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# Update on Rocky Mountain Tribal Access to Recovery

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Presentation at "Building Bridges for Equitable Access"  
Fort Belknap, April 15, 2008  
Kathy Masis MD



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## Rocky Mountain Tribal Access to Recovery (RMT ATR)

- Award to Montana-Wyoming Tribal Leaders Council (MT-WY TLC)
  - \$1.9 million per year for 3 years
  - From Substance Abuse and Mental Health Services Administration (SAMHSA)
  - Total awards: 19 states, 5 Tribal Organizations
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## Administration of RMT ATR

- MT-WY Tribal Leaders Council
  - Governing Board, Elected Tribal Chairs
  - Executive Director, Gordon Belcourt
- Rocky Mountain Tribal Access to Recovery (RMT ATR)
  - Project Director, Kathy Masis M.D.
  - Financial Officer, Marlene Hanify
  - Treatment Access Coordinator, Karla Two Two
  - Information Technology Administrator, Don Wetzel Jr.
- RMT ATR Advisory Team
  - Montana and Wyoming Native American Chemical Dependency Program Directors



## Grant Application Process

- Competitive grant from Substance Abuse and Mental Health Services Administration (SAMHSA)
- Project description reflects needs of Tribal and Urban Indian chemical dependency programs
- National requirements translated to meet local priorities



## Timeline for RMT ATR

- April 2007 Attend SAMHSA Technical Assistance on ATR RFA
- May 2007 Meet with Tribal CD Program Directors about ATR
- June 2007 Submit proposal
- September 2007 Award announced
- October 2007 Staff hired
- October 2007 Contracts awarded
- October 2007 Voucher contractor meets with Tech Adv Team
- December 2007 Report to Tribal Leaders Council
- December 2007 Training of Case Managers
- January 2008 SAMHSA tests voucher system
- January 2008 Training on voucher system; Tech Adv Team meets
- February 2008 First clients receive services
- February 2008 Report to Tribal Leaders Council
- February 2008 Report to Tribal Health Directors
- March 2008 First site visits: No. Arapaho, E. Shoshone, Conf. Salish-Kootenai, Missoula Indian Center, NAIA Butte



## SAMHSA Priorities

### Access to Recovery Grants

- Increase client choices for
  - substance abuse clinical treatment
  - recovery support services
- Expand access by including
  - faith-based programs
  - other “wrap-around” services
- Increase substance abuse treatment capacity



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## Emphasis of ATR Grants Nationally

- Cost-effective
  - Successful outcomes
  - Largest number of people
  - Serve methamphetamine clients
  - Offer Recovery Support Services
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## Elements of All ATR Grants

- Funds go to service providers via voucher system
  - Client outcomes are monitored
  - Costs are tracked
  - Clients have genuine choice
  - Flexibility in funding a continuum of care
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## Recovery Support Services

### Examples:

- ❑ Transportation to treatment
- ❑ Job training
- ❑ Relapse prevention
- ❑ Child care
- ❑ Mentoring
- ❑ Spiritual support



## Eligible Service Providers

- Public
- Private
- Nonprofit
- For profit
- Faith-based
- Community organizations
- Tribes and Tribal Organizations



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## Mission of RMT ATR

- Address the gaps and barriers that impede access for American Indians in Montana and Wyoming to a continuum of care for substance abuse that is cultural and effective.
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## Montana-Wyoming Tribal Leaders Council's Mandate

- Increase the treatment services for meth and other addictions
  - For American Indians in Montana and Wyoming
  - Services must be culturally-competent
  - Responsive to local needs
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## Gaps and Barriers findings from Native American Treatment Needs Survey

- Treatment programs are full
- Lack of transportation
- Type of treatment not available
- Placed on waiting list and changed mind
- Treatment facilities too far away
- Too much red tape
- No insurance
- Need to keep working
- Specialized services lacking
- Lack of American Indian counselors

NA Treatment Needs  
Survey, MT, 2001



## RMT ATR Tribal Partner Programs

- Crystal Creek Lodge, Blackfeet Tribe
- White Sky Hope Center, Rocky Boys
- Salish-Kootenai Behavioral Health
- Spotted Bull Treatment Center, Fort Peck Tribes
- Fort Belknap Indian Community Chemical Dependency Center
- Northern Cheyenne Recovery Center
- Crow Nation Wellness Center
- White Buffalo Recovery Center, No. Arapaho Tribe
- Eastern Shoshone Recovery Center



## Standards for Providers

- Clinical treatment providers must be
  - National accredited or
  - State certified or licensed or
  - I H S-approved
- Standards for recovery support providers (transportation, spiritual support, mentoring, child care, etc) are recommended by Technical Advisory Team



## Funding Stream

- Tribal CD program recruits providers
- Clients are given choices for service providers
- Tribal CD program pre-authorizes services
- Voucher system obligates the funds
- Service provider invoices after services are delivered to client



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## RMT ATR Electronic Web-based Voucher Management System

- Designed by the National Council on Alcoholism and Drug Dependency of New Jersey (NCADD-NJ)
  - Follows SAMHSA requirements
  - Training done in January 2008
  - Started February 2008
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## RMT ATR Voucher System

- Secure electronic voucher system for pre-authorizing services, and payment
  - Services to be funded are programmed into the system
  - Each Tribal Program determines which services will be funded
  - ATR-funded services payable by voucher system
  - [www.tribalrecovery.com](http://www.tribalrecovery.com)
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## Case Example

- 18 year old
- Alcohol and methamphetamine problems
- Has assessment at Tribal Chemical Dependency (CD) Program
- Treatment recommendations made
- Client agrees to participate in RMT ATR
- Client makes choice from list of providers approved by Tribal CD Program



## Case Example, con't.

- RMT ATR Case Manager submits request for ATR voucher including:
  - outpatient treatment,
  - transportation services,
  - cultural mentoring services
- Services are pre-authorized via voucher management system
- Client accesses services
- Provider invoices via voucher management system



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## Referrals for treatment

- RMT ATR clinical treatment providers are selected by each Tribal/Urban Indian Partner program
  - Provider applications have been reviewed by RMT ATR in Billings
  - Standards: Licensure and accreditation required for Clinical Treatment Providers
  - Tribal CD Programs are providers and receive reimbursement on a fee-for-service basis
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## Policies and Procedures

- Each Tribal and Urban Indian CD or Behavioral Health program will retain their own policies and procedures for clinical treatment services
  - States of Montana and Wyoming Treatment Standards, CARF, and Indian Health Service are compatible with RMT ATR
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## Referrals for Recovery Support Services

- These are services that recovering people need to stay clean and sober
- Address needs that are not covered in current funding for chemical dependency
- Faith-based, spiritual and traditional cultural practices and counseling are important to some clients' recovery
- Funding allowed with ATR grant project since 2004



## Enrolled RMT ATR Providers April 2008

- **18 Clinical CD Treatment in Wyoming, Montana, and North Dakota**
  - 3 Residential
  - 11 Outpatient CD
  - 3 Psychotherapy
  - 1 Medical clinic
- **21 Recovery Support in Wyoming and Montana**
  - 4 Transitional Housing
  - 2 Churches
  - 5 Traditional Tribal/cultural mentoring
  - 1 Recovery Support coordination
  - 1 Life Skills coaching
  - 1 Women's Drop-In Center
  - 2 Acupuncturists
  - 2 Licensed Child Care
  - 1 Education Services
  - 1 Gas Station
  - 1 Alcohol and Drug Testing Program



## Potential Providers

- Tribal Chemical Dependency Program
- Tribal Mental Health Program
- Tribal Public Health Nursing
- Vocational Rehabilitation
- Colleges
- Peers
- Mentors



## RMT ATR Standards for Traditional Cultural Practitioners

- Technical Advisory Team recommends that each Tribe/Tribal program recruit traditional practitioners according to their particular tribal values and process.
- Expectation to follow traditional cultural standards of respect, non-exploitation, confidentiality.
- Client always has the choice to participate or not.
- Tribe/Tribal Program has the responsibility to recruit and offer the services that they choose.
- RMT ATR Partners and clients have autonomy and choices.



## Administrative and Voucher Cost Breakout for RMT ATR

- Total award \$5,623,000 for 3 years
- 20% allowed for administrative costs
- MT WY TLC negotiated rate with SAMHSA before award made
- Administrative costs \$1,124,600 allowed
- Voucher expenditures \$4,498,808 required



## RMT ATR Voucher Funds Allocations

- Funding for services in vouchers \$4,096,979 for 3 years
- Divided up among 10 Tribes and 5 Urban Indian Centers
- Year 1 \$1,256,979
  - Tribes 1,000,000
  - Urbans 200,000
  - Distribution pending 56,979
- Year 2 1,400,000
- Year 3 1,440,000
- Total 3 years \$4,096,979



## Administrative Costs Total 3 years

- RMT ATR Staff Salaries:       \$116,010
  - K. Masis, K. Two Two, M.Hanify, D. Wetzel
- Contracts:
  - Voucher management           543,980
  - Westat, C. Love               132,400
- Travel                               68,000
- MT/WY TLC Indirect costs       202,652
- Total Admin.                       \$1,063,042**



## Financial Summary Feb 2008

RMT ATR 10/07-9/08	Total	Admin TLC	Contracts	Travel and training	\$ in Tribal and Urban Voucher Accounts for Client Services
Budgeted Direct Costs	\$1.8 million	\$72,000	\$450,000	\$40,000	\$1.25 million
Distributed as of Feb 08	\$ 760,000	\$23,000	\$105,000	\$11,000	\$ 600,000 ((\$50,000 per Tribe)
Balance remaining	\$1.04 million	\$49,000	\$345,000	\$29,000	\$ 625,000
Indirect costs TLC	\$100,000				



## Role of MT WY TLC

- Administer grant according to grant requirements
- Consult with RMT ATR Technical Advisory Team
- Provide training/ technical assistance to Tribes and Urban Indian ATR Partners
- Manage provider application process
- Oversee voucher management system contract
- Facilitate communication with SAMHSA
- Monitor voucher utilization rates, expenditures, and follow ups to meet grant requirements
- Report to MT-WY Tribal Leaders Council



## Key Points on RMT ATR

- Clients receive assessment at Tribal CD Program
- Given choices of providers
- Vouchers available for
  - clinical treatment
  - recovery support services
- Recovery support services emphasized
- Clients receive follow-up interview



## Concerns raised at Fort Belknap meeting

- Liability issues for tribal traditional activities
- Ownership of data
- Tribal agreements to participate
- When will our Tribe get started with ATR?
- What are the standards to be followed?
- What are the expected outcomes?



## Want more information?

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