# Presentation to the 2025 Health and Human Services Joint Appropriations Subcommittee

Behavioral Health and Developmental Disabilities Division Medicaid and Health Services Practice



# Overview

Meghan Peel, Behavioral Health and Developmental Disabilities Division Administrator



### **Division Overview**

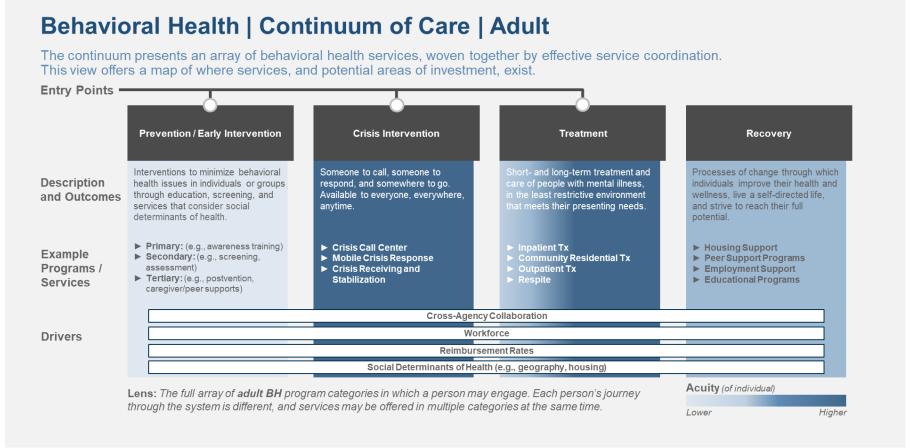
- The Behavioral Health and Developmental Disabilities Division (BHDD), within the Department of Public Health and Human Services (DPHHS), administers a wide range of services to facilitate the efficient delivery of effective services to adults and children with behavioral health (BH) challenges and/or developmental disabilities (DD).
- BHDD's work is guided by the goal of supporting Montanans in living full lives within their communities.
- BHDD consists of four bureaus and two programs with 104 PB.
- BHDD's FY 2025 Budget was \$565.1 million, with 62% funded with federal funds.

# Summary of Major Functions

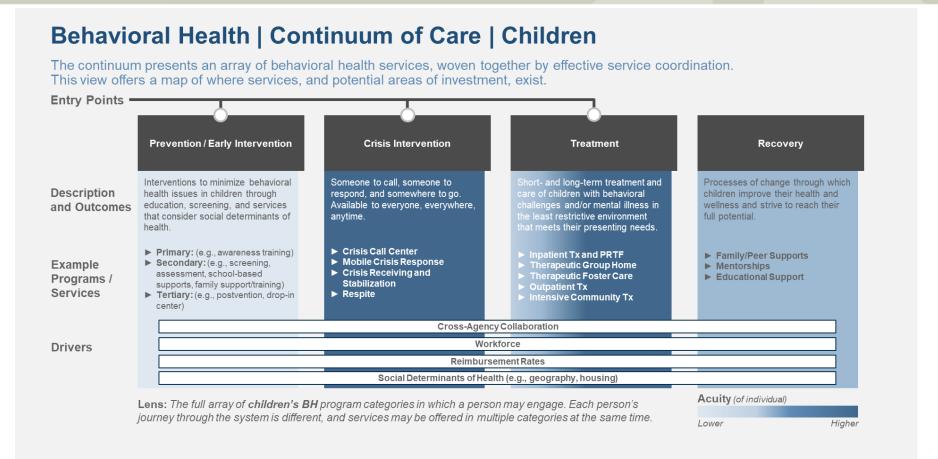
Meghan Peel, Behavioral Health and Developmental Disabilities Division Administrator



## **Behavioral Health Continuum of Care**



## **Behavioral Health Continuum of Care**





## **Prevention / Suicide Prevention**

- Distribution of Naloxone in FFY 2024, 33,316 Naloxone kits were distributed across Montana
- Suicide Prevention Program Training
  - 2,600 community members, employers, first responders, educators, and other stakeholders were trained in suicide awareness
  - 2,500 health care and BH providers were trained in suicide risk assessment and intervention
  - 170 school counselors were trained in Suicide Safe Care for Students.
- Public Awareness Campaigns developed through collaboration with the Montana Broadcaster's Association



## **Early Intervention**

#### Screening Linked to Care

- The Rural Behavioral Health Institute (RBHI) utilizes an evidence-based digital suicide risk screening tool that connects students with elevated risk of suicide to same-day mental health care in middle and high schools across the state.
- During the 2023 -2024 school year, 1,130 students met criteria for highest risk of suicide, and 100% received same-day care.

#### STUDENTS SCREENED BY RBHI

School Year	Number of	Number of	Number of Students with
	Screenings	Schools	Recent Suicidality
2022 – 2023	11,213	62	915
2023 – 2024	16,771	77	1130
2024 – 2025	23,000+ Anticipated	85+ Anticipated	479+ Anticipated

## **Early Intervention Outcomes**

- Data from Rural Behavioral Health Institute (RBHI) December 2024 Report.
- RBHI compared baseline and first rescreen data for the 3,581 students screened twice by Fall 2024. These data include results from prior school years for adequate statistical power.
- As for all prior comparisons, depression and anxiety symptoms were significantly reduced among all students, with the largest reductions among those with severe symptoms.

Table 8. Re	All Students (Score 0-27)			Any Symptoms (Score 5-27)			Severe Symptoms (score 15-27)		
	Spring Screen	Fall Screen	Change	Spring Screen	Fall Screen	Change	Spring Screen	Fall Screen	Change
Mean	5.34	4.66	-0.703	10.2	7.78	-2.42	18.3	11.5	-6.78
Std. Dev.	5.45	5.25	4.69	4.79	5.74	5.71	3.09	6.73	6.76
# Students	3581	3581	3581	1574	1574	1574	292	292	292
% Change			-13%			-24%			-37%

Table 9. Re	Table 9. Reductions in anxiety symptom severity (GAD-7 score) over time								
	All Students (Score 0-21)			Any Symptoms (Score 5-21)			Severe Symptoms (score 15-21)		
	Spring	Fall		Spring	Fall		Spring	Fall	
	Screen	Screen	Change	Screen	Screen	Change	Screen	Screen	Change
Mean	4.7	4.23	-0.483	10.3	7.86	-2.42	17.6	12.1	-5.52
Std. Dev.	5.34	5.19	4.4	4.55	5.76	5.46	2.08	6.17	6.06
# Students	3581	3581	3581	1375	1375	1375	277	277	277
% Change			-10%			-23%			-31%

## **Crisis Intervention Services**

BHDD is working towards a statewide crisis system based on a national best-practice model called the Crisis Now Model. This model is designed to provide people experiencing a crisis with appropriate and effective care to avoid unnecessary emergency medical services and law enforcement use.

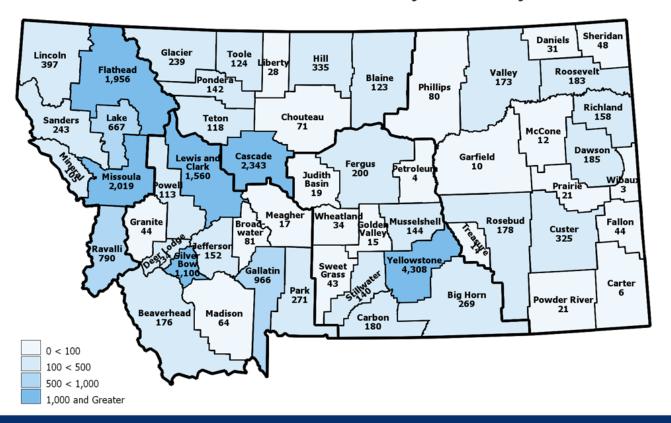
Categories	Program Features
"Someone to call" Crisis call center	<ul> <li>Statewide 988 capacity to receive calls and texts</li> <li>Three Lifeline call centers and one satellite call center on the Fort Peck Indian Reservation.</li> </ul>
<b>"Someone to respond"</b> Mobile crisis response	<ul> <li>Eight mobile crisis teams statewide</li> <li>Effective July 1, 2023, Montana Medicaid reimburses for mobile crisis response services.</li> </ul>
"Somewhere to go" Crisis receiving and stabilization	Four crisis stabilization programs statewide

## **Crisis Intervention Services**

**Communities Funded for Crisis** 23 communities, serving **Diversion Grants by DPHHS** approximately 82% of Montanans receive Crisis Diversion Grant funding from DPHHS. This is a 156% increase from the 9 counties that received funding in 2020. Each of those communities employ a dedicated change leader to coordinate local behavioral health crisis diversion efforts. 16 new coalitions have formed to guide local behavioral health solutions with a goal to reduce incarceration and hospitalization of people Local Tribal experiencing behavioral health crisis. Local and Tribal coalitions include a diverse group of community members including public health professionals, law enforcement, health care providers, and local and tribal elected officials. 10 communities have planned for or implemented Mobile Crisis Response Teams to better serve community members in crisis. 16 communities have conducted behavioral health resource mapping to identify resources and gaps in local behavioral health systems that guide their strategic planning process for crisis system development.

## Children's Mental Health Treatment

DPHHS Children's Medicaid Mental Health FY2024 Number of Clients Served by Client County



#### **CMHB Served in SFY 2024**

20,808 youth with a Medicaidfunded service with an SED\* as a primary diagnosis

\*Serious emotional disturbance (SED) means:

- a child or adolescent has

   a designated mental illness
   diagnosis according to the most current
   Diagnostic and Statistical Manual of Mental
   Disorders (DSM); and
- has experienced functional limitations due to emotional disturbance

SFY 2024 Total Children's Medicaid Health Expenditures:

\$112.0M



## Children's Mental Health Treatment

#### State Plan Children's Mental Health Services

- Services aim to improve a child's functioning at home, school, and in the community.
- o In SFY 2024, 20,808 Montana youth received these services.
- Average annual expenditures per youth were \$5,383 in SFY 2024

### Cross System Collaborations

- o Efforts to reduce out-of-state placements
- School-based initiatives



## **Out-of-State Placements**

		07/01/22- 0/23)	SFY 24 ((	07/01/23-06/30/24)
	PRTF	TGH	PRTF	TGH
Out-of-State Placements	174	65	198	56

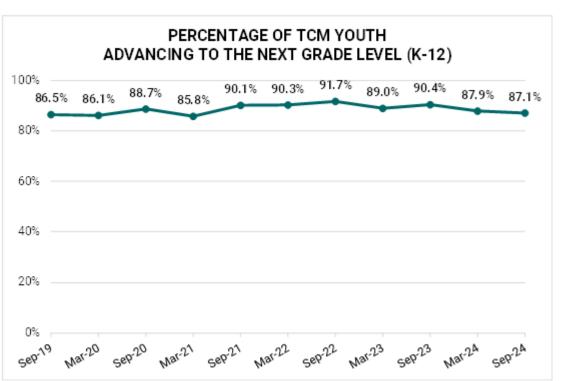
IN-STATE PRTF DENIAL REASONS	PERCENTAGE OF YOUTH WITH IN- STATE DENIALS IN SFY 2024 (07/01/23-06/30/24)			
	PRTF 1	PRTF 2		
Aggression	35.7%	28.0%		
At max capacity	28.7%	37.1%		
Other (special circumstances or needs the facility cannot address and/or meet)	14.7%	11.9%		
Does not meet age requirement	9.8%	11.2%		
Not a good fit for the current milieu	5.6%	6.3%		
Unable to treat current condition (too acute, sexualized behaviors or substance abuse)	2.8%	3.5%		
Elopement risk (runs away)	2.1%	0.0%		
Has met maximum benefit from PRTF treatment	0.7%	2.1%		

- Slight increase of 6% in out-of-state residential placements for youth from SFY 23 to SFY 24.
- CMHB collects data from our two in-state
   Psychiatric Residential Treatment Facilities
   (PRTFs) on denial reasons. Aggression and
   At Max Capacity are consistently the
   highest percentage of denials.
- Efforts to reduce out-of-state placements and increase in-state residential capacity:
  - Complex Case Qualified Provider Pool
  - BHSFG Residential Grant NTI
  - Provider Rate Increases



## **CMHB Outcomes: HB 583**

- The 2019 Legislature passed HB 583, amending HB 589, requiring mental health centers to collect and submit Medicaid member Targeted Case Management (TCM) data.
- The purpose of the outcomes is to monitor the status of youth receiving TCM services for mental health attributes to help determine whether the children remain at home, in school, and out of trouble while receiving services.
- Required in statute for youth receiving TCM services through CMHB, providers voluntarily began collecting this data for youth receiving Comprehensive School and Community Treatment in March 2022.



In the September 2024 reporting period, 87.1% of overall state TCM youth in grades K-12 advanced to the next grade level.



## **Adult Mental Health Treatment**

- Severe and Disabling Mental Illness (SDMI) Home and Community-Based Services
  - The SDMI HCBS Waiver provides long-term support for 557 adults with severe mental illness to live in the community.
- State Plan Rehabilitative Adult Mental Health Services
  - o Rehabilitative services help individuals with mental illness improve stability, social skills, and independent living.
  - Services include therapy, case management, and day treatment.

## Substance Use Disorder Treatment

#### State Plan Substance Use Disorder (SUD) Treatment Services

• The Treatment Bureau managed and funded SUD treatment services for approximately 7,337 adults and 410 children enrolled in Montana Medicaid in SFY 2024.

#### Expansion of SUD Treatment Services through HEART Initiative

 The American Society of Addiction Medicine (ASAM) are a set of criteria and decision rules for determining the appropriate level of care and developing treatment plans for patients with SUD or co-occurring conditions.

ASAM Level	Number of Individuals Served SFY24	SFY24 Expenditures
ASAM 3.1	242	\$3,083,887
ASAM 3.2	0	-
ASAM 3.3	26	\$403,746
ASAM 3.5 SUD IMD	1,341	\$8,942,233

#### Treatment for Opioid and Stimulant Use Disorders

- Medication for Opioid Use Disorder (MOUD) treatment to reduce or eliminate reliance on opioids through medications such as methadone,
   buprenorphine, and naltrexone
- o Contingency Management The most effective treatment for Stimulant Use Disorder, approved through HEART 1115 Waiver



# HEART Initiatives & Department of Corrections

- In December 2024, BHDD submitted our Reentry Implementation Plan to CMS which documents the state's approach to implementing a section 1115 Reentry demonstration waiver.
- DPHHS and the Department of Corrections (DOC) are readying systems and processes for a go-live date of October 2025.
  - Medicaid-eligible individuals who are incarcerated at a Montana State Prison will be allowed to apply for Medicaid to access reentry services 30 days prior to release.
  - Montana Medicaid will cover a set of reentry Medicaid benefits for Medicaid beneficiaries, 19 years and older, who are inmates in a state prison, and who have confirmed mental health or substance use disorder diagnosis:
    - Case management to assess and address physical and behavioral health needs, including warm handoffs to community-based providers to meet the needs of the reentering population.
    - Medication-Assisted Treatment (MAT) for all types of Substance Use Disorder with accompanying counseling.
    - 30-day supply of medication provided to the beneficiary immediately upon release.
- Section 5121 of the 2023 federal Consolidated Appropriations Act for post-disposition youth.

### **HEART 1115 Waiver Outcomes**

Outcome examples from the HEART 1115 Demonstration Waiver DY2 Annual Report.

Table:	Substance Use Dis	sorder Demonstration Metrics				
		Standard information on CMS-provided metrics			emonstration repor	
# 🔻	Metric name	Metric description	Dates covered by measurement period	Demonstr ation reporti	reporting	Demonstra ion reportin
	Follow-up after Emergency Department Visit for Alcohol or Other Drug Dependence: Age 18 and Older (FUA-AD) (NCQA; NQF #3488; Medicaid Adult Core Set; Adjusted HEDIS measure) <sup>c,d</sup>	Percentage of emergency department (ED) visits for beneficiaries age 18 and older with a principal diagnosis of alcohol or other drug (AOD) abuse or dependence who had a follow-up visit for AOD abuse or dependence. Two rates are reported:				
		Percentage of ED visits for which the beneficiary received follow-up within 30 days of the ED visit (31 total days).	01/01/2023-12/31/2023	4307	2060	47.83
		<ul> <li>Percentage of ED visits for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).</li> </ul>	01/01/2023-12/31/2023	4307	1624	37.71
	Follow-up after Emergency Department Visit for Mental Illness: Age 18 and Older (FUM- AD) NCQA; NQF #3489; Medicaid Adult Core Set; Adjusted HEDIS measure] <sup>c,e</sup>	Percentage of emergency department (ED) visits for beneficiaries age 18 and older with a principal diagnosis of mental illness or intentional self-harm and who had a follow-up visit for mental illness. Two rates are reported:				
		<ul> <li>Percentage of ED visits for mental illness for which the beneficiary received follow-up within 30 days of the ED visit (31 total days)</li> </ul>	01/01/2023-12/31/2023	3190	2356	73.86
		<ul> <li>Percentage of ED visits for mental illness for which the beneficiary received follow-up within 7 days of the ED visit (8 total days).</li> </ul>	01/01/2023-12/31/2023	3190	2016	63.2

# Substance Use Prevention, Treatment and Recovery Block Grant Outcomes

#### Outpatient (OP)

Employment/Education Status - Clients employed or student (full-time and part-time) (prior 30 days) at admission vs. discharge

			-
		At Admission(T1)	At Discharge(T2)
Number of clients employed or student (full-time and part-time) [numerator]		94	102
Total number of clients with non-missing values on employment/student status [d	lenominator]	222	222
Percent of clients employed or student (full-time and part-time)		42.3%	45.9%

#### Outpatient (OP)

Clients without arrests (any charge) (prior 30 days) at admission vs. discharge

	At Admission(T1)	At Discharge(T2)
Number of Clients without arrests [numerator]	201	209
Total number of Admission and Discharge clients with non-missing values on arrests [denominator]	222	222
Percent of clients without arrests	90.5%	94.1%

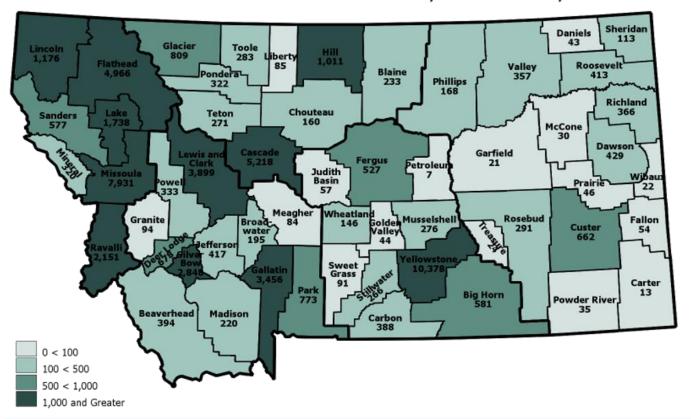
- Outcome examples from the Annual Substance Use Prevention, Treatment, and Recovery Block Grant 2024 Annual Report.
- Outcomes include (measured at admission and discharge):
  - Employment/Education Status
  - Stability of Housing
  - Criminal Justice Involvement
  - Change in Abstinence Alcohol Use
  - Change in Abstinence Other Drug Use



# Adult Mental Health and Substance Use Disorder Treatment

#### **DPHHS Adult Medicaid Mental Health & SUD**

SFY2024 Number of Members Served by Member County



- Approximately 55,000 individuals received a Medicaid-funded treatment service for Adult Mental Health or Substance Use Disorder in SFY 2024.
- Total Medicaid Expenditures for Adult Mental Health and Substance Use Disorder were \$160.2 million in SFY 2024.

## **Developmental Disabilities**

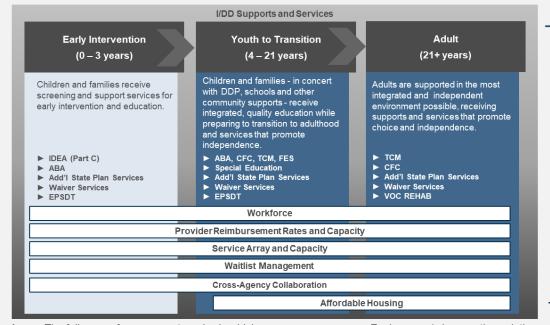
#### **Developmental Disabilities | Continuum of Care**

The continuum presents the array of services, woven together through service coordination. This view offers a map of where services, and potential areas of investment, exist.

Description and Outcomes

Example Programs / Services

**Drivers** 



**Lens:** The full array of program categories in which a person may engage. Each person's journey through the system may differ, including point of entry and scope of support needs.

#### Crisis / Acute Services

Crisis / Acute Services – Crisis response focuses on prevention (adequate supports, family training, family resources, etc.), crisis mitigation (mobile crisis), and stabilization (IBC and other short-term crisis placement beds).

### Dual-Diagnosis Prevention/ Treatment/ Recovery

Prevention, treatment and recovery supports associated with behavioral health service needs for individuals dually diagnosed with I/DD and BH. Identifying opportunities to promote connection to the BH continuum.

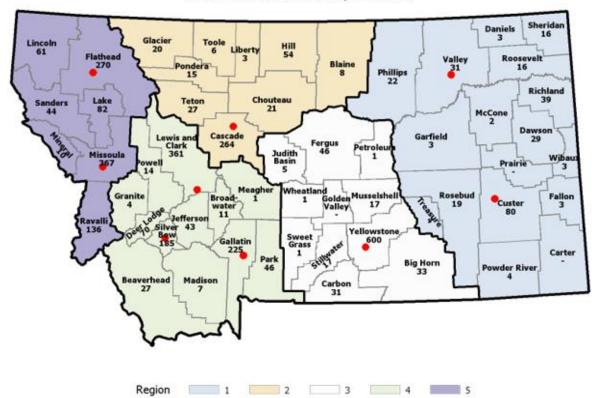
► See Adult BH continuum



# **Developmental Disabilities Program**

#### **DPHHS Developmental Disabilities Program**

FY2024 Number of People Served



- In SFY 2024, 3,307 individuals were served by the Developmental Disabilities Program.
- Expenditures for the program were \$164 million in SFY 2024.
- Individual cost plans averaged \$71,815 per client for the year.

# **Developmental Disabilities Program**

#### Comprehensive 0208 1915(c) Home and Community-Based Services Waiver

- Provides lifelong support to Montanans with intellectual and developmental disabilities (IDD) ranging from minimal supports to 24-hour care
- In SFY 2024, DDP served 3,307 Montanans, with 99.7% receiving community-based services
- Individual cost plans range from less than \$5,000 to \$610,000 and averaged \$71,815 in SFY 2024.

#### Medicaid State Plan Services

- Targeted Case Management (TCM) services provided to approximately 3,100 individuals statewide
- Applied Behavioral Analysis (ABA) eligibility was expanded and targeted workforce efforts have increased the number of Medicaid-enrolled Board Certified Behavior Analysts (BCBAs) by 36%

## **Developmental Disabilities Outcomes**

#### National Core Indicators (NCI)

- NCI is used across states to assess the quality and outcomes of Developmental Disability (DD) services provided to individuals with DD and their families.
- NCI surveys help states measure important elements of person-centered planning, outcomes, and satisfaction in domains such as:
  - Self Determination
  - Service Coordination and Access
  - Relationships and Community Inclusion
  - Choice and Decision Making
  - Employment Status and Goals
  - Health, Welfare & Safety.
- o MT-22-23-NCI-IDD-State-Report.pdf

# Highlights and Accomplishments During the 2025 Biennium

Meghan Peel, Behavioral Health and Developmental Disabilities Division Administrator



# **Workforce Development**

#### **BH and DD Workforce Recruitment and Retention Project**

- BHDD, in partnership with the University of Montana Center for Children, Families, and Workforce Development (Center), collaborated to develop several workforce initiatives
  - Workforce Survey
  - Learning Collaborative Cohorts
  - Workforce Recruitment and Retention Strategic Planning Guidebook.

#### **Station MD Pilot Project**

- StationMD is a physician service for individuals with intellectual and/or DD. Its physicians are trained to work with individuals with intellectual and/or DD and treat patients through a secure telemedicine platform.
- DDP is piloting StationMD services for approximately 900 Montanans receiving DDP services.

#### **Western Interstate Commission on Higher Education (WICHE)**

• BHDD contracts with WICHE's Behavioral Health Program to perform fidelity reviews of Assertive Community Treatment (ACT)



### **Medicaid Reimbursement Rates**

- DPHHS conducted a comprehensive provider rate study of Medicaid services administered by BHDD.
- The studied service benchmark rates were authorized in the 2023 Legislative session and staggered and implemented over two fiscal years starting in FY 2024.

Program	Average Weighted Increase
Developmental Disabilities	23.5%
Children's Mental Health	28.1%
Adult Mental Health and Substance Use	14.6%

# **Family Engagement**

- During the past biennium, CMHB, in partnership with the Center, has focused on family engagement to enhance the quality of children's mental health services.
- Family Ambassador Board (FAB) The Center identified parents and caregivers whose children are currently receiving services and are strongly interested in and willing to drive system improvements.
- Family Engagement Fidelity Assessment (FEFA) The FEFA is a selfassessment tool that targets key family engagement skills and behaviors throughout care and treatment. Mental health centers are implementing the tool to evaluate case management practices, make process improvements, and as a training tool for case managers.
- **Family Peer Support** Family Peer Support is a leading national model of families with lived experience supporting other families.

"The importance of the FAB group can't be overstated enough. It has given families a bigger voice in the children's mental health system, which is so important because we live these struggles all day every day. The continuance of FAB will allow for important changes in the mental health system, which will support children and their families in ways that actually feel helpful for their particular situation."

[Family Ambassador Board Member]



# Funding and PB Information

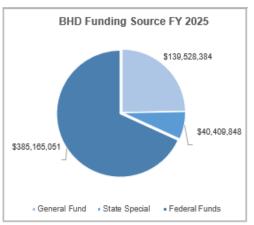
Gene Hermanson, Medicaid Chief Financial Officer



# **Funding and PB Information**

BEHAVIORAL HEALTH DEVELOPMENT DISABILITIES	FY 2025 BUDGET	FY 2026 REQUEST	FY 2027 REQUEST
РВ	104	104	104
Personal Services	\$9,072,333	\$9,458,744	\$9,740,639
Operating	\$4,536,610	\$27,576,146	\$14,242,683
Equipment	\$0	\$0	\$0
Local Assistance	\$0	\$0	\$0
Grants	\$7,878,514	\$11,034,279	\$11,037,933
Benefits and Claims	\$543,257,862	\$532,424,094	\$607,081,972
Transfers	\$0	\$0	\$0
Debt Services	\$357,964	\$357,964	\$357,964
TOTAL COSTS	\$565,103,283	\$580,851,227	\$642,461,191
	FY 2025 BUDGET	FY 2026 REQUEST	FY 2027 REQUEST
General Fund	\$139,528,384	\$153,479,833	\$161,713,362
State Special Fund	\$40,409,848	\$65,495,293	\$57,476,303
Federal Fund	\$385,165,051	\$361,876,101	\$423,271,526
TOTAL FUNDS	\$565,103,283	\$580,851,227	\$642,461,191







# Change Packages

# Change Packages – Present Law (PL) Adjustment

#### SWPL 1 - PERSONAL SERVICES

The budget includes \$168,257 in FY 2026 and \$193,152 in FY 2027 to annualize various personal services costs including FY 2025 statewide pay plan, benefit rate adjustments, longevity adjustments related to incumbents in each position at the time of the snapshot, and vacancy savings.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$107,213	\$116,513	(\$55,469)	\$168,257
FY 2027	\$119,824	\$116,794	(\$43,466)	\$193,152
Biennium Total	\$227,037	\$233,307	(\$98,935)	\$361,409

#### **SWPL 3 – Inflation Deflation**

This change package includes a reduction of \$3,429 in FY 2026 and \$2,318 in FY 2027 to reflect budgetary changes generated from the application of deflation to state motor pool accounts.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	(\$1,591)	(\$15)	(\$1,823)	(\$3,429)
FY 2027	(\$1,075)	(\$10)	(\$1,233)	(\$2,318)
Biennium Total	(\$2,666)	(\$25)	(\$3,056)	(\$5,747)

# Change Packages - PL Continued

#### PL 10550 - MEDICAID CORE SERVICES AMH - BHDD

This present law adjustment for caseload growth in the Adult Mental Health (AMH) Program in the Behavioral Health and Developmental Disabilities Division covers the projected change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This adjustment does not include any changes in eligibility criteria or allowable plan services. This package requests \$6,222,998 in total funds for the biennium, including an increase of \$2,683,685 in general fund, a decrease of \$288,033 in state special revenue, and an increase of \$3,827,346 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$737,128	(\$169,825)	\$910,435	\$1,477,738
FY 2027	\$1,946,557	(\$118,208)	\$2,916,911	\$4,745,260
Biennium Total	\$2,683,685	(\$288,033)	\$3,827,346	\$6,222,998

# Change Packages - PL Continued

#### PL 10551 - MEDICAID CORE SERVICES DDP&CMH - BHDD

This present law adjustment is for the decrease in caseload in the Developmental Disabilities Program (DDP) and Children's Mental Health (CMH) programs in the Behavioral Health and Developmental Disabilities Division which covers the projected change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This adjustment does not include any changes in eligibility criteria or allowable plan services. This package requests a reduction of \$7,501,086 in total funds for the biennium, including an increase of \$8,098,678 in general fund, a decrease of \$10,977,882 in state special revenue, and a decrease of \$4,621,882 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$2,595,303	(\$5,602,063)	(\$4,825,384)	(\$7,832,144)
FY 2027	\$5,503,375	(\$5,375,819)	\$203,502	\$331,058
Biennium Total	\$8,098,678	(\$10,977,882)	(\$4,621,882)	(\$7,501,086)

# Change Packages - PL Continued

#### PL 10552 - MEDICAID CORE FMAP ADJUSTMENT AMH - BHDD

This present law adjustment is necessary to maintain existing services for Adult Mental Health (AMH) services in the Behavioral Health and Developmental Disability Division. The request adjusts the FY 2025 budgeted expenses from the FY 2025 FMAP (Federal Medical Assistance Percentage) rate of 35.88% state funds 64.12% federal funds to the FY 2026 rate of 38.39% state funds and 61.61% federal funds, and the FY 2027 rate of 38.53% state funds and 61.47% federal funds. The biennial funding increases the general fund by \$2,292,099, increases state special revenue by \$442,099, and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$1,110,445	\$215,360	(\$1,325,805)	\$0
FY 2027	\$1,181,654	\$226,739	(\$1,408,393)	\$0
Biennium Total	\$2,292,099	\$442,099	(\$2,734,198)	\$0

#### PL 10553 - MEDICAID CORE FMAP ADJUSTMENT DDP&CMH - BHDD

This present law adjustment is necessary to maintain existing services for the Developmental Disabilities Program (DDP) and Children's Mental Health (CMH) programs in the Behavioral Health and Developmental Disabilities Division. The request adjusts the FY 2025 budgeted expenses from the FY 2025 FMAP (Federal Medical Assistance Percentage) rate of 35.88% state funds 64.12% federal funds to the FY 2026 rate of 38.39% state funds and 61.61% federal funds, and the FY 2027 rate of 38.53% state funds and 61.47% federal funds. The biennial funding increases general fund by \$6,476,227 and increases state special revenue by \$1,079,817 and includes an offsetting decrease in federal funds of \$7,556,044. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$3,154,959	\$522,347	(\$3,677,306)	\$0
FY 2027	\$3,321,268	\$557,470	(\$3,878,738)	\$0
Biennium Total	\$6,476,227	\$1,079,817	(\$7,556,044)	\$0

#### PL 10554 - MEDICAID WAIVER SERVICES AMH - BHDD

This present law adjustment is for the increase of caseload in the Adult Mental Health (AMH) Program in the Behavioral Health and Developmental Disabilities Division which covers the projected change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care in the Severe and Disabling Mental Illness (SDMI) Waiver. This adjustment does not include any changes in eligibility criteria or allowable plan services. This package requests \$14,552,303 in total funds for the biennium, including \$4,836,027 in general funds, \$763,995 in state special revenue, and \$8,952,281 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$1,580,789	\$333,485	\$3,072,113	\$4,986,387
FY 2027	\$3,255,238	\$430,510	\$5,880,168	\$9,565,916
Biennium Total	\$4,836,027	\$763,995	\$8,952,281	\$14,552,303

#### PL 10555 - MEDICAID WAIVER SERVICES DDP&CMH- BHDD

This present law adjustment is for the decrease of caseload in the Developmental Disabilities Program (DDP) and Children's Mental Health (CMH) programs in the Behavioral Health and Developmental Disabilities Division which covers the projected change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care in the Developmental Disabilities Waiver. This adjustment does not include any changes in eligibility criteria or allowable plan services. This package requests a reduction of \$6,268,541 in total funds for the biennium, including a decrease of \$1,209,026 in general fund, a decrease of \$1,200,000 in state special revenue funds, and a decrease of \$3,859,515 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	(\$1,111,917)	(\$600,000)	(\$2,747,360)	(\$4,459,277)
FY 2027	(\$97,109)	(\$600,000)	(\$1,112,155)	(\$1,809,264)
Biennium Total	(\$1,209,026)	(\$1,200,000)	(\$3,859,515)	(\$6,268,541)

#### PL 10556 - MEDICAID WAIVER FMAP ADJUSTMENT AMH - BHDD

This present law adjustment is necessary to maintain existing services for the Adult Mental Health (AMH) Program in the Behavioral Health and Developmental Disabilities Division. The request adjusts the FY 2025 budgeted expenses from the FY 2025 FMAP (Federal Medical Assistance Percentage) rate of 35.88% state funds 64.12% federal funds to the FY 2026 rate of 38.39% state funds, and 61.61% federal funds, and the FY 2027 rate of 38.53% state funds and 61.47% federal funds. The biennial funding decreases general fund by \$517,390, increases state special revenue by \$3,522,768, and includes an offsetting decrease in federal funds by \$3,005,378. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	(\$258,695)	\$1,736,849	(\$1,478,154)	\$0
FY 2027	(\$258,695)	\$1,785,919	(\$1,527,224)	\$0
Biennium Total	(\$517,390)	\$3,522,768	(\$3,005,378)	\$0

#### PL 10557 - MEDICAID WAIVER FMAP ADJUSTMENT DDP AND CMH - BHDD

This present law adjustment is necessary to maintain existing services for the Developmental Disabilities and Children's Mental Health Bureaus in the Behavioral Health and Developmental Disabilities Division. The request adjusts the FY 2025 budgeted expenses from the FY 2025 FMAP (Federal Medical Assistance Percentage) rate of 35.88% state funds 64.12% federal funds to the SFY 2026 rate of 38.39% state funds and 61.61% federal funds, and the SFY 2027 rate of 38.53% state funds and 61.47% federal funds. The biennial funding increases general fund by \$9,522,298 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$4,636,619	\$0	(\$4,636,619)	\$0
FY 2027	\$4,885,679	\$0	(\$4,885,679)	\$0
Biennium Total	\$9,522,298	\$0	(\$9,522,298)	\$0

#### PL 10560 - MEDICAID EXPANSION SERVICES AMH - BHDD

This present law adjustment is for the decrease of caseload in the Adult Mental Health (AMH) Program in the Behavioral Health & Developmental Disabilities Division which covers the projected change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care for Medicaid Expansion. This adjustment does not include any changes in eligibility criteria or allowable plan services. This package requests a reduction of \$22,674,794 in total funds for the biennium including a decrease of \$2,349,758 in general fund, an increase of \$82,279 in state special revenue, and a decrease of \$20,407,315 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	(\$1,388,412)	\$4,765	(\$12,452,825)	(\$13,836,472)
FY 2027	(\$961,346)	\$77,514	(\$7,954,490)	(\$8,838,322)
Biennium Total	(\$2,349,758)	\$82,279	(\$20,407,315)	(\$22,674,794)

#### PL 10564 - MEDICAID EXPANSION FMAP AMH - BHDD

This present law adjustment is necessary to maintain existing services for the Adult Mental Health (AMH) Program in the Behavioral Health and Developmental Disabilities Division. The biennial funding increases general fund by \$579,216 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$289,608	\$0	(\$289,608)	\$0
FY 2027	\$289,608	\$0	(\$289,608)	\$0
Biennium Total	\$579,216	\$0	(\$579,216)	\$0

# Change Packages - New Proposals (NP) Adjustments

#### NP 10001 - STATE OPIOD RESPONSE GRANT - BHDD

This new proposal adds the State Opioid Response (SOR) Grant to the Prevention Program budget in the Behavioral Health and Developmental Disabilities Division. The funding has been requested through OBPP using the Budget Amendment process since 2018. The grant dollars are used to address the opioid crisis by providing resources to Montana communities to increase access to FDA-approved medications for the treatment of opioid use disorder (OUD), and to support the continuum of prevention, harm reduction, treatment, and recovery support services for OUD and other concurrent substance use disorders. The SOR Program also supports the continuum of care for stimulant misuse and use disorders, including cocaine and methamphetamine. The request adds \$8,000,000 in federal funds for the biennium.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$0	\$4,000,000	\$4,000,000
FY 2027	\$0	\$0	\$4,000,000	\$4,000,000
Biennium Total	\$0	\$0	\$8,000,000	\$8,000,000

#### NP 10002 - FDA TOBACCO GRANT - BHDD

This new proposal adds the federal Food and Drug Administration (FDA) Tobacco Grant to the Prevention Program budget in the Behavioral Health and Developmental Disabilities Division. The request adds \$218,855 in federal funds in each year of the biennium. The funding has been requested through OBPP using the Budget Amendment process since 2018. The grant dollars are used to enforce retailer compliance with tobacco regulations. This service is funded with 100% federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$0	\$218,855	\$218,855
FY 2027	\$0	\$0	\$218,855	\$218,855
Biennium Total	\$0	\$0	\$437,710	\$437,710

#### NP 10701 - BHSFG 01. REFINE AND RECONFIGURE THE CURRENT 0208 COMPREHENSIVE WAIVER SERVICE RATES - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 01 - Refine and Reconfigure the Current 0208 Comprehensive Waiver Services Rates. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$8,403,600 in total funds for the biennium, including \$3,844,836 in state special revenue and \$4,558,764 of federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$950,000	\$0	\$950,000
FY 2027	\$0	\$2,894,836	\$4,558,764	\$7,453,600
Biennium Total	\$0	\$3,844,836	\$4,558,764	\$8,403,600

#### NP 10703 - BHSFG 03. EXPAND THE SERVICE DELIVERY SYSTEM TO SUPPORT INDIVIDUALS WITH COMPLEX NEEDS - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 03 - Expand the Service Delivery System to Support Individuals with Complex Needs. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$19,460,000 in total funds for the biennium, including \$14,018,071 in state special revenue and \$5,441,929 of federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$10,630,000	\$0	\$10,630,000
FY 2027	\$0	\$3,388,071	\$5,441,929	\$8,830,000
Biennium Total	\$0	\$14,018,071	\$5,441,929	\$19,460,000

#### NP 10704 - BHSFG 04. REDEFINE AND REOPEN E&D CLINICS TO SUPPORT FAMILIES MORE EFFECTIVELY - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 04 - Redefine and Reopen E&D Clinics to Support Families More Effectively. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$2,025,000 in state special revenue funds for the biennium.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$1,025,000	\$0	\$1,025,000
FY 2027	\$0	\$1,000,000	\$0	\$1,000,000
Biennium Total	\$0	\$2,025,000	\$0	\$2,025,000

#### NP 10706 - BHSFG 06. ENHANCE THE TARGETED CASE MANAGEMENT PROGRAM - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 06 - Enhance the Targeted Case Management Program. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$2,085,545 in state special revenue funds for the biennium.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$1,335,545	\$0	\$1,335,545
FY 2027	\$0	\$750,000	\$0	\$750,000
Biennium Total	\$0	\$2,085,545	\$0	\$2,085,545

#### NP 10708 - BHSFG 08. IMPLEMENT A CARE TRANSITIONS PROGRAM - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 08 - Implement a Care Transitions Program. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$2,107,280 in state special revenue for the biennium.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$1,115,619	\$0	\$1,115,619
FY 2027	\$0	\$991,661	\$0	\$991,661
Biennium Total	\$0	\$2,107,280	\$0	\$2,107,280

#### NP 10709 - BHSFG 09. ADOPT ELECTRONIC BED REGISTRY AND ENHANCE 988 - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 09 - Adopt Electronic Bed Registry and Enhance 988. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$6,059,400 in total funds for the biennium, including \$5,263,125 in state special revenue and \$796,275 of federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$4,216,850	\$0	\$4,216,850
FY 2027	\$0	\$1,046,275	\$796,275	\$1,842,550
Biennium Total	\$0	\$5,263,125	\$796,275	\$6,059,400

#### NP 10717 - BHSFG 17. REDESIGN RATES TO IMPROVE IN-STATE YOUTH RESIDENTIAL SERVICES - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 17 - Redesign Rates to Improve In-State Youth Residential Services. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$150,000 in total funds for the biennium, including \$75,000 in state special revenue and \$75,000 of federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$0	\$0	\$0
FY 2027	\$0	\$75,000	\$75,000	\$150,000
Biennium Total	\$0	\$75,000	\$75,000	\$150,000

#### NP 10718 - BHSFG 18. INVEST IN SCHOOL-BASED BEHAVIORAL HEALTH INITIATIVES - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 18 - Invest in School-Based Behavioral Health Initiatives. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$9,971,420 in total funds for the biennium, including \$7,317,074 in state special revenue funds and \$2,654,346 of federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$2,725,015	\$0	\$2,725,015
FY 2027	\$0	\$4,592,059	\$2,654,346	\$7,246,405
Biennium Total	\$0	\$7,317,074	\$2,654,346	\$9,971,420

#### NP 10719 - BHSFG 19. INCENTIVIZE PROVIDERS TO JOIN THE BH AND DD WORKFORCE - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 19 - Incentivize Providers to Join the BH and DD Workforce. This funding will cover one-time only and initial operations costs for the recommendation during the biennium.

This package requests \$8,280,000 in state special revenue funds for the biennium.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$8,030,000	\$0	\$8,030,000
FY 2027	\$0	\$250,000	\$0	\$250,000
Biennium Total	\$0	\$8,280,000	\$0	\$8,280,000

#### NP 10722 - BHSFG 22. EXPAND AND SUSTAIN CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS - BHDD

This new proposal is necessary to implement Behavioral Health System for Future Generations (BHSFG) recommendation 22 - Expand and Sustain Certified Community Behavioral Health Clinics. This funding will cover one-time only and initial operations costs for the recommendation during the biennium. This package requests \$40,439,355 in total funds for the biennium, including \$8,477,644 in state special revenue funds and \$31,961,711 of federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$0	\$0	\$0
FY 2027	\$0	\$8,477,644	\$31,961,711	\$40,439,355
Biennium Total	\$0	\$8,477,644	\$31,961,711	\$40,439,355

#### NP 10801 - REFINANCE MED CORE AMH I-149

This new proposal requests a refinance of Medicaid Core Adult Mental Health in the Behavioral Health and Developmental Disabilities Division. This fund switch will increase state special revenue tobacco trust interest funds and decrease state special I-149 revenue by \$2,000,000 each year of the biennium. That total cost for the program is not impacted by this change package.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$0	\$0	\$0
FY 2027	\$0	\$0	\$0	\$0
Biennium Total	\$0	\$0	\$0	\$0

#### NP 10802 - REALIGN APPROPRIATION FOR HCBS MH WAIVER

This new proposal realigns the appropriation of state special revenue to the Home and Community Based Services Mental Health Waiver program to align appropriation with anticipated expenditures. This change package requests a reduction of \$1,583,514 in state special revenue I-149 and an offsetting increase in state special tobacco trust interest funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$0	\$0	\$0	\$0
FY 2027	\$0	\$0	\$0	\$0
Biennium Total	\$0	\$0	\$0	\$0

#### NP 10803 - REALIGN APPROPRIATION FOR MED WAIVER AMH

This new proposal fund switch in the Medicaid Waiver Adult Mental Health program reduces the state special appropriation for I-149 tobacco and increases general fund support. This change package requests a reduction of \$5,500,000 in state special revenue over the biennium and includes an offsetting increase in general funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2026	\$2,500,000	(\$2,500,000)	\$0	\$0
FY 2027	\$3,000,000	(\$3,000,000)	\$0	\$0
Biennium Total	\$5,500,000	(\$5,500,000)	\$0	\$0

## Conclusion