

Testimony
Senate Bill 2028 - Department of Human Services
Senate Human Services
Senator Judy Lee, Chairman

January 15, 2019

Chairman Lee and members of the Senate Human Services Committee, I am Pamela Sagness, Director of the Behavioral Health Division of the Department of Human Services (Department). I appear today to provide testimony in support of Senate Bill 2028.

Senate Bill 2028 provides an appropriation to the Department for the purpose of providing behavioral health prevention and early intervention services. In addition, it specifies that half of the allocation be utilized for prevention and early intervention efforts in mental health.

The Behavioral Health System Study published April of 2018 noted an overarching theme, that North Dakota's behavioral health system—like many others throughout the country—spends a majority of its resources on residential, inpatient, and other institution-based services with relatively fewer dollars invested in prevention and community-based services. Studies of primary prevention activities have documented benefit-per-dollar cost ratios as high as \$64 per each dollar invested. Failing to prevent and intervene represents a lost opportunity to avoid the enormous personal and societal costs associated with behavioral health conditions. The Behavioral Health System Study noted that stakeholders emphasized a need for more state investments in prevention given the potential return on investment for these strategies.

The Behavioral Health System Study also noted most of the current prevention activities in North Dakota are focused on substance use prevention, with fewer initiatives promoting social and emotional wellness and mental health-specific

prevention strategies. The 65th Legislative Assembly passed House Bill 1040 appropriating \$150,000 to the Department for the purpose of establishing a children's prevention and early intervention behavioral health services pilot project in the school system; including services to children suffering from the effects of behavioral health issues. Although focused on the entire continuum of care, this pilot project focuses on prevention and early intervention. This work is expected to broaden implementation of early intervention efforts in order to identify the "silent kids" in our school systems at risk of developing a behavioral health disorder. 2017 House Bill 1040 funding ends June 30, 2019.

The Behavioral Health Division oversees the state's substance abuse prevention system and administers funding to build community infrastructure surrounding the implementation of evidence-based prevention strategies. For the 2017-2019 biennium only \$100,000 of state general fund dollars were appropriated for primary prevention. This was a reduction from the previously appropriated \$360,000 during the 2015-2017 biennium for the state's Parents Lead program, which has shown positive outcomes.

In conclusion, preventing behavioral health problems before they occur offers the greatest return on investment because of its potential to head off the significant costs associated with behavioral health conditions over the lifetime.

This appropriation to the Department for behavioral health prevention and early intervention services has the potential to address Human Services Research Institute (HSRI) goals #2, 3, 5, 9, 10, 11, 12, and 13.

This concludes my testimony, and I am happy to answer any questions.