



**DEPARTMENT OF
PUBLIC HEALTH &
HUMAN SERVICES**

Serving Montanans in their communities to improve health, safety, and well-being, and to empower independence.

ANNUAL PLAN

FY2024

DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES (DPHHS)

DPHHS Director Charlie Brereton provides leadership and direction to the agency to ensure a cohesive and strategic approach to **servicing Montanans in their communities to improve health, safety, and well-being, and to empower independence**. The Director conducts oversight with assistance from an executive leadership team comprised of a Deputy Director, Human Services Executive Director, Medicaid and Health Services Executive Director, Chief Financial Officer, Chief Legal Officer, Chief Information Officer, Chief Human Resources Officer, and State Medical Officer. The Director's Office is further supported by the offices of Budget and Finance, Legal Affairs, Human Resources, Inspector General, Communications, Faith and Community-Based Services, Tribal Relations, and American Indian Health.

Of DPHHS's 12 divisions, nine are housed within its two core practices: **Human Services** and **Medicaid and Health Services**. The remaining three, highlighted below, are positioned directly under the Director's Office.

Business and Financial Services Division (BFSD)

BFSD enables DPHHS to achieve its strategic objectives through accurate and efficient management of the agency's financial resources and support services.

Technology Services Division (TSD)

TSD delivers innovative and timely information technology (IT) solutions across the breadth of the agency's health and human services programs. The division coordinates strategic IT investments to ensure citizen access to reliable, secure, and high-quality data and technologies to address complex and evolving health and human services issues. TSD is committed to providing secure, accessible, and responsive IT services to the Department.

Public Health and Safety Division (PHSD)

PHSD works to improve the health of Montanans through a wide range of public health services aimed at disease prevention and promotion of healthy lifestyles. Services are provided through private and public providers, including local and tribal public health departments, clinics, hospitals, and other community-based organizations. The division also includes epidemiology and scientific support and laboratory services that are used by clinicians to aid in diagnosis and treatment, and to enhance responses to disease outbreak or water contamination and to monitor disease trends.

Human Services Practice

Disability Employment and Transitions Division (DETD)

DETD advances the independence and employment of Montanans with disabilities by promoting opportunities for handicapped citizens to have rewarding careers and achieve maximum personal potential through informed choice. The division is organized into five program areas: Vocational Rehabilitation, Blind and Low Vision Services, Pre-Employment Transition Services, Disability

Determination Services, and Operations and Support. Many programs are provided to support Montanans with disabilities, notably the Montana Telecommunications Access Program (MTAP) that ensures those who are deaf or speech impaired can use traditional telecommunications equipment and services.

Human and Community Services Division (HCSD)

HCSD oversees policy, process, and training for eligibility services to clients of Montana's Temporary Assistance for Needy Families (TANF) program, the Supplemental Nutrition Assistance Program (SNAP), Medicaid programs, and Healthy Montana Kids (HMK) programs across the state. The Division also administers the Community Services block grant which is used by 10 Human Resource Development Councils statewide to provide a wide range of community-based human services programs. Other programs include the Low-Income Home Energy Assistance and Weatherization, the U.S. Department of Housing and Urban Development's Emergency Solutions Grant and U.S. Department of Agriculture food commodities programs.

Child Support Services Division (CSSD)

CSSD works to improve the economic stability of families through the establishment and enforcement of child support and medical support orders. Services include locating parents, establishing paternity, establishing financial and medical support orders, and enforcing or modifying child support orders including medical support orders.

Child and Family Services Division (CFSD)

CFSD administers child protective services, child abuse and neglect services, prevention services, and other programs designed to keep children safe and families strong with the overarching goal of improving safety, permanency, and well-being for children. CFSD is organized into six regions and a central office that administer programs and are advised by Local Family Services Advisory Councils, which serve as the link between local communities and DPHHS.

Early Childhood and Family Support Division (ECFSD)

ECFSD provides coordinated services and resources to promote the well-being, health, and development of children, individuals, families, and communities encompassing over many activities, spanning prenatal to adult services. ECFSD's programs target early care and education, food security and nutrition education, violence and neglect prevention, family support, and preventative health care. The division is committed to supporting consistency, efficiency, and better-coordinated services for children and families across the state of Montana.

Medicaid and Health Services Practice

Senior and Long-Term Care Division (SLTC)

SLTC plans, administers, and provides publicly funded long-term care services for Montana's senior citizens and persons with disabilities. Additionally, the division provides education and support

regarding aging and long-term care issues to Montanans of all ages. This includes implementation of the Older Americans Act, Medicaid community services, and Adult Protective Services.

Health Resources Division (HRD)

HRD works to improve and protect the health and safety of all Montanans through the state's Medicaid Program, including Medicaid primary care services, Healthy Montana Kids (Medicaid and Children's Health Insurance Program services for children in low-income families), the Montana Medicaid Expansion Program, and Big Sky Rx. The division reimburses public and private providers for a wide range of preventative, primary, and acute care services.

Behavioral Health and Developmental Disabilities Division (BHDD)

BHDD administers a wide range of services to fulfill its mission of facilitating the efficient delivery of effective services to adults and children with behavioral health challenges and/or developmental disabilities. BHDD's work is guided by a goal of providing Montanans with the support to live full, independent lives within their communities. BHDD also supports Montana's Suicide Prevention Program and Developmental Disabilities Program.

Healthcare Facilities Division (HFD)

HFD currently operates seven health care facilities across Montana, each serving populations with unique needs and challenges. These include the Montana State Hospital (MSH), Montana Mental Health Nursing Care Center (MMHNCC), Montana Chemical Dependency Center (MCDC), Montana Veterans Home (MVH), Southwest Montana Veterans Home (SWMVH), Eastern Montana Veterans Home (EMVH) and Intensive Behavior Center (IBC). The Division is responsible for overseeing the state's safety net health system, which serves certain Montanans living with mental illness, intellectual or developmental disabilities, aging related health conditions, and/or substance use disorders.

Strengthen & Stabilize Montana’s Health Care Delivery System

Implement Medicaid provider rate adjustments to better align reimbursement rates with the true cost of providing physical and behavioral health care services to over 300,000 low-income Montanans.

In coordination with the Behavioral Health System for Future Generations (BHSFG) Commission, develop strategic plans with implementation recommendations to reform Montana’s behavioral health and developmental disabilities service delivery systems.

Establish a pathway to U.S. Centers for Medicare and Medicaid Services (CMS) recertification of the Montana State Hospital.

Develop a singular value-based payment Medicaid Primary Care Delivery Model.

Continuously address Healthcare Facilities Division vacancies, including through the implementation of recruitment and retention strategies, with an emphasis on reducing contract staff utilization.

Increase in-state access to services for children with high-acuity needs.



Strategic Outcome

1

Key Measures

- 100% approval of CMS State Plan and waiver amendments to implement provider rate adjustments by CYE23.
- Increase access by 5% for Behavioral Health, Primary Care, and Developmental Disabilities services.
- Launch BHSFG Commission and secure governor’s approval of at least 2 Commission-recommended initiatives by CYE23.
- At least 8 BHSFG Commission meetings scheduled and held through end of SFY24.
- Complete 75% of HB 5 capital improvement projects for CMS recertification of MSH by end of SFY24.
- Achieve 75% of required MSH CMS recertification activities by September 2024, and 100% by December 2024.
- Reduce traveler costs by 10% for HFD and increase state HFD FTE by 5%.
- 100% completion of the Behavioral Health and Developmental Disabilities Alternative Settings Design Proposal and

		<p>Implementation Plan, and presentation to the BHSFG Commission, by May 1, 2024.</p> <ul style="list-style-type: none"> • 5% reduction in out-of-state placement of children with complex physical and behavioral health needs.
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 <p>Strategic Outcome</p> <p># 2</p>	<p>Drive Independence & Accountability through Public Assistance Programs</p>	
	<p>Redesign Supplemental Nutrition Assistance Program (SNAP) and Temporary Assistance for Needy Families (TANF) Employment and Training service provision models to better meet the needs of Montanans.</p> <p>Conduct a timely and accurate redetermination of eligibility for all Montana Medicaid and Healthy Montana Kids (HMK) members.</p> <p>Increase opportunities for non-custodial parents engaged in child support services to improve economic stability for themselves and their children.</p> <p>Increase access to quality childcare for working families.</p> <p>Increase opportunities for older youth in foster care to obtain skills necessary for economic stability as adults.</p>	
	<p>Key Measures</p>	<ul style="list-style-type: none"> • At least 25% reduction in Public Assistance Helpline (PAHL) wait times. • 100% completion of Medicaid and HMK eligibility redeterminations. • Execution of at least 1 new performance-based contract for statewide SNAP and TANF employment and training services provision. • 25% increase in referrals of non-custodial parents engaged in child support services to employment and training services. • 5% increase in the number of licensed childcare providers participating in the Best Beginnings Scholarship program. • 50% increase in the number of foster youths aged 14 and older participating in vocational rehabilitation services.



Strategic
Outcome
3

Increase Data Analytics Capacity for Performance Measurement & Decision-making

Establish and integrate an Office of Research and Performance Analysis (ORPA) to catalyze the strategic use of data and analytics, including for resource allocation, program evaluation and performance measurement, and operational decision-making.

Key Measures

- Complete data assets inventory and implement ongoing maintenance.
 - 100% of data cataloged by end of SFY24.
 - 50% of data elements assessed and documented by population/customer, program impact, limitation, and gap by end of SFY24.
- Complete data methodology design.
 - 100% completion of detailed project timeline encompassing key milestones from the initial data collection phase to the final stages of analysis and reporting by end of SFY24.
 - 100% completion of data methodology design, including management tools and data analysis standards by end of SFY24.
- Develop data use strategy (i.e., development of a data collection and utilization plan).
 - 100% identification of measures of key performance indicators by end of SFY24.
- Develop use case modeling for metrics and outcomes related to self-sufficiency/independence and population health.
 - Implement at least 4 use cases with outcome measures for success (at least 2 for self-sufficiency/independence and 2 for population health) by end of SFY24.
- Hold at least 2 meetings of a new Data Governance Committee by end of SFY24.