DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES

Behavioral Health and Developmental Disabilities Division (BHDD)

Someone to call

Someone to respond

Somewhere to go

Regional Crisis Call Centers

Mobile Crisis Response

Crisis Receiving and Stabilization

Someone to call

988: Montana's Suicide Prevention and Mental Health Crisis Lifeline

- 988 will replace the current 10-digit Lifeline number, 1-800-273-TALK (8255), in July 2022, with an expected increase of call volume of +/-30 percent due to ease of remembering and marketing.
- The state implementation plan was completed in January 2022, and we are currently in Phase 1: Pre-launch. This will be followed by Phase 2: Year One.
- Montana 988 is part of the National Suicide Prevention Lifeline network.

988 Next Steps

- Continue to work on chat and text capabilities
- Plan and Implement Marketing for 988 in Your State/Territory
- 988 Launch Meeting

Someone to Respond

- Seven mobile crisis teams already in some phase of operation or implementation through the Crisis Diversion Grants
- American Rescue Plan ACT (ARPA) - Mobile crisis funded through Medicaid

Timeline to add Mobile Crisis to the Montana's Medicaid Benefit Plan

Complete	Complete the site visits by the end of May
Work	Work with Guidehouse to establish a rate structure by the end of July
Engage	Engage in stakeholder and public meetings to get feedback - August and September 2022
Submit	Submit a State Plan Amendment by October 1, 2022

Somewhere to go

Crisis Receiving and Stabilization

- Crisis Stabilization Program reimbursed through Medicaid - short-term emergency treatment for crisis intervention and stabilization.
  - Inpatient or Crisis Stabilization
  - Outpatient or Crisis Receiving
- Emergency Detention Beds
- Western Interstate Commission for Higher Education (WICHE) – High Level State-wide Assessment
  - Recommendations regarding the improving crisis receiving and stabilization within Montana to provide statewide coverage of crisis receiving and stabilization services.

WICHE Assessment

- WICHE is currently providing technical assistance and consultation on crisis receiving and stabilization centers to providers in seven counties
- The initial stage of WICHE's consultation encompassed a range of data review, information gathering, and relationship development (January - April 2020)

WICHE ASSESSMENT - ONGOING

- January –August 2022
- WICHE will continue to provide each of the providers in the seven counties technical assistance regarding the development and/or operation of crisis receiving and stabilization. Consultations are, and will continue to be, centered on the Crisis Now model in the context of each county's unique resources and system of care. Consultation has and will continue to focus on: a) services; b) facility; c) staffing; d) budgeting and sustainability; and d) policies.

SAMSHA's Minimum Standards for Crisis Receiving and Stabilization

- Function as a 24 hour or less crisis receiving and stabilization;
- Offer a dedicated first responder area;
- Incorporate some form of intensive support into a partner program, which could be within the services' own program or within another provider, to support flow for individuals who need additional support;
- Include beds within the real-time regional bed registry system operated by the crisis call center hub to support efficient connection to needed resources; and
- Coordinate connection to ongoing care.

Emergency Detention Beds

Emergency Detention Beds		
Location	Number of Emergency Beds	Status
Hamilton	2	Open and operating
Helena	2	Permanently closed since December 2020
Polson	2	Permanently closed since April 2020
Butte	2	Has been closed since April 2021
Bozeman	2	Has been closed since January 2022
Missoula	2	Has only been open for two month since July 2021, has been closed since February 2022

Mirroring Medicaid and State Programs and Services

MONTANA'S CRISIS SYSTEM

Montana's Current Crisis Programming

State Programs/Services

- Crisis Diversion Grants
- 72-hour
- 14 Day Diversion
- Crisis ED Beds
- Mental Health Services Plan

Medicaid Programs/Services

- Crisis Assessments
- Outpatient Therapy
- Med Management
- Targeted Case Management
- Crisis Stabilization Program

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Crisis Receiving and Stabilization

72-Hour Program

- State reimbursement
- Can provide Services up to 72-hours
- Includes:
  - ✓ Psychiatric Evaluation
  - ✓ Care Coordination
  - ✓ Community Based Psychiatric Rehabilitation and Support
  - ✓ Crisis Management Services

Crisis Stabilization Program

- Medicaid reimbursement
- Can provide services for up to eight days, then requires a continued stay review
- Includes :
  - ✓ 24-hour awake direct care staff;
  - ✓ 24-hour on call licensed clinical mental health professional;
  - ✓ Crisis stabilization services;
  - ✓ Psychotropic medications administered and monitoring behavior during the crisis stabilization period;
  - ✓ Observation of symptoms and behaviors; and
  - ✓ Case management services;
  - ✓ Support or training for self-management of psychiatric symptoms; and
  - ✓ Individual, family, or group psychotherapy.

The Mirror Image

State

- Crisis Assessments/ Crisis Psychotherapy (CPT 90839/90840)
- Care Coordination
- Mobile Crisis Units
- Crisis Receiving and Stabilization Program

Medicaid

- Crisis Assessments/ Crisis Psychotherapy (CPT 90839/90840)
- Care Coordination
- Mobile Crisis Units
- Crisis Receiving and Stabilization Program

Next Steps…..

1

Meet

- Continue the mobile crisis site visits – May 30, 2022

2

Assess

- Review WICHE's statewide assessment – September 29, 2022

3

Mirror

- Mirror state services and Medicaid services – October 2022 to January 2023

Questions?

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