10:00 am – 12:30 pm  Substance Use Disorder (SUD) Overview & Listening Session

The department will provide an overview of the Addictive and Mental Disorders Division’s (AMDD) continuum of substance use and mental health services. The primary contacts within the Division will be introduced. The goal will be for attendees to know who to contact within AMDD with questions about specific programs or services.

The department is interested in receiving comments, concerns and questions related to SUD reimbursement, its benefits and challenges for tribal health entities and Medicaid members, and recommendations for solutions to better serve Montana Medicaid members. Possible topics are:

- How has Medicaid expansion changed the way Tribes screen for and treat SUD? Are Tribes treating SUD earlier?
- Do Tribes receive information on Medicaid and SUD programs? How is that working?
- Is State Approval beneficial for Tribal programs? Are there barriers to State Approval?
- Have Tribal members received treatment at the Montana Chemical Dependency Center? What worked and what didn’t?
- Does the current Medicaid continuum of care provide the flexibility to deliver culturally competent services? If not, what is missing? Or what is unnecessary?
- For those who have Tribal task orders for SUD, how is that working?
- Do you know about peer support? Is it working? Are you able to get reimbursed for it?
- Are you providing the education course for DUIs for licenses to be reinstated?

Terry Macannally: 3.5; ow is MCDC viewed? Spottable responses: does not work well for NA clients. Word of mouth” lockdown facility; impression si that one infraction and they are out.

How many Native staff: Shannon, no Native staff.

Jessica, CCT: not enough tribal resources. To detox and then inpatient, no longer meet the ASAM level. More patients being sent to WA; Healing Lodge and Sundowner Ranch in WA is cheaper. Applauds department on peer support. Meet 3.7 and then detox and then don’t meet 3.5 level.

HIA: in the past, received MCDC denial, eg, for comorbidity. Speak to 30-day inpatient mh treatment. Zoe: now co-occurring staff and services.

HIA: 2 weeks wait for MCDC; other facilities like Rimrock have waits of 3 months; stopped sending to MCDC due to high number of denials if probation officers are not involved or when legal is involved.
Woman who leads smudging and talking circles

HIA: meth recovery needs 60, 90 days; 30 days is not enough; Rimrock’s 30-day program includes family day. Department does not control the services offered at Rimrock. To extend the stay, a week in advance need to request an additional week.

CCT: open beds, men’s lodge opening, had contract with Boyd Andrews who did the paperwork; CCT is now the direct contractor. Question if CCT wants the block grant, due to paperwork.

What cultural assistance does department need from Tribes, e.g., offering a sweat.

Marie: would like a group of volunteers to dive into cultural services.

CCT: will bring up that the department wants to work with TLC. Sonny Bokles

Lesa: years ago, Lesa, Linda & others went to MCDC to educate, add artwork, smudging room.

Todd: VA contracts for smudging, etc. available; HIA has two contracts

Zoe: department does not own the MCDC building

CCT: ask each client what their healing methods are.

HIA: ethical duty to counsel only those clients if you are the culturally appropriate person to do so.

CD Directors’ Meeting good place to discuss sensitivity

Northern Cheyenne: need communication devices, like translators, sign language.

1:00 pm – 2:00 pm Medically Assisted Treatment (MAT) Presentation

The department will present information on MAT, the use of FDA-approved medications, in combination with behavioral therapies and support services, to provide a whole-patient, patient centered approach to the treatment of alcohol and opioid use disorders. The presentation will be approximately 20 minutes with the remainder of the time devoted to questions and discussion.

Greg and Earl

2:15 pm – 4:00 pm Opioid Initiatives

- Federal Opioid Funding: State-Targeted Response (STR), State Opioid Response (SOR), and Tribal Opioid Response (TOR)

  AMDD will present its approaches to the STR and SOR as well as the federally required collaboration as the Single State Authority (SSA) with TOR. Then, each Tribe will have the opportunity to present their unique TOR approach. There will be time for discussion and feedback about how to make the collaboration most effective.
• Opioid Treatment Program (OTP)/Office Based Opioid Treatment (OBOT) Proposed Rule
  The department seeks Tribal consultation on the proposed MAT payment rule draft. The rule has not yet been filed by the State.

• Pharmacy Payment Rule Draft
  The department seeks Tribal consultation on the proposed Pharmacy payment rule draft. The rule has not yet been filed by the State.

Included in this presentation will be:
  o Overview of Centers for Disease Control opioid prescribing guidelines
  o Definition of a “new” opioid prescription
  o How the rule changes will impact Medicaid opioid prescriptions
  o How the rule changes impact members
  o Timeline for implementation of rule changes

4:00 pm – 4:45 pm   Tribal and County Matching Grants
  During the last Legislative Session, the word “Tribal” was added to state statute via House Bill 328 that governs matching grants that are provided to entities to decrease the number of persons committed to the Montana State Hospital. AMDD staff will present on the statutory requirements of this program and seek feedback from Tribes about what would make these grants work best for them.

4:45 pm – 5:00 pm   Public Comment and Wrap Up for the Day

Montana Department of Public Health and Human Services
Medicaid and Health Services Branch Tribal Consultation December 4-5, 2018

Tribal Consultation Agenda
DAY 2 of 2
Wednesday, December 5, 2018
8:30 am – 2:00 pm

9:30 am – 11:00 am   Introduction to the State Unit on Aging
  The State Unit on Aging implements the programs associated with the Federal Older Americans Act. The department will provide an overview of the services and identify areas where collaboration with Area Agencies on Aging could expand services to Native American elders.

State Plan on Aging
  The department will provide information on the development of the State Plan on Aging for Federal Fiscal Year (FFY) 2020 through FFY 2023. The department is requesting input from tribal leaders to adequately capture the needs of elders that could be addressed by Older Americans Act programs.
11:00 am – 11:30 am  Native American Cost Share Exemption Change
As part of the approval of MT State Plan Amendment 17- 0040, the Centers for Medicare and Medicaid Services (CMS) has required the State to implement the exemption of the AI/ANs in a manner that is consistent with federal rules. The State will discuss how this came about, what to expect with the changes, and implementation timeline.

11:30 am – 12:00 pm  Lunch (provided)

12:00 pm – 1:00 pm  Part C Presentation and Question and Answer Session
The department will provide an introduction to Part C and Family Education and Support (FES) Services. These services are designed as early intervention services for children who may be at risk of developmental disabilities. Question and answer period to follow.

1:00 pm – 1:45 pm  Medicaid Rates, Governor’s Budget, Legislative Session
- Medicaid Rate Restoration Effective July 1, 2018
- Governor’s Budget
- 2019 Legislative Session
  - Medicaid Expansion Re-authorization
  - Department Legislation with Direct Impact on Tribes

1:45 pm – 2:00 pm  Public Comment and Wrap Up