

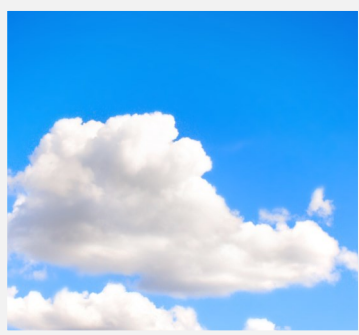
NORTH DAKOTA

Public Health Association

2017

LEGISLATIVE PRIORITIES

TOBACCO PREVENTION



Local health departments and other health organizations have partnered with the Center for Tobacco Prevention and Control Policy (BreatheND) since 2008 to implement a comprehensive statewide program to educate and pass effective policies and interventions within North Dakota to prevent and reduce tobacco use.

Evidence based tobacco prevention interventions focus on policy, systems and environmental change and include the goals of preventing initiation, eliminating exposure to secondhand smoke, promoting quitting, and building capacity and infrastructure to carry out a comprehensive program.

These efforts are working. Youth smoking rates in North Dakota have dropped from **22.4%** in 2009 to **11.7%** in 2015, and adult smoking rates have dropped from **21.9%** in 2011 to **18.7%** in 2015.

North Dakota Public Health Association supports continued funding for the Center for Tobacco Prevention and Control Policy (BreatheND), maintenance of the comprehensive program, as well as partnerships that have been created to improve health for all North Dakotans.

Maintenance of this program and funding will be integral to further reducing youth and adult rates as well as providing tobacco-free environments.

BEHAVIORAL HEALTH

North Dakota Public Health Association supports improvements to the behavioral health system in North Dakota that will improve access to behavioral health and substance abuse treatment services.

We support efforts to increase the behavioral health workforce - particularly in rural areas, ensuring that the State Medicaid Program covers essential behavioral health benefits for all recipients, and integration of behavioral health into primary care settings.

The state's alarming rates of opioid abuse is a call to action that cannot be ignored, yet it is estimated that **less than 1 in 10 individuals needing treatment for substance use disorders can actually access needed services in North Dakota.** Lifesaving medication assisted treatment for addiction is available in very few areas of the state, even though the effectiveness is widely established.

NDPHA supports new funding that will address service shortages, expand the workforce, and create an integrated system of care in North Dakota. Our most vulnerable residents deserve this commitment.

Further, NDPHA opposes redirection of other public health funds designated for the prevention of chronic diseases in order to address these critical behavioral health needs.

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North Dakota approved Medicaid expansion during the 2013 legislative session. As of December 2015, approximately 20,000 North Dakota residents had enrolled in the Medicaid expansion program, some receiving health care coverage for the first time in their adult lives.

The coverage allowed a previously uninsured population to receive preventive care, such as colorectal and breast cancer screening, and treatment for deadly chronic conditions.

Further, the expansion of Medicaid has led to a reduction in hospital admissions and expensive emergency room visits, and reduced uncompensated care provided at hospitals across North Dakota.

Prevention and early detection of behavioral health issues, including substance abuse, reduces the far-reaching societal costs of residents not receiving this care.

North Dakota Public Health Association supports the continuation of the Medicaid expansion program in North Dakota with dedicated general funds to meet the federal match required in federal fiscal year 2017.

This leverage of federal dollars has a multiplying effect on the economy of North Dakota, but more importantly, leads to better health and productivity among residents.

North Dakota Public Health Association supports legislation that will improve access to dental care and improve oral health among North Dakotans.

In North Dakota:

- 70% of children enrolled in ND Medicaid did not see a dentist in 2013
- Native American children had more than twice the need for treatment than their non-native peers
- As of March 2016, 17 counties had no practicing dentist.

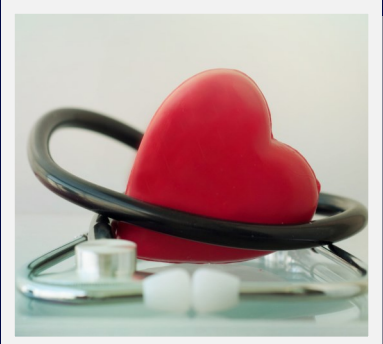
We support development and implementation of new innovative workforce models that have shown promise in reducing oral health disparities particularly in underserved and rural areas.

Highly trained dental therapists have demonstrated significant improvements in access to care and are providing high quality dental services to a largely Medicaid and uninsured population in neighboring Minnesota.

As an additional member of the dental team, dental therapists provide routine and restorative care to adults and children, allowing dentists to perform more complex care.

2017

MEDICAID EXPANSION



ORAL HEALTH