

# Prevention Bureau

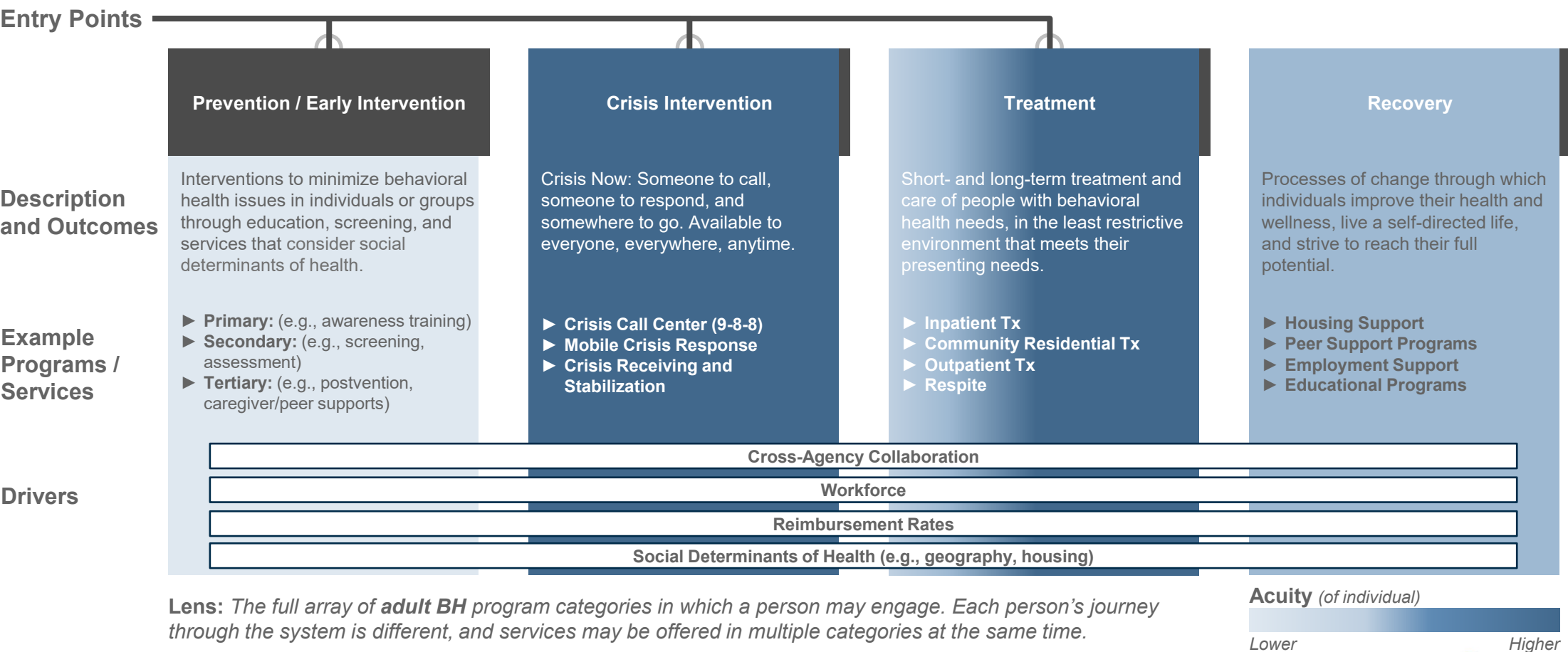
Presented by Jami Hansen



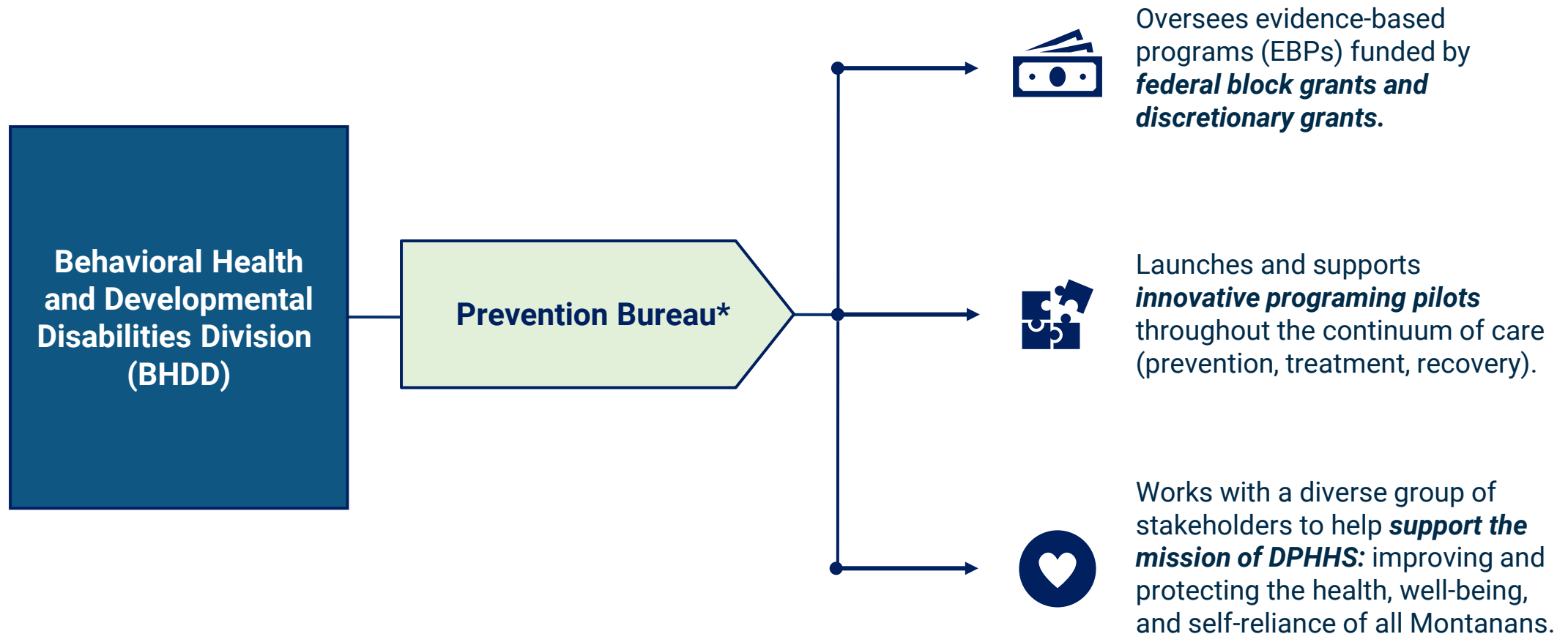
DEPARTMENT OF  
**PUBLIC HEALTH &  
HUMAN SERVICES**

# Behavioral Health | Continuum of Care | **Adult**

The continuum presents an array of behavioral health services, woven together by effective service coordination. This view offers a map of where services, and potential areas of investment, exist.



# Prevention Bureau | Roles



Notes: \*Comprised of policy and technical staff.

# Mental Health Block Grant (MHBG) | Overview

Mental Health Block Grant (MHBG) Overview	
<b>MHBG Objective</b>	<ul style="list-style-type: none"> <li>• Support the grantees in carrying out plans for providing comprehensive community mental health services</li> <li>• Authorized by <i>section 1911 of Title XIX, Part B, Subpart I and III of the Public Health Service (PHS) Act.</i></li> <li>• Funds are awarded to Grantees that can be flexible in the use of funds for both new and unique programs or to supplement their current activities.</li> <li>• Target population: <ul style="list-style-type: none"> <li>○ Adults with serious mental illnesses</li> <li>○ Children with serious emotional disturbances</li> </ul> </li> </ul>
<b>Funding Type / Amount</b>	<ul style="list-style-type: none"> <li>• <b>Grant Funding:</b> \$3,509,870</li> <li>• <b>Required Set-Aside for First Episode Psychosis (FEP):</b> \$350,987</li> <li>• <b>Required Set-Aside for Crisis Services:</b> \$175,494</li> </ul>
<b>Behavioral Health Advisory Council (BHAC)</b>	<ul style="list-style-type: none"> <li>• State Planning/Advisory Council and Input on the Mental Health/Substance Abuse Block Grant Application- Required for MHBG.</li> <li>• It is required for the MHBG that the state completes the BHAC Members by Member Type forms.</li> <li>• Additionally, there are specific agency representation requirements for the State representatives.</li> </ul>
<b>Examples of Programs</b>	<ul style="list-style-type: none"> <li>• Individualized Placements &amp; Supports (IPS) Supported Employment</li> <li>• Drop-In Centers</li> <li>• First Episode Psychosis</li> <li>• Wellness Recovery Action Plan (WRAP)</li> <li>• Peer Workforce Development</li> <li>• 988 Call Line Support</li> </ul>



# Substance Use Prevention, Treatment, and Recovery Services (SUPTRS)

	Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) <u>Block Grant Overview</u>
<b>SUPTRS Objective</b>	<ul style="list-style-type: none"><li>• Objective is to help plan, implement, and evaluate activities that prevent and treat substance use. The SUBG is authorized by <i>section 1921 of Title XIX, Part B, Subpart II and III of the Public Health Service (PHS) Act</i>.</li><li>• SAMHSA requires that grantees spend no less than 20% of their SUBG allotment on substance use primary prevention strategies. These strategies are directed at individuals not identified to be in need of treatment.</li></ul>
<b>Funding Type / Amount</b>	<ul style="list-style-type: none"><li>• <b>Grant Funding:</b> \$7,530,296</li><li>• <b>Required Set-Aside:</b> \$1,506,059 (20% primary prevention required set-aside)</li></ul>
<b>Examples of Programs</b>	<ul style="list-style-type: none"><li>• Prevention Specialists</li><li>• Coalition Building</li><li>• Prime for Life</li><li>• Sober Life</li><li>• Pregnant Woman and Woman with Dependent Children</li><li>• ASAM 3.1 Residential Treatment (FPL: 139-200%)</li><li>• Recovery Services</li><li>• Angel Initiative</li></ul>



# Additional Grants | Overview

Additional Grants Overview	
State Opioid Response Grant (SOR)	<ul style="list-style-type: none"> <li>The SOR program aims to help reduce unmet treatment needs and opioid-related overdose deaths across America.</li> <li><b>Grant Funding:</b> \$4M</li> <li>Examples: <ul style="list-style-type: none"> <li>Opioid Education &amp; Naloxone Distribution Program (OENDP)</li> <li>Harm Reduction Activities</li> </ul> </li> <li><b>TOR:</b> TOR seeks to reduce unmet treatment need and opioid overdose-related deaths through prevention, treatment, and/or recovery support activities for Opioid Use Disorder (OUD) and for stimulant misuse and use disorders.</li> </ul>
Project for Assistance in Transition from Homelessness (PATH)	<ul style="list-style-type: none"> <li>PATH was created as part of the Stewart B. McKinney Homeless Assistance Amendments Act of 1990 (P.L. 101.645)</li> <li>The goal of PATH formula grants is to reduce or eliminate homelessness for individuals with serious mental illnesses (SMI) and cooccurring substance use disorders (COD) and who are experiencing homelessness or at imminent risk of becoming homeless. PATH funds are used to provide a menu of allowable services, including outreach, case management, and services that are not supported by mental health programs.</li> <li><b>Grant Funding:</b> \$300K federal dollars and \$100K state-matched</li> <li><b>Required Set-Aside for housing services:</b> 20%</li> </ul>
Partnerships for Success (PFS)	<ul style="list-style-type: none"> <li>PFS grant uses the Strategic Prevention Framework to guide its work in high-risk communities (with a focus on tribal communities and college aged students population, 18–34 yrs. old) throughout Montana</li> <li><b>Grant Funding:</b> \$1.25M</li> </ul>
Pregnant and Post-Partum Women Grant (PPW)	<ul style="list-style-type: none"> <li>To enhance support of family-based services with a primary diagnosis, SUD, and including opioid use</li> <li><b>Grant Funding:</b> \$900K</li> </ul>



# Prevention Specialists | CSAP Strategies

*The mission of the Center for Substance Abuse Prevention is to improve behavioral health through evidence-based prevention approaches. CSAP is a requirement by the department for reporting purposes, with 20% required set-aside.*

## Center for Substance Abuse Prevention (CSAP) Strategies

