



Minnesota Direct Care and Treatment: Advisory Committee Meeting

OCTOBER 7, 2026

ANOKA-METRO REGIONAL TREATMENT CENTER, 3301 NORTH 7TH AVENUE, ANOKA, MN

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Today's Agenda

Welcome

1

Presentation: Mental Health Substance Abuse and Treatment Services

2

DCT Advisory Committee Business

3

Open Public Comment

4

Wrap Up and Next Steps

5



Direct Care and Treatment Overview

Direct Care and Treatment



DCT is a highly specialized behavioral health care system

Our Mission, Vision and Values



Mission

We support meaningful lives through specialized behavioral health services others do not provide.

Vision

A Minnesota where everyone receives the behavioral health services they need.

Direct Care and Treatment

- More than 12,000 civilly committed patients and clients served annually.
- Services are delivered at about 150 sites statewide.
- Services are delivered by about 5,500 employees.



FY 2026 Operating Budget

\$786.6 million

Our Core Services

- Community-Based Services
- Forensic Services
- Mental Health and Substance Abuse Treatment Services
- Minnesota Sex Offender Program
- Outpatient Services
- Support Services



Understanding DCT's Place on the Continuum of Care

Hospitals & All Other Community-Based Mental Health Services

DCT



Mental Health & Substance Abuse Treatment Services



Acute inpatient behavioral health care

Mental Health & Substance Abuse Treatment Services

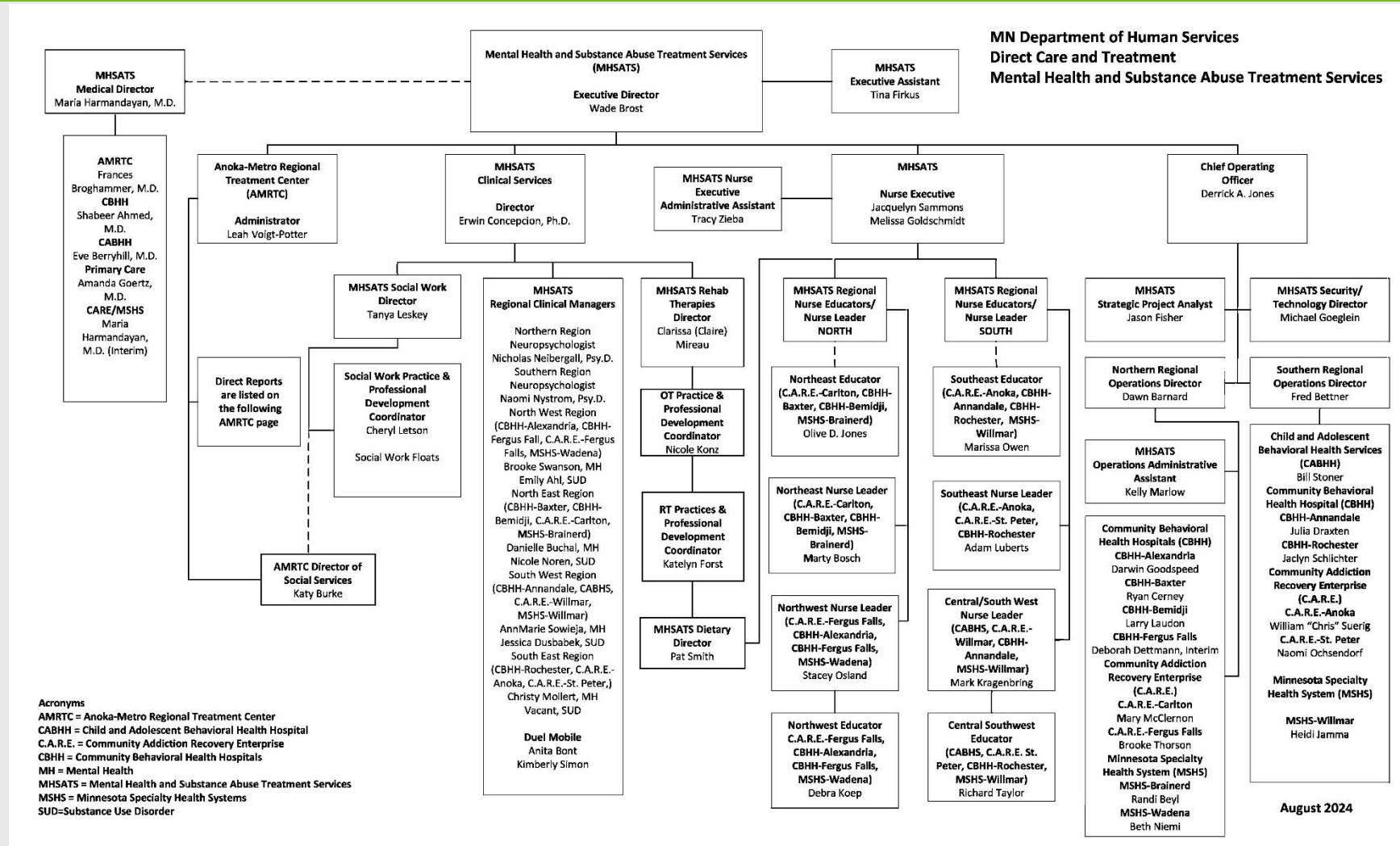
Includes

- Anoka-Metro Regional Treatment Center
- Six Community Behavioral Health Hospitals
- Child and Adolescent Behavioral Health Hospital
- Three Community Addiction Recovery Enterprise Programs
- Three Minnesota Specialty Health Systems-IRTS
- Employees: About 1,400
- Budget: \$193 million
- Main Office: Vadnais Heights



Wade R. Brost
Executive Director

MHSATS Organizational Chart



Anoka-Metro Regional Treatment Center

- DCT's largest psychiatric hospital
- A 96-bed hospital on a secure campus in Anoka, MN
- Patients have been civilly committed as mentally ill or court ordered for treatment
- Patients admitted from anywhere in Minnesota



Community Behavioral Health Hospitals

- Six regional psychiatric hospitals located statewide
- Each hospital has 16 beds
- Provides short-term inpatient psychiatric care
- Patients admitted from anywhere in Minnesota
- Patients stay about 48 days



Child and Adolescent Behavioral Health Hospital

- Acute care psychiatric hospital for children ages 4 to 18
- The 16-bed hospital is located in Willmar, MN
- Serves kids and teens with complex mental illness
- Patients have multiple diagnoses ranging from brain and behavior disorders to psychiatric and traumatic stress conditions



Community Addiction Recovery Enterprise

- Provides inpatient substance use disorder treatment, relapse prevention and aftercare planning to adults
- Many patients have co-occurring mental illnesses
- Three 16-bed locations statewide



Minnesota Specialty Health System

- Three regional 16-bed intensive residential treatment (IRTS) facilities
- Provides time-limited mental health treatment in a residential setting to adults who no longer require hospitalization or other inpatient treatment but who need a period of structured care before returning home



Key Updates

- Staff vacancy rate is 8.5%
- FY26 staff turnover rate was 13.3%
- Patient volumes are greater than 92% of available beds
- Served more patients in FY26 than in FY25

- All hospitals have completed the Joint Commission recertification process
- All CARE/MSHS have been through MDH, DHS and TJC recertification surveys
- AMRTC 50 Bed Expansion
- CARE Anoka Relocation

Welcome to AMRTC



Anoka Metro Regional Treatment Center • 3301 7th Ave N, Anoka, MN 55303 • 651-431-5000

All About AMRTC

- Founded in 1900
- State of Minnesota's flagship psychiatric hospital
 - Inpatient level of care
 - Serves civilly committed patients who are court-ordered to the DCT Executive Board
- Serves patients from all 87 counties in MN
- 96 beds
- 500+ staff



Patients Served

- Gender diverse individuals ages 18+
- All patients are court ordered, many have criminal charges
- Admissions are coordinated through the Central Pre-Admissions Office

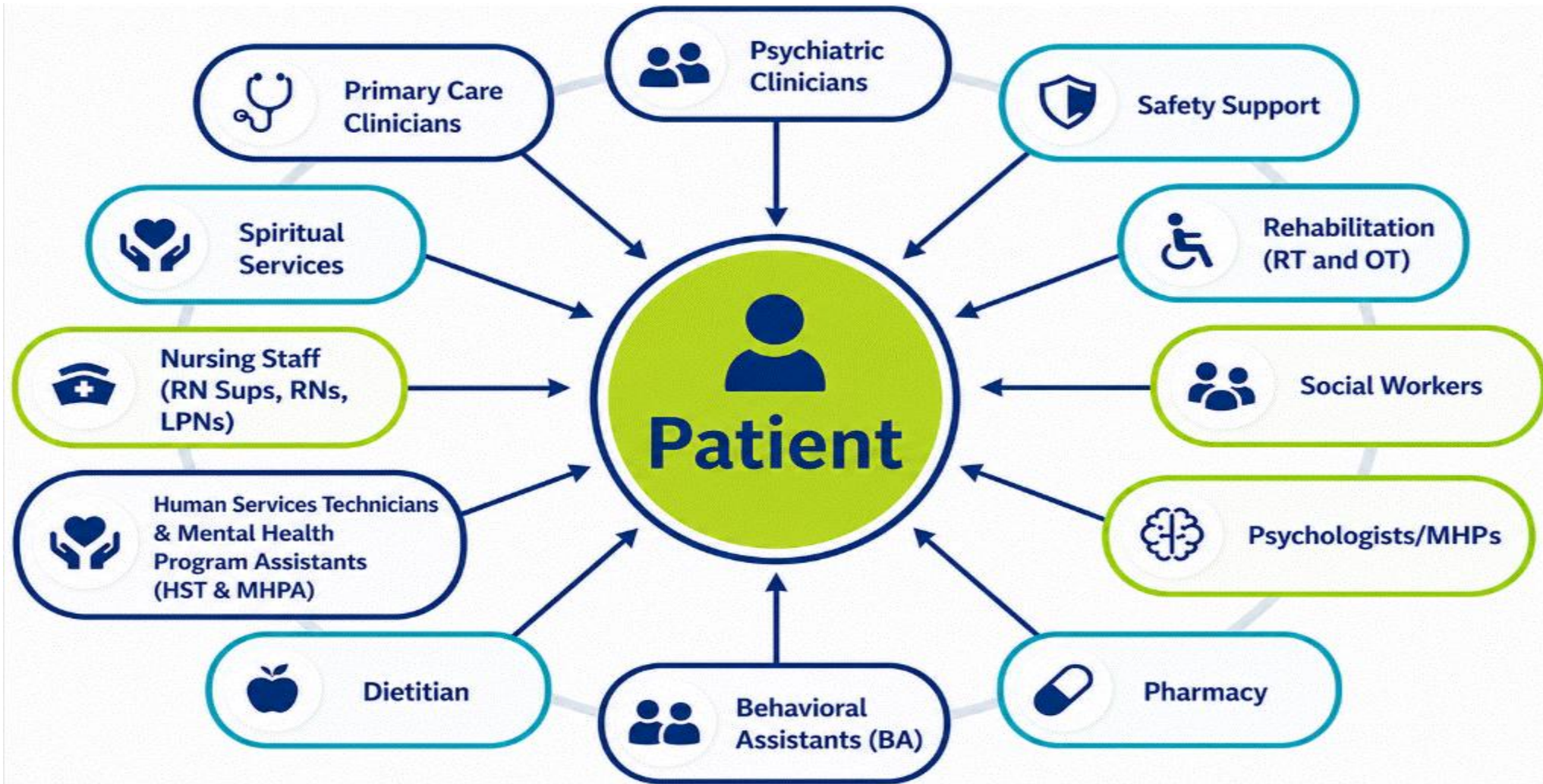
Common Primary Diagnoses

- Thought disorders (e.g., schizophrenia)
- Mood disorders (e.g. bipolar disorder)
- Personality disorders

Common Additional Diagnoses

- Chemical dependency
- Traumatic brain injury
- Diabetes, heart disease, and other chronic medical conditions

Patient-Centered Care



Effective Care Through Core 4

- DCT-developed model integrating four best practices to promote effective engagement. Core 4 is both a *culture* and *philosophy* of care.



- AMRTC receives appropriated funding from the state Legislature to provide patient care.
- Any revenue received through insurance or county payments for services provided, is returned to the state's General Fund.
- To receive federal funding, AMRTC must be licensed as a hospital by the Minnesota Department of Health (MDH).
- AMRTC must meet all "conditions of participation" when surveyors conduct an inspection of all patient care services, quality, patient safety, infection control, environment of care, and governance.

50-Bed Expansion Project

- \$75 million investment
- Construction got underway in August and is targeted for completion in fall of 2028
- When new wing is complete and fully staffed, AMRTC will be able to treat 200 or more patients each year, depending on acuity.





Questions?

DCT Advisory Committee Business



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MN DCT Advisory Committee Business



Advisory Committee to
review and discuss the
following items:

- **Committee membership**
- **Site visit debrief**
- **Upcoming meeting cadence and agenda planning**
- **Additional Advisory Committee business**

Open Comment Period



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MN DCT Advisory Committee Meeting Open Comment

The Committee is dedicated to creating a consistent, fair and transparent method for members of the public to provide comments during meetings. The last 15 minutes of each meeting will be dedicated open comment.

- Members of the public who would like to comment must submit the form on the MN DCT Advisory Committee webpage.
- Comments are limited to topics within the DCT Advisory Committee's scope.
- Each speaker is allotted about three minutes to provide their comment.
- Public comment rules and expectations include:
 - Commenters must adhere to the amount of time allotted.
 - Commenters must address the committee respectfully. Personal attacks, profanity, or disruptive behavior are not permitted.
 - Presentations or materials are not allowed.
 - Comments must not contain any personal health information (PHI) or personally identifiable information (PII) about individuals who are associated with or have received care at DCT facilities.
- The Committee Chair or meeting staff may issue a warning or end a speaker's comment if rules are violated.
- During the public comment, the Advisory Committee will listen to comments and will not engage in discussion or provide responses.

Wrap Up and Next Steps



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Wrap Up and Next Steps

> Upcoming Meetings

- > To be determined
- > Information on the Advisory Committee and upcoming meetings available on the DCT Advisory [webpage](#)

> **Questions or concerns:** Reach out to Dani or Jill (email addresses in chat)