

# Proposal for Legislation -- 2017 Behavioral Health Care Act

**Return to:**

Sue O'Connell  
Legislative Services Division  
E-mail: [soconnell@mt.gov](mailto:soconnell@mt.gov)  
Phone: 444-3597 Fax: 444-3036

**PROPOSER'S NAME/TITLE:**

ORGANIZATION: Department of Public Health and Human Services  
ADDRESS: 100 N. Park Suite 300  
PHONE: 406-444-3969  
FAX: 406-444-4435  
E-MAIL: [goldenburger@mt.gov](mailto:goldenburger@mt.gov)

**1. What is the problem or issue?**

Increasing access to behavioral health care is a top Montana priority. While Mont. Code Ann. § 53-24-204(2)(a) requires DPHHS to approve substance abuse treatment facilities to ensure facilities standards are met, Mont. Code Ann. § 53-24-208(2) prohibits DPHHS from approving additional substance abuse services in areas where an existing facility already provides such services. This effectively establishes a monopoly of one substance abuse facility for one area, limits access for clients who need substance abuse treatment, and forces clients to wait for available openings in existing programs. These statutes originated almost 40 years ago and have not been updated in the last 13 years, and should be updated to allow an increase in this aspect of behavioral health care.

**2. What do you want the legislation to do?**

Remove the arbitrary limitation of the number of allowed service providers to improve behavioral health care access and reduce provider shortages. This legislation would allow the Department to approve more than one provider serving a given area. These statutes need to be updated to allow increased providers, competition and jobs and to ensure the delivery system can match patient need.

**3. If possible, please list the MCA (Montana Code Annotated) sections that would need to be amended.**

This includes statutes 53-24-204 & 53-24-208.

**4. If the proposed change requires additional funding, what funding sources do you propose?**

Increased access to care may reduce the costs in many areas (such as jails, courts, hospitals, outpatient clinics, and detox programs) as more clients receive treatment and maintain sobriety. Access to the right level of care in the right environment can reduce costs. More diverse treatment options also allow alignment of treatment with the appropriate level of evidence-based care that best match the individual needs of clients.

**5. Has similar legislation been requested in the past, been introduced in another state, or provided as a model act? If so, please provide a citation, reference, or point of contact.**

No