

January 9, 2009

The Honorable Representative Ron Stoker
House Judiciary Committee Chairperson
Montana House of Representatives
Post Office Box 200400
Helena, Montana 59620

Dear Representative Stoker:

We are writing as the representative members of the three Montana Service Area Authorities (SAAs): Western, Central and Eastern. Consistent with the SAA statutory obligation to collaborate with the Department of Public Health and Human Services and to provide information to the legislature, we have conducted a thorough review of several bills currently before the legislature. *We are pleased to find that the following bills are consistent with SAA long-range goals for the improvement of the public mental health system:*

- **HB 60** (to establish a pilot program for the reduction of risk of inmate suicides in certain detention facilities), with the caveat that we would like to see a statewide suicide program in the jails within the next two years;
- **HB 131** (to contract for dedicated crisis beds and emergency and court-ordered detention beds for the mentally ill), while noting that this nine-bed solution is still woefully inadequate to address the lack of crisis services in the state;
- **HB 132** (to allow the diversion to short-term inpatient treatment of mentally ill persons facing involuntary commitment). We feel that this alternative could create significant cost-savings for the state while simultaneously protecting mentally ill persons from the severe life disruptions that a long-term commitment can cause.

At the same time, we find that **HB 130**, while partially consistent, appears to be counter productive to the SAA long-range goals of fostering additional community diversion and crisis services in the mental health system. Specifically, we are concerned about the provision that earmarks state matching funds, on a prorated basis, for "eligible county expenditures made in the previous fiscal year for jail diversion and crisis intervention services." Although we fully support providing incentives for resources to be spent on the development of community-based treatment capacity, we are concerned that this particular method will actually provide a *disincentive*. At a time of tightening budgets, we cannot imagine that the counties will choose to spend the resources to develop and implement community-based treatment services without knowing, in advance, whether or not they will be able to recoup their expenses.

In line with existing Request for Proposals (RFP) processes, it would be much more effective to have the counties develop and submit strategic plans in response to the RFP, and to have a committee rate the proposals on their likelihood of reducing admissions to the state hospital for involuntary emergency and court-ordered detention and evaluation. Fortunately, AMDD already has an effective RFP procedure that includes the SAAs in evaluating the proposals received. Those counties which receive the highest ratings would be given a contract to develop the proposed community-based treatment services and to collect and report the data necessary to demonstrate their effectiveness.

If you have any questions, please feel free to call any of the SAA Board Chairpersons. Thank you for your attention to this important matter.

Sincerely,

Alyce Anderson, WSAA Chairperson
(406) 291-3858, Libby, MT

Vernon Bishop, CSAA Chairperson
(406) 590-1648, Great Falls, MT

Bill Hodges, ESAA Chairperson
(406) 665-8720, Hardin, MT

Board Members of the:

Western Service Area

Alyce Anderson, Libby
Rena Ayres, Kalispell
Royalee Bishop, Polson
Tom Camel, Polson
Brenda Desmond, Missoula
Howard Gaines, Dillon
Chris Hartzmann, Troy
Craig Keller, Butte
Michelle Lewis, Butte
Paul Meyer, Missoula
Jenny Monson, Hamilton
Amber Montgomery, Butte
Dan Morehead, Missoula
Marty Onishuk, Missoula
Denelle Pappier, Hamilton
Jennifer Robohm, Missoula
Courtney Rudbach, Kalispell
Geri Stewart, Missoula
Sunny Terry, Libby
Stacey Wheeler, Missoula

Central Service Area

Dan Aune, Bozeman
Vernon Bishop, Great Falls
Martha Bottelson, Helena
Kris Denton/J. Beck, Rural
James Gustafson, Gr. Falls
Kathleen Hartman, Rural
John Hultgren, Rural
Lea Lembke, Rural
Gary Mihelish, Helena
Mike McLaughlin, Great Falls
Mike Minnehan, Helena
Joe Moll, Great Falls
Marlene O'Connell, Gr. Falls
Tom Peluso, Bozeman
Delores Plummage, Rural
Molly Protheroe, Helena
Mathew Stewart, Great Falls
Lenore Stiffarm, Rural
Jacob Wagner, Bozeman
David Young, Bozeman
*Rural = Boulder, Chester,
Harlem, or Livingston

Eastern Service Area

Bobbie Becker, Glendive
Marlene Brown, Billings
Joan Daly, Billings
Colleen Forrester, Glasgow
Mary Jean Golden, Lewistown
Sue Harden, Miles City
Bill Hodges, Hardin
Esther Kramer, Scobey
Frank Lane, Miles City
Marie Logan, Sidney
Ron Mills, Miles City
Rev. Karalee Mulkey,
Janice Reicholdt, Malta
Diane Ronneberg, Big
Timber
John Ronneberg, Big Timber
Bob Ross, Billings
Carl Seilstad, Lewistown
Jo Shipman, Lewistown

SERVICE AREA AUTHORITY

WESTERN · CENTRAL · EASTERN

January 9, 2009

To Individual Legislators:

The purpose of this letter is to fulfill our obligation to collaborate with state leadership and the Department of Public Health and Human Services for the purpose of planning and oversight of mental health services, as they relate to service areas defined in Montana Code Annotated specifically as it applies to service planning and consumer advocacy.

Through a series of Service Area Authority Summit meetings over the past two years, we have identified seven service priorities that are common to all three regions across the state.

1. Retention of funds allocated for mental health services during the 2007 Legislative Session.
2. Development and expansion of locally accessible safe/secure treatment beds.
3. Crisis Intervention Training (CIT) for law enforcement and other first responders.
4. Workforce Development – recruitment and retention of mental health professionals and continued development of peer services.
5. Medically appropriate transportation for individuals in mental health crisis.
6. Increase reimbursement rates for providers.
7. Adequately fund community services, such as Drop-In Centers and Crisis Centers.

You will note that these priorities are identical to the Mental Health Oversight Advisory Council's (MHOAC) priorities that were previously submitted to you. As you can see, there has been considerable collaboration with stakeholders at all levels across the state. As you go into the 2009 Legislative Session, please give serious consideration of the priorities the citizens of Montana have given you.

On behalf of the three Service Area Authorities, we thank you in advance for supporting legislative initiatives that advance our priorities that will improve the quality of life for Montanans with mental health issues.

Sincerely,

Alyce Anderson, Chair of Western Service Area Authority
Vernon Bishop, Chair of Central Service Area Authority
Bill Hodges, Chair of Eastern Service Area Authority