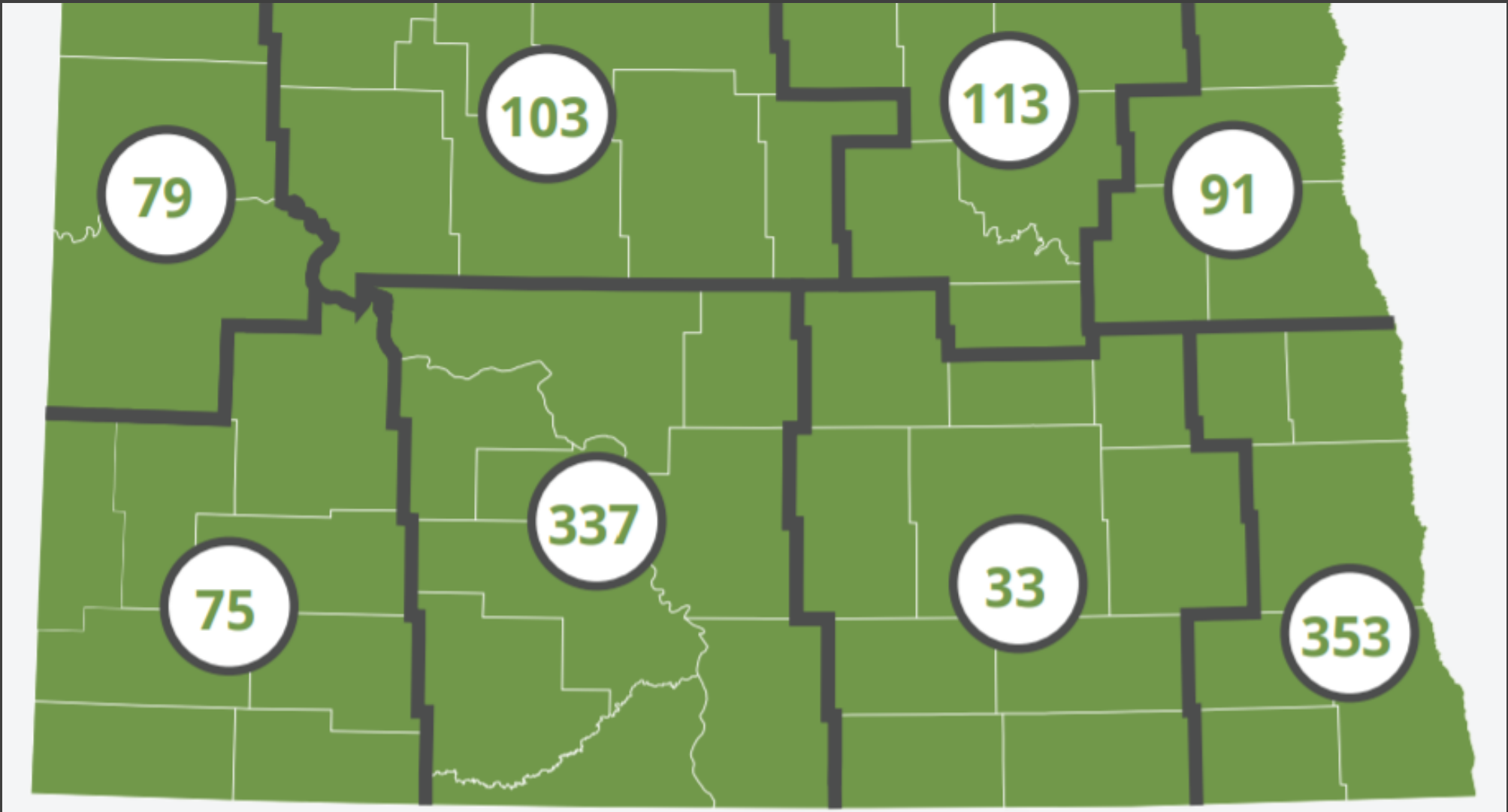
FREE THROUGH

Recovery

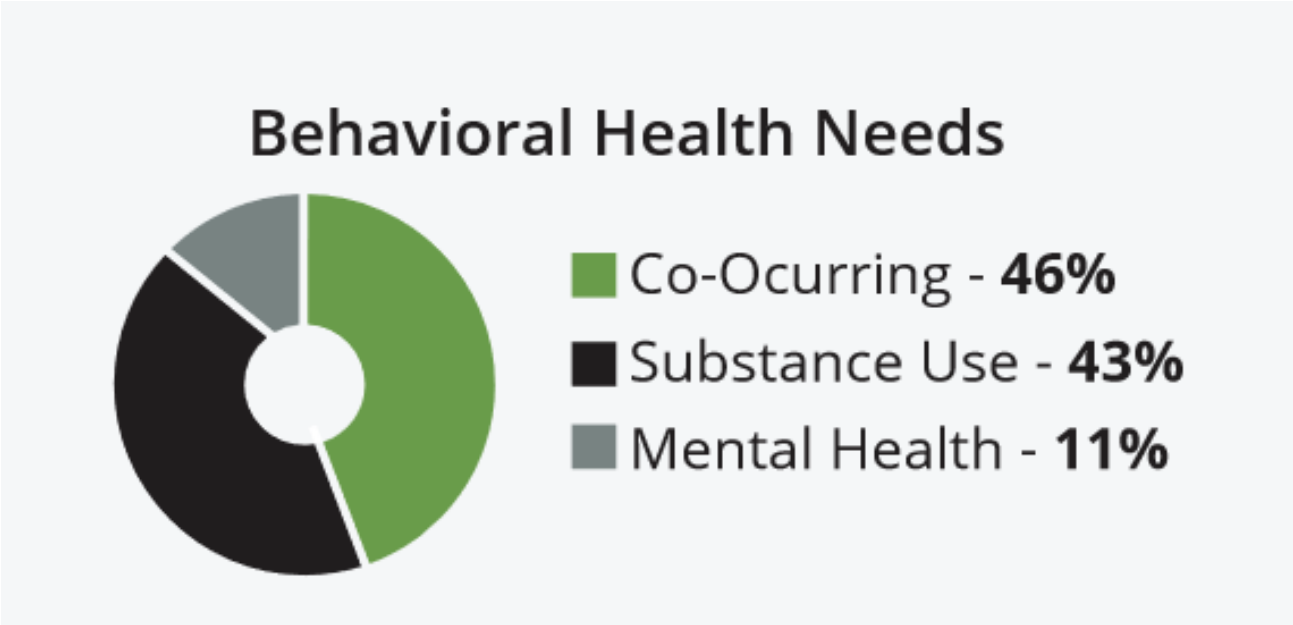
# Monthly Census (active participants), Discharges and Denials



There has been a total of 1,278 discharges from Free Through Recovery. The majority of individuals discharges declined or stopped participating (35%), followed by those who had no contact with their care coordinator or absconded (24%). 165 individuals were identified as not eligible.



# FTR Participants



# March 2018 – March 2020 Outcomes



■ Met 3 or 4 outcomes - **68%**  
■ Met < 3 outcomes- **32%**



# LEGISLATIVE UPDATES

## Behavioral Health



SB 2012 SECTION	PROGRAM/SERVICE	DIVISION BUDGET
1	Substance Use Disorder Voucher (additional dollars to support need, additional capacity [2 FTE], and reduction in age eligibility from 18 to 14; previously SB 2175)	Behavioral Health Division
	Parents Lead	Behavioral Health Division
	Mental Illness Prevention (previously 2028)	Behavioral Health Division
	Recovery home grant program	Behavioral Health Division
	Maintain trauma-informed practices network (funding moved from SB 2291)	Behavioral Health Division
	Suicide prevention transfer from Department of Health	Behavioral Health Division
	Statewide Behavioral Health Crisis Services	Field Services Division
4	Peer Support certification (previously SB 2032)	Behavioral Health Division
5	Community Behavioral Health Program (expansion of Free Through Recovery; previously SB 2029)	Behavioral Health Division
18	IMD, Bed Capacity, and Medicaid waiver (1115) Study	Field Services Division
21	School Behavioral Health Grants (previously 2300)	Behavioral Health Division
22	School Behavioral Health Program	Behavioral Health Division
38	Expansion of Targeted Case Management – youth with SED (previously 2031)	Medical Services
39	Expansion of Targeted Case Management – adults with SMI (previously 2031)	Medical Services
40	Withdrawal management coverage in Medicaid	Medical Services
41	1915i Medicaid State Plan Amendment (adults and youth [previously 2298])	Medical Services
45	Sustain HSRI Behavioral Health Study Implementation support (previously SB 2030)	Behavioral Health Division



# Other Behavioral Health- Related Bills

# House Bill 1103

## Opioid Treatment Medication Units

### PASSED

- Passed House (13-0-1) (87-3)
- Passed Senate (6-0-0) (44-0)

### 50-31-01

"Medication unit" means a facility established as part of, but geographically separate from, an opioid treatment program, from which a licensed practitioner dispenses or administers an opioid treatment medication or collects samples for drug testing or analysis.

#### Options for Providing Methadone Treatment for Individuals with an Opioid Use Disorder

Opioid Treatment Program (OTP)	Medication Unit (MU)	Mobile Methadone Unit (MMU)
<b>SETTING</b>	<b>SETTING</b>	<b>SETTING</b>
Permanent clinic location Community involved in identifying location Permanent security measures approved by DEA*	Permanent clinic location Community involved in identifying location Permanent security measures approved by DEA*	Van or RV able to travel to different geographical locations Community involved in identifying location Returns each day to Home OTP location
<b>SERVICES PROVIDED</b>	<b>SERVICES PROVIDED</b>	<b>SERVICES PROVIDED</b>
Medication dispensing Drug screens administration Counseling appointments Medical appointments with prescriber Case management	Medication dispensing Drug screens administration	Medication dispensing Drug screens administration Counseling appointments
<b>STATE REGULATIONS</b>	<b>STATE REGULATIONS (PROPOSED)</b>	<b>STATE REGULATIONS</b>
Certificate of Need Federal requirements completed Substance Use Disorder Treatment Program license OTP license	Certificate of Need Federal requirements completed Home site holds Substance Use Disorder Treatment Program license Home site holds OTP license Medication Unit license	Not currently allowed
<b>FEDERAL REGULATIONS</b>	<b>FEDERAL REGULATIONS</b>	<b>FEDERAL REGULATIONS</b>
DEA* Registration SAMHSA** Certification Accreditation	DEA* Registration Home site holds SAMHSA** Certification Home site holds accreditation	Moratorium in place for future MMU DEA* working to develop regulations
<b>HOME BASED SETTING FOR</b>		
Medication Unit (MU) Mobile Methadone Unit (MMU)		

Requested in HB 1103

NDCC 50-31

# House Bill 1105

## Voluntary Treatment Program and SUD Voucher

### **PASSED**

- Passed House (12-0-2) (87-1)
- Passed Senate (6-0) (45-0)

**50-06-06.13.**  
...The department may establish a program to prevent out-of-home placement for a Medicaid eligible child with a behavior health condition as defined in the "Diagnostic and Statistical Manual of Mental Disorders", American psychiatric association, fifth edition, text revision (2013).

**50-06-42.**  
...assist in the payment of addiction treatment services provided by **private** licensed substance abuse treatment programs, excluding regional human service centers, and hospital-or medical clinic-based programs for medical management of withdrawal.

# Senate Bill 2149

## Behavioral Health Resource Coordinators

### **PASSED**

- Passed Senate (7-0) (44-3)
- Passed House (14-0) (86-4)

**15.1-07-34**

#### **Youth behavioral health training to teachers, administrators, and ancillary staff.**

...Each school within a district shall designate an individual as a behavioral health resource coordinator.

...The superintendent of public instruction shall maintain the contact information of the behavioral health resource coordinator in each school.

# Senate Bill 2313

## Children's System of Services and Cabinet

### **PASSED**

- Passed Senate (5-0-1) (44-0)
- Passed House (14-0) (81-9)

#### **50-06-05.1**

To develop a system of services and supports to provide behavioral health services and supports in the community for children at risk of or identified as having a behavioral health condition and for the families of these children.

To provide resources on mental health awareness and suicide prevention to the behavioral health resource coordinator at each school. The resources must include information on identifying warning signs, risk factors, and the availability of resources in the community.

#### **50-06**

Children's cabinet - The children's cabinet is created to assess, guide, and coordinate the care for children across the state's branches of government and the tribal nations.

# Senate Bill 2246

## Public Intoxication

### **PASSED**

- Passed Senate (6-0) (47-0)
- Passed House (11-0-3) (91-0)

5-01-05.1

As used in this section "intoxicated" means a state in which an individual is under the influence of alcoholic beverages, drugs, or controlled substances, or a combination of alcoholic beverages, drugs, and controlled substances.

# Senate Bill 2240

## References to Substance Use Disorders

### **PASSED**

- Passed Senate (6-0) (47-0)
- Passed House (12-2-0) (72-18)

**Removes “habitual drunkard”**





# TWO DIFFERENT SYSTEMS

## BEHAVIORAL HEALTH & EDUCATION

# **Hospital Bed Study**

**Human Services Research Institute**



# Hospital Bed Study Summary

- Sufficient inpatient bed capacity
- 6-10 hospital beds needed in western North Dakota
- Recommended size of State Hospital 75-85 beds
- Develop and Expand Alternatives to Inpatient Treatment
- Develop standardized coordination of services
- Integrate behavioral health services into physical health



# Current Relevant Work

- Behavioral health services expansion
- Assertive Community Treatment (ACT) expansion
- Emergency services expansion
- 1915i Home and Community Based Services implementation
- Psychiatric Residential Treatment Facility Workgroup



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HUMAN SERVICES

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