

BEHAVIORAL HEALTH STUDY ITEMS REQUIRING LEGISLATIVE ACTION

This memorandum identifies items in the consultant's draft report for the study of behavioral health needs of youth and adults in North Dakota which may require legislative action to implement.

LOW-COST/HIGH-IMPACT STRATEGIES

The draft report identifies low-cost/high-impact strategies requiring legislative action to improve behavioral health services for youth and adults in North Dakota. The strategies include statutory changes and other legislative actions shown below.

Statutory Changes

Low-cost/high-impact strategies to improve behavioral health services which may require statutory changes include:

- Amend North Dakota Century Code Section 25-03.2-01 to change the definition of a "qualified mental health professional" to include professionals with a master's degree in a behavioral health field or practitioners with a bachelor's degree in a behavioral health field and experience; and
- Create a new section of Century Code to identify professional licensing reciprocity requirements.

Other Legislative Actions

Low-cost/high-impact strategies to improve behavioral health services which may require other legislative involvement include:

- Provide for behavioral health services at critical access hospitals;
- Provide for a Medicaid home and community-based services waiver for mental health and substance abuse services;
- Ensure all education components required to become licensed in a behavioral health field are available in North Dakota;
- Reevaluate the selected essential health benefits package, including a determination of whether the insurance coverage meets federal parity standards;
- Amend the North Dakota Administrative Code definition of qualified behavioral health professional;
- Establish standard rules for uniform access to human service centers;
- Amend regulations to accept electronic releases and other forms of treatment documentation;
- Update and streamline the application process for residential facilities; and
- Provide for a review of "legacy" services provided in North Dakota, their cost, and the potential to reinvest in evidence-based services.

OTHER STRATEGIES

The draft report also identifies other strategies requiring legislative action to improve behavioral health services for youth and adults in North Dakota. The strategies include statutory changes and funding initiatives shown below.

Statutory Changes

Other strategies to improve behavioral health services which may require statutory changes include:

- Establish an oversight system for licensing boards;
- Mandate increased behavioral health training for law enforcement, emergency personnel, corrections personnel, and teachers;
- Establish an independent appeals process for consumers;
- Change the function of the human service centers to provide oversight and regulation of service providers, rather than provide services;
- Establish a behavioral health services provider registry to allow for identification of available services and gaps; and

- Establish an online system with voluntary private provider participation which identifies available beds for behavioral health services.

Funding Initiatives

Other strategies to improve behavioral health services which may require funding changes include:

- Provide funding for telemedicine services;
- Provide funding for increased substance abuse services, including detoxification;
- Provide funding to increase intensive dual disorder treatment;
- Provide funding for grants to private or county case management service providers and eliminate state provision of case management;
- Provide funding to increase availability of mobile crisis units;
- Provide increased funding for peer support and recovery coaches;
- Provide funding for increased law enforcement presence in schools;
- Provide funding for addiction counselors training to become licensed addiction counselors;
- Provide funding to increase oversight and accountability for contracts and to allow for an independent appeals process;
- Provide funding to integrate health services and improve coordination of care; and
- Provide funding to further study transportation needs, judicial matters, service definitions, tribal partnerships, and advocate training.