



Department of Public Health and Human Services

Addictive & Mental Disorders Division ♦ PO Box 202905 / 100 North Park Avenue, Suite 300

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Steve Bullock, Governor

Sheila Hogan, Director

June 22, 2020

Sue O'Connell
Children, Families, Health and Human Services Interim Committee
State Capitol
PO Box 201706
Helena, MT 59620-1706

Dear Ms. O'Connell:

House Bill 660 was passed in the 2019 Legislative Session, which provides appropriation to fund Mobile Crisis Units. This report is intended to meet the reporting requirements in subsection (5).

Please note that we are unable at this time to present outcome measures for the grant. The attached one-pager explains the actions taken and challenges faced by this project.

Please do not hesitate to contact with questions. My work phone is (406) 437-4062 or email zbarnard@mt.gov

Sincerely,

Zoe Barnard
Administrator

cc: Sheila Hogan, Director, DPHHS
Marie Matthews, Medicaid and Health Services Branch Manager, DPHHS
Erica Johnston, Operations Services Branch Manager, DPHHS
David Crowson, Chief Information Officer, DPHHS

Overview: In the 2019 Legislative Session, HB 660 obligated funding for a mobile crisis unit program under the Department of Public Health and Human Services, Addictive and Mental Disorder Division (the Department), providing for: local community grants, rulemaking authority, an appropriation, and effective and termination dates. The one-time appropriation of \$500,000 was reserved for use during the biennium July 1, 2019 - June 30, 2021, in grant awards of no more than \$125,000, which required a local government match at a \$1 to \$1 rate.

Summary: Between July 1, 2020 and November 1, 2020, the Department held three public calls to promote the grant opportunity, answer questions, and to educate communities on the RFP process. The Department also worked with the Department's Tribal Relations Program Manager to conduct a call specific for tribal leadership. The Department published a Request for Proposal (RFP) on November 1, 2019, through the State Procurement Bureau. The Department received three applications for the Mobile Crisis Unit Program Grant. Of the three applicants, one did not meet the statutory requirements and one decided to withdraw the application. The Department issued a grant contract to the third applicant, Gallatin County, for the timeframe of January 1, 2020 to June 30, 2021.

The RFP was rereleased on June 1, 2020, with the goal of providing an additional opportunity for funding. In May 2020, the Department hosted an additional informational call and dispersed information to key stakeholders, including tribal leadership to promote interest and provide information on the grant and the RFP process.

The contract entered into with Gallatin County became effective January 1, 2020. Since that time, they have faced challenges with hiring Mobile Crisis Unit staff due to low applicant turnout and the hiring process has been further delayed by the COVID-19 pandemic. As of June 12, 2020, services have yet to begin. An individual from the Gallatin County Sheriff's Office has been assigned to manage the Mobile Crisis Unit Grant and they continue to actively recruit additional team resources.

Challenges: The Department identified specific challenges applicants faced with this funding opportunity. Communities struggled to identify adequate funds to meet the 1:1 hard match required. In addition, particularly in rural communities, the staffing requirements outlined in HB 660 proved to be a barrier as Montana has faced historical shortages for the professionals defined under "Mobile Crisis Unit Professional" and "Support person."

Alternative Models: Silver Bow, Flathead, Ravalli, and Lewis and Clark counties are currently utilizing the County and Tribal Matching Grant to fund mobile crisis units. The County and Tribal Matching Grant allows an in-kind match and has less restrictive statutory requirements than HB 660, providing flexibility in both the funding and design of models that align with a community's available resources. The mobile crisis unit models include community-based therapists and support staff that can respond with or without law enforcement to behavioral health crises throughout a designated area. The majority of these programs are available 24/7 and include follow-up services aimed at diverting individuals from higher levels of care.