

# PUBLIC HEALTH & HUMAN SERVICES

Serving Montanans in their communities to improve health, safety, well-being, and empower independence.

ANNUAL PLAN FY2026

# **DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES (DPHHS)**

Director Charlie Brereton was appointed to lead DPHHS by Governor Greg Gianforte in June 2022 and confirmed by Montana's Senate in 2023 and 2025. Director Brereton leads the state's comprehensive health and human services agency to ensure an integrated, strategic, and transformative approach to serving Montanans in their communities to improve health, safety, well-being, and empower independence. In comparison to many other states, Montana is unique in that essential health and human services functions rest within one state agency; this allows for greater cross-program collaboration, innovation, and outcomes for those served by DPHHS.

Director Brereton, in partnership with his executive leadership team, is responsible for ensuring the provision of critical state and federal public assistance programs across Montana. The Director's executive leadership team is comprised of a Deputy Director, Human Services Executive Director, Medicaid and Health Services Executive Director, Public Health and Community Affairs Executive Director, Health Care Facilities Executive Director, Chief Financial Officer, Chief Legal Counsel, Chief Information Officer, Chief Human Resources Officer, and State Medical Officer.

The Director's Office is further supported by the offices of Budget and Finance, Legal Affairs, Human Resources, Communications, Strategy and Transformation, Research and Data Analytics, Faith and Community-Based Services, and American Indian Health.

Of DPHHS's 12 divisions, 10 are housed within its four core practices: **Human Services, Medicaid and Health Services, Public Health and Community Affairs, and Health Care Facilities**; the remaining two divisions exist within the Director's Office. Descriptions of DPHHS's budgeted programs are below. As of the date of publication of this plan, DPHHS has 2,752.62 positions budgeted and more than 70 offices statewide.

The goals in this Annual Plan are intentionally ambitious. DPHHS believes that setting high standards drives significant progress for Montanans. While not every metric may be met, the Department commits to transparently reporting progress, identifying factors influencing goal pursuit, and using shortfalls for learning and continuous improvement. In the development of the FY2026 Annual Plan, DPHHS emphasized quality over quantity by selecting a single, meaningful initiative for each budgeted program.

#### **Director's Office**

#### **Business and Financial Services Division (BFSD)**

BFSD helps DPHHS meet its goals by efficiently managing financial resources and support services.

#### **Technology Services Division (TSD)**

TSD provides information technology (IT) solutions for DPHHS's health and human services programs. The division manages strategic IT investments to ensure access to reliable, secure, and high-quality data and technologies to address health and human services needs. TSD aims to offer secure, accessible, and responsive IT services to DPHHS.

#### **Human Services Practice**

#### Disability Employment and Transitions Division (DETD)

DETD advances the independence and employment of Montanans with disabilities by promoting opportunities for individuals with disabilities to have rewarding careers and achieve maximum personal potential through informed choice. DETD programs include Vocational Rehabilitation Services, Pre-Employment Transition Services, Blind and Low Vision Services, Disability Determination Services, and the Montana Accessible Communication Program.

#### **Human and Community Services Division (HCSD)**

HCSD manages eligibility services, as well as the policies and processes related to program access for Montana's Temporary Assistance for Needy Families (TANF) program, Supplemental Nutrition Assistance Program (SNAP), Medicaid Programs, and Healthy Montana Kids (HMK) Programs statewide. The division also administers the Community Services Block Grant, which is utilized by 10 Human Resource Development Councils across the state to deliver a variety of community-based human services programs.

#### **Child Support Services Division (CSSD)**

CSSD improves family economic stability by establishing and enforcing child and medical support orders. Services include locating parents, establishing paternity, creating support orders, and enforcing or modifying support orders.

#### **Child and Family Services Division (CFSD)**

CFSD administers child protective services, child abuse and neglect services, prevention services, and other programs designed to keep children safe and families strong, with the overarching goal of improving safety, permanency, and well-being for children. CFSD is organized into six regions and a central office that manage child welfare programs across Montana. Local Family Services Advisory Councils advise CFSD regional offices, enhancing collaboration between communities and DPHHS.

#### Early Childhood and Family Support Division (ECFSD)

ECFSD offers services to enhance the well-being, health, and development of children, families, and communities. Programs include childcare, home visits, food security, nutrition education, violence prevention, family support, and preventive health care. The division aims for consistent, efficient, and coordinated services across Montana.

#### **Medicaid and Health Services Practice**

#### Senior and Long-Term Care Division (SLTC)

SLTC plans, administers, and provides publicly funded long-term care services for Montana's senior citizens and persons with disabilities. Additionally, the division offers aging and long-term care education and support to Montanans of all ages, including Older Americans Act services, Medicaid community services, Big Sky Rx services, and Adult Protective Services.

#### Health Resources Division (HRD)

HRD oversees the administration of various components of Montana's Medicaid Program. This includes Medicaid primary care services, HMK (Medicaid and Children's Health Insurance Program services for children in low-income families), and the Medicaid Expansion Program. The division reimburses public and private providers for a range of preventative, primary, and acute care services.

#### Behavioral Health and Developmental Disabilities Division (BHDD)

BHDD provides Medicaid and grant-funded services for adults and children with behavioral health diagnoses and developmental disabilities. The division aims to help Montanans live independently in their communities and also supports Montana's Suicide Prevention Program.

#### **Public Health and Community Affairs Practice**

#### Office of Inspector General (OIG)

OIG works to improve the efficiency, effectiveness, and integrity of DPHHS programs while ensuring the health and safety of Montanans served in health care facilities. OIG offers various services, including certifying and licensing different health care facilities, detecting and investigating public assistance program fraud and abuse, and recovering overpayment claims for SNAP, TANF, Medicaid, and LIHEAP.

#### Public Health and Safety Division (PHSD)

PHSD provides a variety of public health services focused on disease prevention and promoting healthy lifestyles for Montanans. These services are available through both private and public providers, including local and tribal public health departments, clinics, hospitals, and community-based organizations. The division also offers epidemiology, scientific support, and laboratory services to assist clinicians in diagnosis and treatment. Additionally, PHSD supports responses to disease outbreaks or water contamination incidents.

#### **Health Care Facilities Practice**

#### Health Care Facilities Division (HFD)

HFD currently operates seven safety net health care facilities across Montana, each addressing distinct populations with varied needs and challenges. These facilities include the Montana State Hospital (MSH) and its Forensic Mental Health Facility (FMHF), Montana Mental Health Nursing Care Center (MMHNCC), Montana Chemical Dependency Center (MCDC), Montana Veterans Home (MVH), Southwest Montana Veterans Home (SWMVH), Eastern Montana Veterans Home (EMVH), and the Intensive Behavior Center (IBC). Several of HFD's facilities serve individuals civilly or forensically committed to DPHHS.



### Improve Customer Service and Strengthen Public Trust

DPHHS aims to strengthen program integrity by reducing improper payments to public assistance clients.

DPHHS aims to enhance its responsiveness to clients by reducing the time required to answer calls regarding medically needy collections.

# Strategic Outcome

DPHHS aims to address child support arrears and promote sustainable payment solutions for families. This includes early intervention strategies and personalized support to help clients manage obligations more effectively, reducing long-term financial strain and increasing family stability and economic independence.

# 1

#### **Key Measures**

- Reduce the SNAP Payment Error Rate (PER) to less than 7%. (*Program 02/HCSD*)
- Decrease the wait time for the medically needy collections callback line by 30%. (*Program 06/BFSD*)
- Increase the total number of payments collected on all active child support arrears cases by 5%. (Program 05/CSSD)

# **Enhance Client Services and Community Well-Being**

DPHHS aims to foster independence from public assistance programs, including by enhancing vocational training programs for high acuity individuals.

DPHHS aims to make community engagement and certain forms of cost-sharing a condition of eligibility for Medicaid Expansion coverage, encouraging accountability, self-sufficiency, and positive outcomes for enrollees.

DPHHS aims to strengthen family relationships and community support networks for youth who have been in foster care for extended periods of time. Related efforts should accelerate pathways to lasting family connections and increase permanency outcomes.

DPHHS aims to improve cardiovascular health and reduce deaths and other chronic conditions associated with heart disease, ultimately improving the physical health of Montanans.

DPHHS aims to implement 10 long-term recommendations from the Behavioral Health System for Future Generations (BHSFG) Commission, which were advanced by Governor Gianforte and authorized by the 2025 Montana Legislature. The implementation of these recommendations will transform Montana's behavioral health and developmental disabilities systems, ultimately improving access to care and addressing Montana's high suicide rate.

DPHHS aims to modernize its state-run health care facilities' Electronic Health Record (EHR) and billing systems to improve service delivery to patients, ease administrative burden on providers, and assist facilities with maintaining regulatory compliance.

DPHHS aims to increase opportunities for eligible Medicaid members in institutional settings to transition to community-based services through the Money Follows the Person (MFP) program, promoting independence and an enhanced quality of life.

DPHHS aims to implement measures to increase public awareness of crisis services, which may lead to a greater willingness to seek help for mental health crises and prevent suicides.

DPHHS aims to expand access to quality childcare for working families, including through performance-based resource and referral contracts. This effort acknowledges that the statewide workforce relies on a stable family support system and seeks to eliminate obstacles to employment while ensuring a strong foundation for children.

DPHHS aims to establish clear, consensus-driven value-based metrics in its core Medicaid primary care program to improve member health outcomes, hold



# Strategic Outcome

#2

providers accountable for quality, and ultimately contain Medicaid costs.

DPHHS aims to continue its steadfast commitment to providing consistent, high-quality care to patients at the Montana State Hospital (MSH) and achieving federal recertification of the facility. The ongoing turnaround of MSH includes an effort to reduce the use of contracted clinical staff, commonly referred to as "travelers," for budgetary, quality, and workplace culture purposes.

# Key

#### Measures

- Increase the number of Vocational Rehabilitation participants who are employed one year after exiting the program by 10%. (*Program 01/DETD*)
- Implement Medicaid Expansion community engagement and cost-sharing requirements pending federal approval. (Program 04/D0)
- Increase permanency for youth who have been in foster care for more than 24 months by 5%. (*Program 03/CFSD*)
- Decrease the mortality rate for heart disease as reported in the death registry by 5%. (*Program 07/PHSD*)
- Complete the first phase of implementation within the discrete workplans for each of the ten authorized BHSFG recommendations. (Program 12/MHSM)
- Complete vendor onboarding, Electronic Health Record (EHR) implementation project kickoff, and MSH and MCDC stakeholder engagement sessions. (Program 09/TSD)
- Increase the number of successful transitions of Medicaid members from institutional settings to community-based settings through MFP by 10%. (Program 22/SLTC)
- Increase statewide calls to 988 Suicide and Crisis Lifeline by 5%. (Program 10/BHDD)
- Increase the number of childcare providers registered or licensed by DPHHS by 5%. (Program 25/ECFSD)
- Implement a single Primary Care Case Management (PCCM) model within the Medicaid primary care program. (Program 11/HRD)
- Reduce the vacancy rate for authorized/budgeted Registered Nurse positions at MSH to 20%. (Program 33/HFD)



Strategic Outcome

#3

#### **Improve Administrative Efficiency and Responsiveness**

DPHHS aims to take a more proactive approach toward public assistance fraud investigations and will utilize recently granted administrative subpoena authority to acquire pertinent case information more rapidly. Using its subpoena authority, DPHHS will complete more fraud investigations by ensuring the cooperation of investigation subjects. This effort reflects the Department's commitment to safeguarding public resources and programs from misuse.

DPHHS aims to reduce the average time to complete corrective action plans for the federal Single Audit. The Single Audit is an organization-wide audit that covers a non-federal entity's financial statements and federal award expenditures, ensuring accountability for how public money is spent. This effort demonstrates the Department's dedication to swiftly resolving audit findings, reducing repeat audit findings, and ensuring responsible stewardship of public funds.

# Key Measures

- Decrease the rate of recipient fraud investigations in SNAP, TANF, Medicaid/CHIP, and LIHEAP that are discontinued due to non-responsiveness by 15%. (Program 08/0IG)
- Decrease the average time to implement Single Audit corrective action plans by 15%. (*Program 16/OSD*)