Behavioral Health Advisory Council (BHAC) Block Grant Priority Planning

Priorities & Indicators

Project Period	SFY26 Block Grant Period

Priority Area 1

Priority Area 1	Develop universal statewide Peer Support Services (PSS) and Recovery Support Services (RSS) outcome data metrics as well as data collection tools and evaluation standards.
Priority Type	
Target Population	Montanans with a diagnosed SUD/MHD

Goal	Understand the long-term impact of PSS and RSS by ensuring providers utilize common outcome metrics, data collection platforms and evaluation standards.
Objective	Collect common outcome data to facilitate "apples-to-apples" comparisons in measuring success, thereby enabling data-driven decision making which maximizes the impact of DPHHS funding of PSS and RSS.
Strategies	Develop a list of outcome data points to track, develop and/or utilize an existing standardized data collection tool, and develop and/or utilize an existing standardized data entry platform. Fund technical assistance to help PSS/RSS providers integrate data collection tools into service provision. Mandate usage of outcome data tools and data entry platform in future DPHHS PSS/RSS contracts.

Indicator #1	Number of PSS/RSS providers collecting common outcome data using standardized data collection tool and entering data into standardized data entry platform
Baseline Measurement	N/A. No existing cohesive statewide system for PSS/RSS outcome data collection and entry.
1st Year Target/Outcome Measurement	40% of PSS/RSS providers collecting common outcome data using common collection tool and entering into common data entry platform.
2nd Year Target/Outcome Measurement	90% of PSS/RSS providers collecting common outcome data using common collection tool and entering into common data entry platform.

Data Source	
Description of Data	Data would cover range of outcome measures, e.g., recovery capital increases, completion of treatment objectives, increases in employment and housing, and decreases in recidivism and ER utilization.

Data Issues/Caveats that affect the outcome measures.	Need safeguards in place to ensure fidelity in data collection and reporting. Need to ensure widespread adoption to capture an accurate picture of the statewide impact of PSS/RSS. Need to invest in the peer workforce to reduce Certified Behavioral Health Peer Support Specialists (CBHPSSs) turnover rates and ensure CBHPSSs are able to implement data collection and reporting with fidelity.

Priority Area 2

Priority Area 2	Build up capacity of SUD/MHD providers to provide PSS and bill Medicaid for PSS.
Priority Type	
Target Population	Montanans with a diagnosed SUD/MHD

Goal	Improve long-term outcomes among Montanans with a diagnosed SUD/MHD by catalyzing SUD/MHD provider utilization of PSS and expanding access to PSS throughout Montana.
Objective	Provide SUD/MHD providers with the knowledge, skills and tools needed to effectively implement PSS.
Strategies	Create a provider toolkit, including PSS job descriptions, interview questions, policies and procedures, and data collection/evaluation and Medicaid billing best practices. Provide workshops and one-on-one support to providers who may not understand the benefits of PSS or how to efficiently and effectively implement PSS. Create a dashboard for providers to track the benefit of PSS implementation, e.g., reduced client no shows, longer engagement in services etc. Provide extra funding to rural/frontier providers to enable them to overcome the unique barriers to access associated with serving large and sparsely populated geographic regions. Provide startup funding for new PSS providers, including covering the cost of utilizing an electronic health records platform for a set length of time, e.g. 6-months or 1-year.

Indicator #1	Increase the number of SUD/MHD provider offering PSS and billing Medicaid to cover the cost.
Baseline Measurement	In SFY 2024, 30 providers billed Medicaid for PSS.
1st Year Target/Outcome Measurement	Provider toolkit created and accessible to SUD/MHD providers. At least 3 new providers implementing PSS and billing Medicaid, at least one of which is in a rural/frontier community.
2nd Year Target/Outcome Measurement	At least an additional 10 new providers implementing PSS and billing Medicaid, at least 3 of which are in rural/frontier communities.

Data Source	
Description of Data	Medicaid data, specifically number of providers billing Medicaid for PSS, number of clients billed, and average number of units billed for each client.
Data Issues/Caveats that affect the outcome measures.	PSS provider and client utilization data must be paired with common outcome data to create an accurate picture of the impact of PSS on Montanans with an SUD/MHD.

Priority Area 3

Priority Area	Develop forensic peer support training/credentialing, train and credential forensic peer supporters (FPS) and implement a forensic peer support pilot program in at least one correctional facility in Montana.
Priority Type	
Target Population	Incarcerated and formally incarcerated Montanans with a diagnosed SUD/MHD.

Goal	Reduce recidivism rates by providing high-quality PSS to incarcerated Montanans and Montanans re-entering the community after time incarcerated.
Objective	Develop or adopt an existing forensic peer support training/credentialing model, train and credential forensic peer supporters, and create a forensic peer support pilot program.
Strategies	Form a Forensic Peer Support Taskforce to research existing forensic peer support training and credentialing standards and then adopt existing high-quality trainings and credentialing standards wholesale or develop modified trainings and credentialing standards. Provide trainer-of-trainers trainings with attendees from throughout Montana to create the knowledge base necessary to provide forensic peer support at scale. Provide forensic peer support trainings with a state-recognized credential being issued for successful completion of the training. Provide workshops for and one-on-one support to DOJ and DOC leadership interested in exploring adoption of forensic peer support. Implement one or more forensic peer support pilot programs in correctional facilities.

Indicator #1	Develop forensic peer support training/credentialing, train and credential forensic peer supporters and implement forensic peer support pilot program.
Baseline Measurement	No statewide efforts to train or credential forensic peer supporters. No correctional facilities providing peer support to incarcerated Montanans.

1st Year Target/Outcome Measurement	Forensic Peer Support Taskforce formed which includes leaders from the DOJ and the DOC. Taskforce has approved forensic peer support trainings and credentialing standards.
2nd Year Target/Outcome Measurement	At least 10 forensic peer supporters trained and credentialed. A forensic peer support pilot program being implemented in at least one correctional facility in Montana.

Data Source	
Description of Data	Number of forensic peer supporters trained and credentialed, number of correctional facilities where forensic peer support being implemented, number of incarcerated Montanans receiving forensic peer support and outcome data for those receiving support.
Data Issues/Caveats that affect the outcome measures.	Forming strong trusting relationships between potential forensic peer support providers and DOJ and DOC leaders is of paramount importance. There are legitimate security concerns around having people with SUD/MHD with past criminal justice involvement serving in correctional facilities. As such, ensuring the adoption of rigorous credentialing standards and guardrails to ensure the maintenance of the highest ethical standards must be of paramount importance.