

EXHIBIT 1
DATE 1-17-05
HB HB 255

HOUSE HUMAN SERVICES COMMITTEE

HB 255
Representative Don Roberts
January 17, 2005

Deaconess Billings Clinic

Testimony

The proposed amendment to Section 53-21-102, MCA, is designed to clarify that a Mental Disorder can, and often will, co-occur with a substance abuse disorder but that such co-occurrence should not disqualify someone from receiving necessary mental health treatment.

Co-occurring disorders are defined as at least one substance abuse disorder, plus at least one major mental disorder (e.g., major depression, bipolar disorder, schizophrenia or other psychotic disorders). About 50% of those individuals with serious mental disorders are affected by substance abuse. Approximately 3-5% of the adult population is affected by co-occurring disorders in any given year.

Researchers have established consistent findings about co-occurring substance abuse and mental disorders:

1. Co-occurrence is common and is associated with many negative outcomes (including higher rates of relapse, hospitalization, violence, incarceration, homelessness and serious infections such as HIV and hepatitis.) These negative outcomes reflect the complexity and the potential lethality of these disorders when left untreated or treated as separate disorders.
2. Treatment must be based on the premise that co-occurring disorders are the expectation, not the exception. Barriers to effective treatment for co-occurring disorders arise where treatment systems are separate rather than integrated. These barriers include separate eligibility criteria and separate laws. (*CO-CAP MONTANA, State Incentive Grant Proposal Submitted by Office of the Governor, RESPONSE to # TI 03-003 (COSIG) pp. 6-8*).

Currently, Montana Code Annotated, Title 53, Chapter 21, Part 1, (2003) which deals with the treatment of the **Seriously Mentally Ill**, defines “Mental disorder” as “any organic, mental, or emotional impairment that has substantial adverse effects on an individuals’ cognitive or volitional functions.” Sec. 53-21-102(9)(a), MCA. The statute goes on to specifically exclude from the “Mental disorder” definition an “addiction to drugs or alcohol” or “drug or alcohol intoxication.”

The unintended consequence of the statute’s present wording often denies necessary mental health treatment to those that need it the most. Not only does the statute presently contradict current research but also the State of Montana’s mission to provide a **Comprehensive, Continuous, Integrated System of Care**. Amending the statutory definition of “Mental disorder” so that mental health patients with co-occurring disorders are not barred from necessary treatment, would be a giant step forward in completing this mission.

Joan Daly – Director of DBC Psychiatric Services – 657-3997
Jani McCall – DBC Lobbyist – 670-3084