June 13, 2022

Stefan Gildemiester Director, Health Economics MN Department of Health Submitted via email

Dear Mr. Gildemeister

Thank you for the opportunity to provide comments as part of the public interest review process of the Fairview Health Services/Acadia Healthcare proposal for 144 bed licenses to build an adult mental health hospital in Saint Paul through an exemption to Minnesota's hospital bed moratorium law.

We remain supportive of the public interest review process as a way to provide additional perspectives on the Fairview proposal within the context of their existing capacity as well as the community's needs. While we understand that this process can be resource intensive for both the applicant and the Department, it creates an important dialogue among stakeholders and policy makers about the impacts of adding resources into the health care system.

Allina Health is one of the largest mental health and addiction service providers in the state, with 250 staffed inpatient beds across 7 hospitals serving over 7500 patients annually, a network of 12 emergency departments with 24/7 mental health staffing and over 20,000 annual visits, extensive partial hospitalization and day treatment services caring for over 400 people every day, and robust outpatient services providing over 350,000 visits per year. Even with our strong commitment to mental health and addiction services, we know that access to adolescent, adult, and geriatric inpatient mental health services remains a critical need across the state.

The original publicly posted proposal raised concerns that we shared in our March 8, 2022 letter to legislators, including the new mental health hospital care model will not have an emergency department (ED), which eliminates an access point to receive care for people in crisis in the east metro, regardless of their insurance status. However, we are pleased to see some monitoring and reporting requirements in place as part of HF 2725, signed into law on June 2. Article 1, Subd 1, sec 31 states that upon completion of the construction project, the commissioner of health shall monitor the hospital, including by assessing the hospital's case mix and payer mix, patient transfers, and patient diversions. The hospital must have an intake and assessment area. The hospital must accommodate patients with acute mental health needs, whether they walk up to the facility, are delivered by ambulances or law enforcement, or are transferred from other facilities. The hospital must annually submit de-identified data to the department in the format and manner defined by the commissioner. We are hopeful these monitoring and reporting mechanisms will support and enable continued discussion to ensure equitable access for patients.

The legislative requirements address our primary concerns with a new care model and we hope to see that this new model enhances our community's access to mental health services in the East metro for all who need care. Please contact Kristen McHenry at Kristen.McHenry@allina.com if you have any additional questions or would like further information. Thank you.

Sincerely,

Jill Ostrem President, United and Mercy Hospitals Allina Health

Joe Clubb, MSW, LISCSW Vice President, Operations, Mental Health and Addiction Allina Health

Brian Palmer, MD Vice President, Mental Health and Addiction Allina Health