



# Beaverhead and Madison Counties Stakeholder Meeting

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ZOE BARNARD

~~FRIDAY, MARCH 13, 2020~~

FRIDAY, OCTOBER 8, 2020

# Format of Presentation

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AMDD and Montana Medicaid  
Services in Beaverhead and  
Madison Counties



HCBS Waiver Overview



Crisis Services



Suicide and Substance Use/  
Misuse Prevention



Opportunities



# Role of the Addictive and Mental Disorders Division

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Oversee :

- Funding for prevention and treatment, including crisis
- Agency suicide prevention

Provide facility services

- Montana State Hospital
- Montana Mental Health Nursing Care Center
- Montana Chemical Dependency Center

AMDD is part of Montana Medicaid.



# What is Medicaid?

Insurance for low-income people with a complete benefit package that includes payment for substance use disorder and mental health treatment

The Medicaid benefit package includes two kinds of services:

- State plan services; and
- Waivers



# Medicaid Services

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- Medical
- Dental
- Hospital
- Pharmacy
- Outpatient and inpatient specialty treatment

# Substance Use Disorder and Mental Health Providers in Southwest Montana



Provider Type	Beaverhead	Madison
Therapist	8	3
Physician	6	4
Midlevel	8	9
Hospital	1	2
Clinic	1	2
Federally Qualified Health Center	1	--
School District	2	2



# Specialized Services Added to Medicaid Benefit Plan

Addition of new Medicaid Services in July 2019:

- Certified Behavioral Health Peer Support Specialists
- Substance Use Disorder: Intensive Outpatient Program

Proposed Addition of new Medicaid Services in July 2020:

- SDMI Waiver expansion
- Expansion of Program of Assertive Community Treatment



Severe and Disabling Mental  
Illness (SDMI)  
Home and Community Based  
Services (HCBS) Waiver



# Waiver Providers in Southwest Montana

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<b>Beaverhead</b>	<b>Madison</b>
2 Assisted Living Facilities	1 Nursing Care Facility
1 Medical Supply Agency	2 Assisted Living Facilities



What is a  
Waiver and  
Why do we  
have one?

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Increase in members served from 357 to 750 over three years



Simplified waitlist



People can move directly into the Waiver from the Montana State Hospital and Montana Mental Health Nursing Care Center



Improved incident management policies



Improved Service Package

# Summary of Changes



# PACT Changes: MACT

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Service for up to 50 members (ideally in a rural area) by a Mental Health Center (teams approved by DPHHS)

BRAND NEW SERVICE AS OF 7/1 Includes:

- (a) monitoring all of member's health care needs including social determinants of health;
- (b) providing intensive treatment and rehabilitative services to aid the member in recovery and reduce disability;
- (c) identifying, restoring, and maintaining the member's functional level to their best possible functioning level;
- (d) identifying, improving, and sustaining social determinants of health; and
- (e) providing individualized crisis planning and 24-hour, seven days a week face-to-face crisis intervention.



# Crisis Continuum of Care in Montana

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# SAMHSA's National Guidelines

***“anyone, anywhere, and  
anytime”***

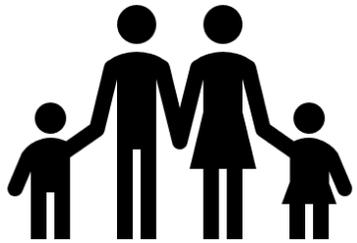
Core Services:

- Regional crisis call center
- Crisis mobile team response
- Crisis receiving and stabilization facilities



# Crisis Response in Rural Montana

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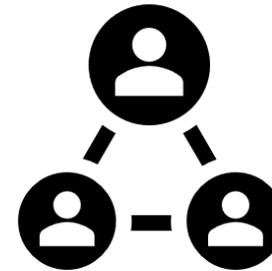
Community Members:  
neighbors, business  
owners, faith-based  
institutions, etc.



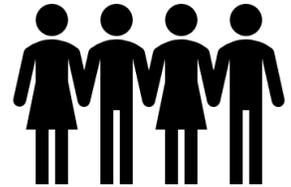
Law Enforcement



EMS / Fire



Mobile Crisis Units,  
Co-responder Units



Certified Peers

*\*Everyone can identify behavioral health needs in their community  
and know where to turn in a crisis*

*\*Neighboring communities collaborate when possible to ensure a  
continuity of support*



# Crisis Facilities in Rural Montana

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Crisis Stabilization  
and/or SUD  
Facility

- In rural regions, hospitals and emergency rooms often fill this role – ensure they are prepared
- Emergency Detentions require a secure room
- Telemedicine can expand options for service location and provider

Jail/ Court

*\* Not appropriate for behavioral health crises*

State  
Hospital

*\* Last resort for acute behavioral health crises – reserved for those who cannot be stabilized in their community*



# Questions or Talk about Suicide Prevention?



# Crisis Call Centers in Rural Montana

911

National Suicide  
Prevention Lifeline

Mental Health  
Center Lines

- Training options:
  - Mental Health First Aid (MHFA)
  - Crisis Intervention Team (CIT)
  - Question, Persuade, Refer (QPR)
- Cross-sector meetings



<http://mhombudsman.mt.gov/Home/crisiscontacts>

**MONTANA MENTAL HEALTH OMBUDSMAN**  
CRISIS PHONE CONTACTS

**NATIONAL SUICIDE PREVENTION LIFELINE: 800-273-8255 (TALK)**

Your call will be routed to the crisis center nearest to you, either:  
**The Help Center** - Bozeman  
**Voices of Hope** - Great Falls

**EASTERN MONTANA MENTAL HEALTH CENTER**

**Administrative Offices:**  
2508 Wilson  
Miles City, Montana  
Phone: 406-234-0234

**Toll Free Crisis Phone Contact:**  
Baker, Broadus, Ekalaka, Jordan, Miles City, Terry,  
800-597-6606  
Glasgow, Malta, Plentywood, Scobey, Wolf Point  
800-597-6608



# Montana Suicide Prevention Update

*Rate, Number, and Ranking of Suicide for Each U.S.A. State\*, 2018*

Rank	State [Division / Region]	Deaths	Rate	Division [Abbreviation]	Rate	Number
1	New Mexico [M / West]	536	25.6	Mountain [M]	22.0	5,407
2	Wyoming [M / West]	147	25.4	East South Central [ESC]	16.8	3,205
3	Alaska [P / West]	184	25.0	West North Central [WNC]	16.8	3,600
4	Montana [M / West]	265	24.8	South Atlantic [SA]	15.1	9,896
5	Idaho [M / West]	417	23.8	West South Central [WSC]	14.9	5,994
6	Colorado [M / West]	1,302	22.5	<b>Nation</b>	<b>14.8</b>	<b>48,344</b>
7	West Virginia [SA / South]	395	21.9	East North Central [ENC]	14.6	6,841
8	Nevada [M / West]	657	21.7	New England [NE]	13.1	1,939
9	Utah [M / West]	665	21.0	Pacific [P]	13.0	6,947
10	New Hampshire [NE / Northeast]	279	20.6	Middle Atlantic [MA]	10.9	4,515
11	Maine [NE / Northeast]	270	20.2	<b>Region [Subdivision Abbreviations]</b>	<b>Rate</b>	<b>Number</b>
12	Arizona [M / West]	1,438	20.1	West (M, P)	15.8	12,354
12	Missouri [WNC / Midwest]	1,230	20.1	Midwest (WNC, ENC)	15.3	10,441
12	Oregon [P / West]	844	20.1	South (ESC, WSC, SA)	15.3	19,095
15	Oklahoma [WSC / South]	790	20.0	<b>Nation</b>	<b>14.8</b>	<b>48,344</b>
15	Vermont [NE / Northeast]	125	20.0	Northeast (NE, MA)	11.5	6,454
17	North Dakota [WNC / Midwest]	147	19.3			
18	Kansas [WNC / Midwest]	556	19.1			
19	South Dakota [WNC / Midwest]	167	18.9			
20	Arkansas [WSC / South]	554	18.4			
21	Kentucky [ESC / South]	800	17.9			
22	Tennessee [ESC / South]	1,161	17.1			
23	Alabama [ESC / South]	823	16.8			
24	Florida [SA / South]	3,567	16.7			
25	Washington [P / West]	1,252	16.6			

Source: Obtained 12 February 2020 from CDC/NCHS's WONDER  
(to appear in *Deaths: Final Data for 2018*, forthcoming)  
<http://www.cdc.gov/nchs/products/nvsr.htm>

[data are by place of residence]  
[Suicide = ICD-10 Codes X60-X84, Y87.0, U03]

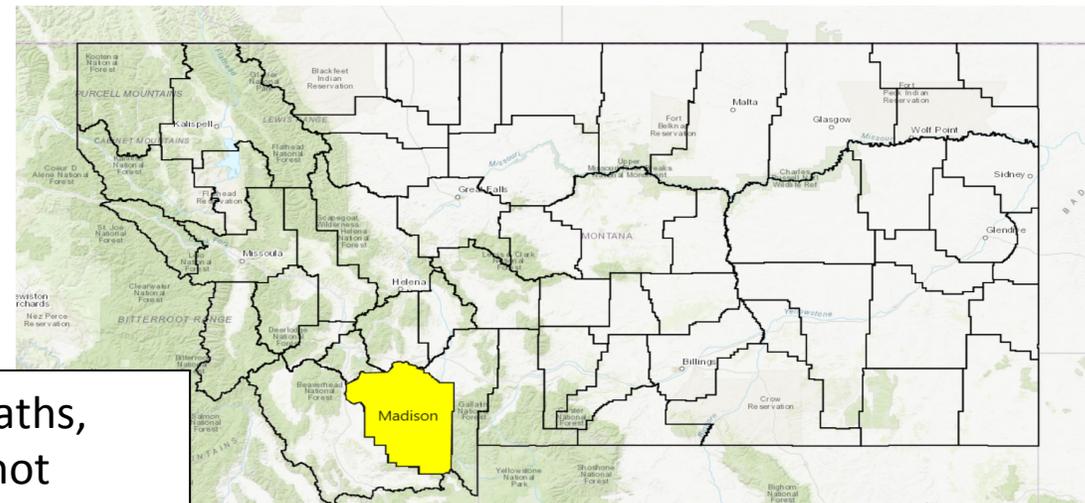
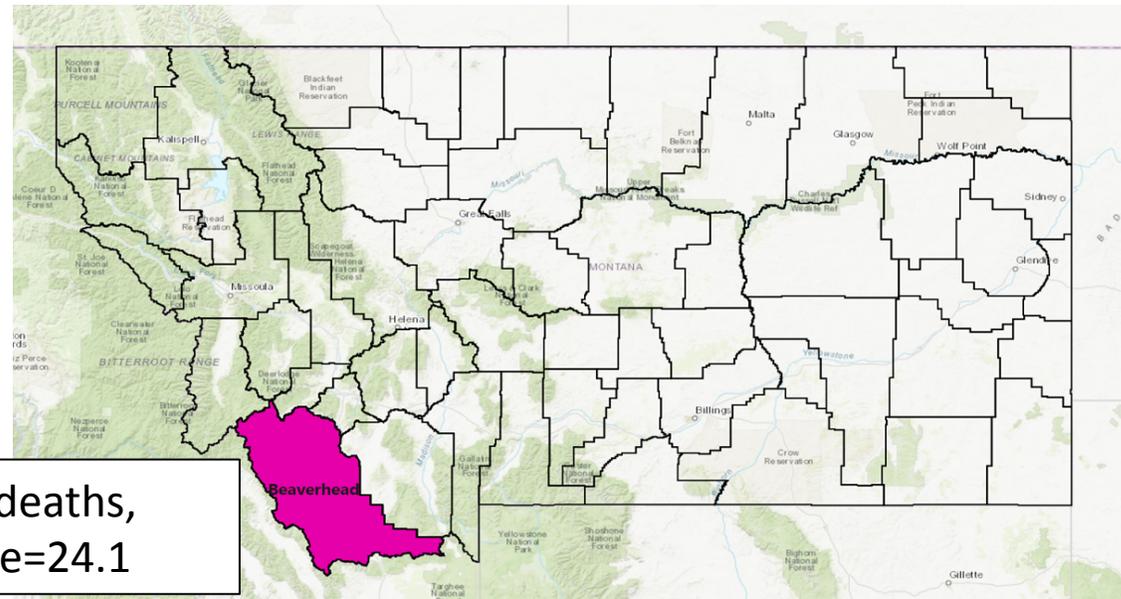
Note: All rates are per 100,000 population.

\* Including the District of Columbia.

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Suicide State Data Page 2018

# Age-adjusted Suicide Rates by County of Residence, Montana Residents, 2009-2018

PROVIDED BY OFFICE OF  
EPIDEMIOLOGY AND SCIENTIFIC  
SUPPORT,  
MT DPHHS  
RATE PER 100,000 ESTIMATED  
MIDYEAR POPULATION





# Community Solutions to Substance Use Prevention



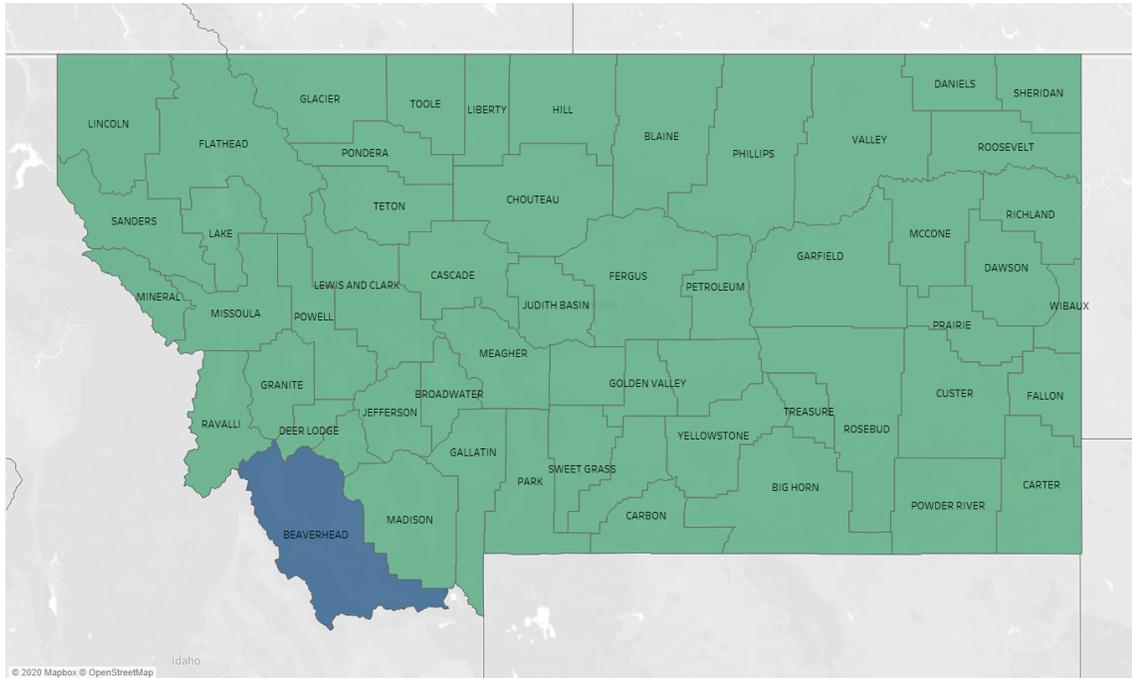
# Beaverhead County SUD Prevention

Be The Change 406 Coalition (Kim Martinell) is a funded by a federal Drug Free Community grant

- Be the Change 406 is the lead agency for implementing Communities that Care (AMDD led grant)

Block Grant Funding for .5 FTE (Andrea Schurg) through Butte Cares Regional Contractor

- Member of the Be the Change 406 Coalition
- Attends the DUI Task Force meetings
  - Promoting Vision Zero
- Will Co-facilitate the CTC implementation
- RASS trainer





# Opportunities

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SDMI Waiver Expansion and other Proposed Benefit Changes

Re-release of County and Tribal and Mobile Crisis Matching Grants

Suicide prevention RFP

Federal opiate funding

PAX Good Behavior Game



# Questions?

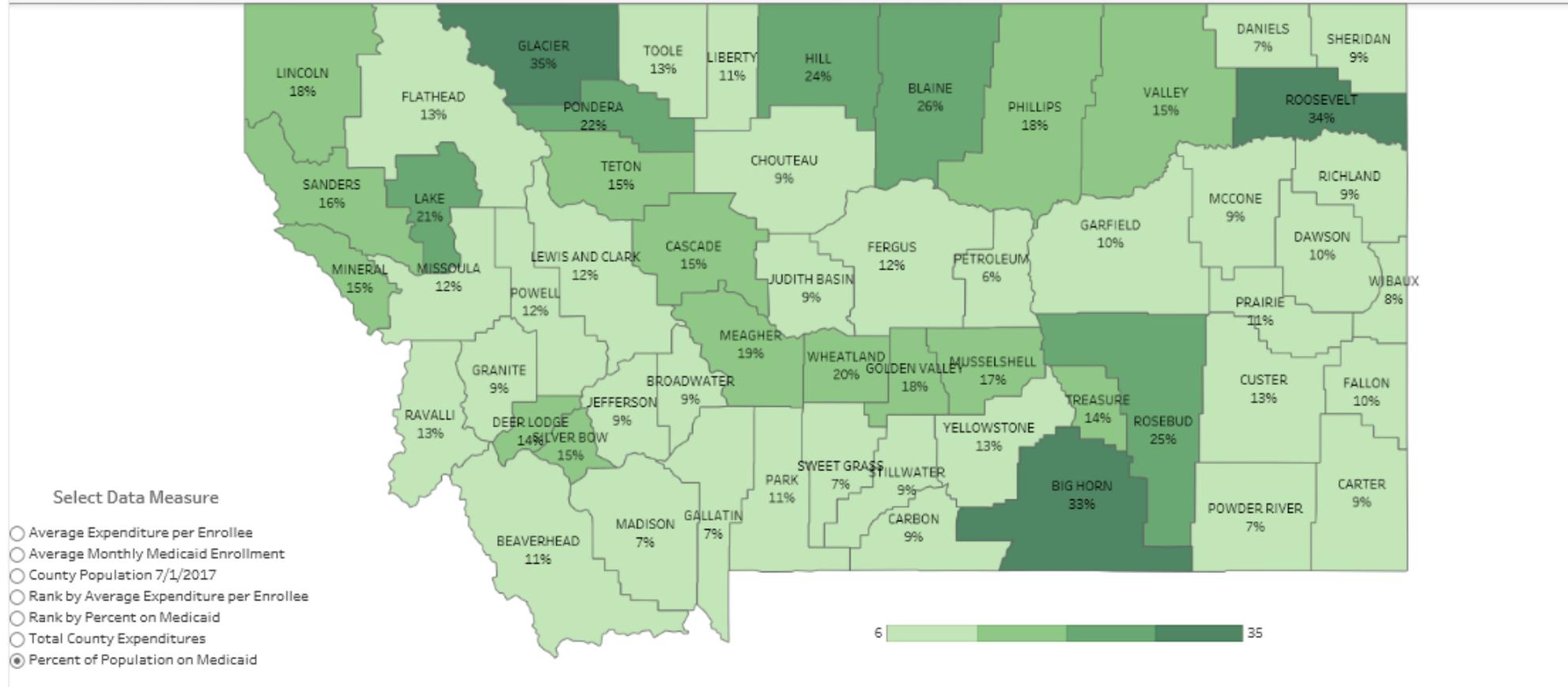
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Zoe Barnard

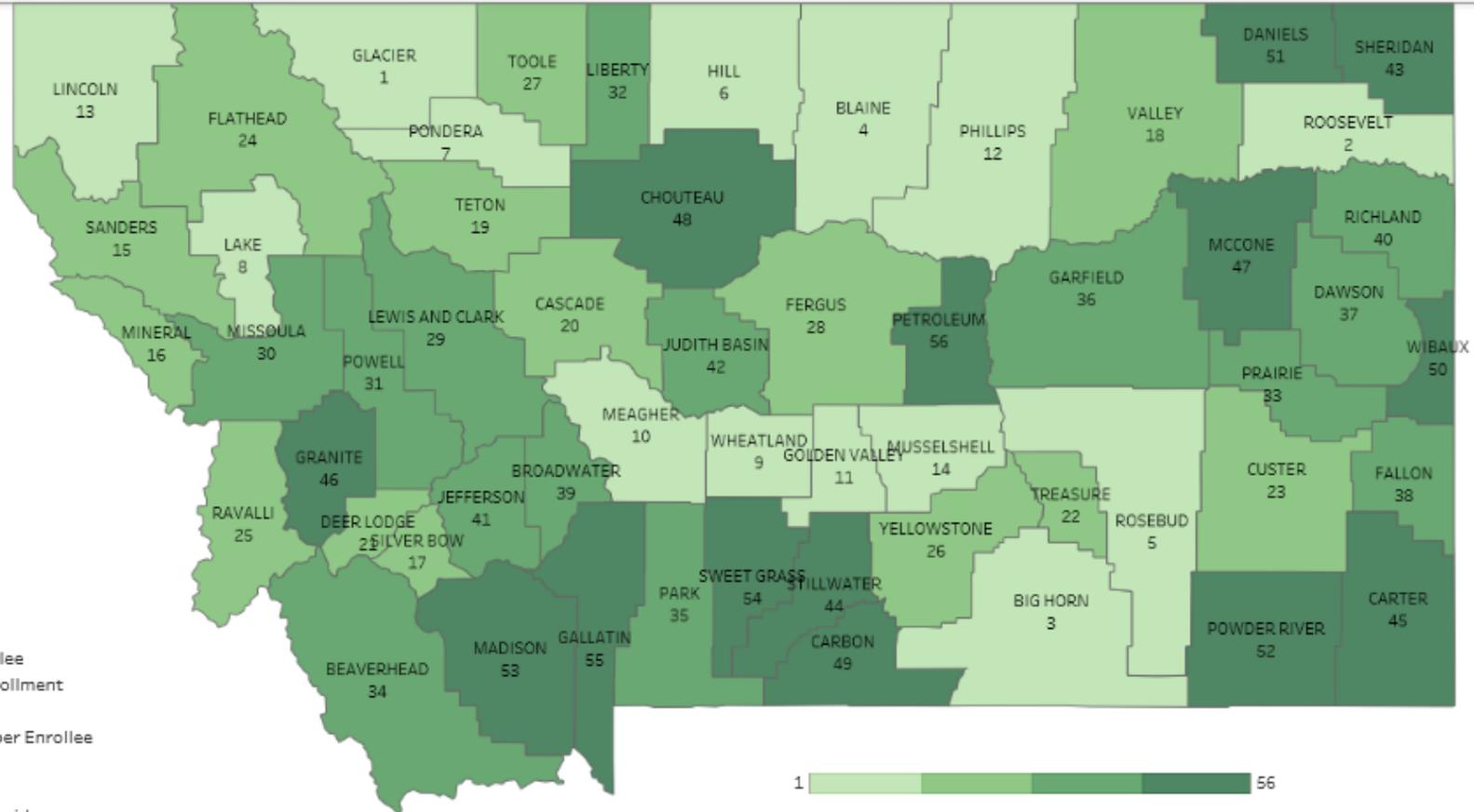
(406) 444-7044

[zbarnard@mt.gov](mailto:zbarnard@mt.gov)

SFY 2017 Medicaid Data  
Percent of Population on Medicaid



### SFY 2017 Medicaid Data Rank by Percent on Medicaid



Select Data Measure

- Average Expenditure per Enrollee
- Average Monthly Medicaid Enrollment
- County Population 7/1/2017
- Rank by Average Expenditure per Enrollee
- Rank by Percent on Medicaid
- Total County Expenditures
- Percent of Population on Medicaid

