

DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES UPDATE

Montana's HEART Initiative

On February 26, 2024, Montana received Centers for Medicare and Medicaid Services (CMS) approval to provide contingency management, tenancy supports, and Reentry Initiative services under its <u>Section 1115 Healing and Ending Addiction through Recovery and Treatment (HEART) Demonstration</u>. This amendment approval builds on the existing HEART Demonstration which provides the State expenditure authority to cover short-term stays at institutions for mental disease (IMDs) for individuals diagnosed with a substance use disorder (SUD). The HEART Demonstration is effective through June 30, 2027.

- Reentry Initiative Services for Justice-Involved Individuals. Montana is the third state in the country to receive expenditure authority to operate a Reentry Initiative, following California and Washington. The HEART Demonstration will provide a targeted set of Medicaid services to adults with mental illness and/or a substance use disorder who are in Montana's state prisons. In the 30 days prior to release into the community, eligible individuals may receive pre-release case management, in-reach physical and behavioral health clinical consultation, Medication Assisted Treatment (MAT), and a 30-day supply of medication to have in-hand. In addition to these approved benefits, Montana received expenditure authority to provide \$2.3 million in planning and implementation funds to support efforts between the state prison system and state Medicaid agency and to build community-based provider capacity. Montana plans to implement the Reentry Initiative in the fall of 2025.
- Contingency Management Services. Montana is also the third state to receive CMS
 approval to provide contingency management for Medicaid members. Contingency
 management is an evidence-based treatment for individuals with stimulant use
 disorders (e.g., cocaine, methamphetamine).
- Tenancy Support Services. Montana joins several other states in offering tenancy
 supports to assist Medicaid enrollees with behavioral health needs who are experiencing
 homelessness or frequent housing instability. Under the approved demonstration,
 Medicaid-enrolled adults who meet specific needs-based criteria and risk factors are
 eligible to receive pre-tenancy supports and tenancy-sustaining services to support an
 individual's ability to prepare for and transition to housing, as well as to assist in
 maintaining services once housing is secured.

Recovery Residences

• Recovery Residences serve as a bridge from treatment or incarceration back into the community. The passage of Senate Bill 94 in 2023 requires all alcohol/drug recovery homes to register with DPHHS and requires DPHHS to maintain a registry of recovery residences and certifying organizations that operate in the state and are recognized by DPHHS, and publish it on the website. DPHHS currently recognizes certifications by the Recovery Residence Alliance of Montana (RRAM) and the National Sober Living Association (NSLA), ensuring homes follow nationally recognized best practices. The goal is to support long-term recovery with safe, structured housing that keeps people out of the criminal justice system.



- In 2024, DPHHS issued a Request for Proposal for Recovery Services utilizing the State
 Opioid Response Grant. Grants were awarded to 10 certified recovery residences to
 implement Naloxone training, peer support services, and other recovery support
 services, including vocational training, employment support, transportation, and hygiene
 and dental kits. These wrap-around services are designed to provide the support needed
 to maximize an individual's success in the community after incarceration or treatment.
- Through Mental Health and Substance Use Federal Block Grants, DPHHS is able to support 16 drop-in centers across the state. Drop-in centers are community-based facilities that offer a safe and supportive environment for individuals, often those experiencing homelessness, mental health challenges, or substance use disorders. They provide immediate, low-barrier access to essential services and resources. Several drop-in centers co-locate with recovery residences providing transition support, access to external resources, expanded peer networks, healthy socialization and recreation, life skills development, and relapse prevention and crisis supports.

Wellness Recovery Action Plan (WRAP) Expansion

- WRAP is recognized as an evidence-based recovery practice developed by people living with a variety of behavioral health challenges.
- DPHHS collaborated with the Department of Corrections to bring WRAP into the Montana State Prison, with recent facilitation of WRAP, with more than 150 inmates applying and showing interest in the model.

Angel Initiative

The Montana Angel Initiative is a partnership between Governor Gianforte, the Department of Public Health and Human Services (DPHHS), local law enforcement agencies, and treatment providers. The Montana Angel Initiative aims to expand access to substance abuse treatment and create a straightforward and non-arrest entry point for individuals seeking help, ultimately increasing the number of people who receive treatment. As part of the 2024-2025 re-launch of the Angel Initiative, more than 20 core treatment and recovery resource partners have been identified to collaborate with local Sheriff's Offices across the five pilot sites (Cascade County, Lewis and Clark County, Sweet Grass County, Carbon County, and Yellowstone County) This expanded effort aims to enhance referral opportunities and strengthen the initiative's capabilities to connect individuals to treatment and resources effectively.

A toll-free hotline, known as the Angel Line, connects law enforcement with treatment providers in the participant's area.

- 24/7 Coverage: The Billings Community Crisis Center now oversees and monitors the Angel Line, ensuring round-the-clock response coverage and addressing a gap identified during the initial rollout of the Angel Initiative.
- Streamlined Care Access: The Angel Line facilitates immediate assessment of care needs and, for participants requiring residential treatment, assists with evaluating and arranging transportation to ensure timely access to services.