

January 25, 2024

Rep. Felicia Brabec, Chair Health Policy Subcommittee on Behavioral Health  
**Re: Support of HB 5114**

Dear Reps. Felicia Brabec and Carrie Rheingans, and Health Policy Subcommittee on Behavioral Health,

Thank you for this opportunity to share with you the bill to amend the Michigan Mental Health Code (MHC) to specifically include PAs, NPs, and CNAs, and thus promote access to treatment for Michiganders in need of mental health care.

According to the National Alliance on Mental Illness (NAMI) Michigan State Fact Sheet, 93.5% of our adults with substance use disorder do not receive treatment. 60% of our children with depression do not receive treatment. 4.2 million Michiganders live in areas with mental health provider shortages. One in four people with serious mental illness are arrested, with the upshot being that 70% of children and 40% of adults currently incarcerated have at least one mental health condition. 70% of children in juvenile detention. Is this acceptable?

According to the Michigan Department of Health and Human Services (MDHHS) a Michigander dies every 6 hours from suicide. That means we lose over 1400 members of our community annually. These deaths are preventable. PAs and NPs and CNAs are capable and ready to decrease the number of these deaths, but because of the hamstrings of our very outdated MHC, we as providers are standing on the sidelines watching while parents lose their children, children lose their parents, and we lose our community. When a child loses a parent to suicide, that child's suicide risk increases ten-fold. So if we prevent one suicide, we save many lives. But when I am not included as a mental health provider in our MHC, employers aren't sure they can hire me, psychiatrists aren't sure how I can help, mental health patients don't know I can help, and my PA colleagues choose other areas of practice because they want to use their training and skills. Or they go work in other states where they are recognized as mental health providers. This leaves our patients here in Michigan with an ongoing but entirely preventable lack of access to mental health care.

In the eight years since we first began our efforts to be included in our MHC, Michigan has lost about 12,000 people to suicide. How many more years are we going to let this go on and how can we justify doing so?

I'd like to share the stories of two patients and the ways in which their safety was jeopardized because of our current MHC.

When I worked on the adult inpatient unit at Michigan Medicine, a critically ill patient came to my team in need of treatment for severe, psychotic depression. Her level of function had declined to the point she could not voluntarily sign herself in for treatment and she required certification for admission. She came alone via ambulance, directly from a hospital in a small town up north. The discharging hospital were delayed getting her out, and by the time she arrived her certification had expired. Because I could not write a new certification, I could not admit her. I could not order medication, or labs, or provide any care. This trembling, frightened, psychotic woman had to sit alone in an empty room just off our unit, waiting while I left to find a physician to come write her certification. Passing HB 5114 can change that scenario.

When I worked in a community outpatient clinic, I had a youngster with severe behavioral problems who had made repeated death threats to peers and staff at her school. While she was in my office she tried to pick up chairs to throw and tried to get out the window of my second floor office. I could not get her an ambulance for safe transport to the hospital because I could not write the certification required by EMS to take her there. Passing HB 5114 can get children desperately needed care instead of having them incarcerated because of mental illness.

I wanted to share these patients' experiences to illustrate the need for including PAs, NPs, and CRNAs in the Michigan Mental Health Code, and to emphasize that the goal of updating the MHC is to ensure access to safe and timely treatment for everyone. Thank you again on behalf of Michigan's mental health patients, their families, and those of us who treat them, for your support in sponsoring this bill.

Sincerely,

Alison Badger, PA-C, Geriatric Psychiatry, Michigan Medicine

<https://www.nami.org/NAMI/media/NAMI-Media/StateFactSheets/MichiganStateFactSheet.pdf>