

Mental Health Study

Montana Legislative Services Division

State of Montana



March 18, 2008



Mental Health Study Team

- **DMA Health Strategies:**
 - Richard Dougherty, Ph.D., Wendy Holt, M.P.P. and Wu Zeng, Ph.D. (Cand)
 - Overall Project management. National experts in needs analysis, quality improvement and system design.
- **John O'Brien**
 - Financial review. Formerly of the Technical Assistance Center. Consulted to over 35 state and local human service authorities – currently including New Mexico and Oklahoma.
- **Leslie Schwalbe**
 - Strategic consultant on transformation and financing. Former Commissioner of Arizona's mental health system. Advisor for SAMHSA Transformation Grant states.
- **Policy Research Associates**
 - Henry Steadman, Ph.D. and Dan Abreu
 - Criminal Justice review. PRA operates SAMHSA's National GAINS Center, the Technical Assistance and Policy Analysis (TAPA) Center on jail diversion, and the John D. and Catherine T. MacArthur Foundation's National Center for Mental Health and Juvenile Justice.
- **Charles Holzer, Ph.D.** – Univ. of Texas Medical Branch – Prevalence data



Timeline

Phase 1 Planning.

February Review available reports and analyses; Conference calls; Assess availability of data and identify needed documents.

March Develop project plan and present to CFHHS.
Submit data requests and requests for policies and documents.
Site visit and interviews with stakeholders

Phase 2 Data Collection and Analysis.

April – May Conduct additional interviews, analyze data, follow-up;
Conduct criminal justice stakeholder interviews/focus groups;
Analyze prevalence and state data; Site visits planned for Billings and Missoula.
Conduct web survey.

June Report on preliminary findings of service needs and gaps to CFHHS
Site visit to focus on financing options

Phase 3 Develop Options for Moving toward a Montana Model Mental Health System

July Map financing of services, develop preliminary recommendations for model Mental Health system

August Present recommendations for financing strategy and model MH system to CFHHS

Phase 4 Final Report and Recommendations

September Final analysis and draft report submitted to CFHHS

October Submit report and present conclusions to CFHHS



Initial Interviews – March site visit

- Legislative Services Staff
 - Committee on Children, Families Health and Human Services and Committee on Law and Justice
- Governor's Office
 - Anna Whiting Sorrell, Governor's Policy Advisor on Families;
 - Pat Sullivan, Budget Analyst
- AMDD: Joyce DeCunzo and Lou Thompson's staff
- Child and Family Services Division: Management Team
- DPHHS: John Chappuis, Joyce DeCunzo, Mary Dalton, Shirley Brown, Bonnie Adee.
- Anita Roessman, Montana Advocacy Program
- Jim Fitzgerald – Mental Health Oversight Committee
- Mental Disabilities Board of Visitors: Gene Haire
- NAMI Montana: Gary Mihelish
- Mignon Waterman



Next Steps

- Continue interviews and begin criminal justice site visits
- Develop web based survey
- Complete review of existing reports
- Review penetration rates, service utilization and cost
- Explore options for restructuring including
 - CMS waiver programs, including 1915(i)
 - Coordination of care models including disease management approaches
 - Options for braiding funds
 - Managed care options
 - Full and partial risk
 - Statewide v. regional
 - Public v. private
 - Other recommendations to increase efficiency
- Site visits in late April or May, June and August



Study Questions

1. How many people need mental health services and where are they located?
2. What services does Montana have in place?
3. Where are services being delivered? And by whom? Is additional outreach needed?
4. How can the system be organized differently to deliver services more efficiently? Should Montana provide services through some type of managed care? Why?
5. What services do the citizens of Montana need that currently do not exist?
6. How are services funded?
7. Have Montana's funding streams changed significantly over the past few years. If so, which ones and why?
8. How does the consumer pay, if at all? Should consumers/families pay more?
9. How can Montana make better use of current funding streams and funding levels? What is needed in order to blend or braid funds to improve efficiency?
10. What funding sources are not being accessed by Montana and why?
11. What funding streams will support needed new services, and which of them are potentially available or unavailable to Montana?
12. Based on the sequential intercept model, what are the needs, services, gaps, barriers, and best options for providing and financing mental health services for justice-involved adults and juveniles?