

County Opportunities for DPH

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DEPARTMENT OF
**PUBLIC HEALTH &
HUMAN SERVICES**

Crisis Diversion Grants



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CDG Overview

- The Crisis Diversion Grant program provides funding to local county and tribal governments to develop programs that better serve individuals in mental health crisis, and to provide lower cost services for stabilization outside of hospital emergency departments, involving the criminal justice system, or commitments to the Montana State Hospital.
- Current 3-year grant cycle ending 6/30/2027



CDG's Role in the Crisis system

53-21-1203(4)(a): Money appropriated for the purposes of this section must be used *in the following order to*:

- (i) create crisis intervention or jail diversion services in areas of the state that currently lack services;
- (ii) provide new crisis intervention or jail diversion services in areas of the state that have received state matching funds pursuant to this section for other purposes; or
- (iii) recognize an increase in the demand for or use of services that have received funding in previous years.



Funded Communities

- Blackfeet
- Broadwater
- Butte-Silver Bow
- Carbon
- Cascade
- Flathead
- Fort Peck/Roosevelt
- Gallatin
- Lewis and Clark
- Lincoln
- Missoula
- Park
- Ravalli
- Richland
- Sheridan
- Yellowstone



Funded Activities

- Administrative Costs
- Foundation Building
 - Crisis coalition coordinators, resource mapping, system technical assistance, 211 system support, community training
- System Capacity Building
 - Crisis Intervention Teams (CIT), community-based crisis diversion, crisis infrastructure
- Innovative Projects



Future RFP Considerations

- Accountability requirements
 - Monthly/quarterly reporting
 - Monthly tracking of match funds
- Revise How FTE is funded
 - Still allow funding of FTE, but only allow a reduced rate of existing FTE/ taper off through the grant cycle
- Sustainability plan
 - How can Counties use CDG funds as a springboard to sustainability?
- Incentivize new county participation



Accountability Measures

- Monthly/quarterly reporting
- Tracking Match Funds
 - Clearly define what activities/funds count as match
 - Delineate “in-kind” match from county funds being matched
 - Require a match plan with RFP submission
 - Build “Match Tracker” that is submitted with monthly invoice



Sustainability

- Goal of program is building local program sustainability
- Require in RFP submission a sustainability plan
 - In-kind contributions throughout grant cycle and onward
 - Leveraging existing community organizations to move work forward
 - Plan for continuing program through taper-off period/contingency if funding is lost



Behavioral Health Systems for Future Generations



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Behavioral Health Systems for Future Generations (BHSFG)

- **Historic Investment:** Governor Greg Gianforte signed HB 872 on May 22, 2023, initiating a \$300 million generational investment to reform Montana's behavioral health (BH) and developmental disabilities (DD) systems.
- **Key Leadership:** The bill's design and success were driven by the instrumental leadership of sponsors Senator John Esp and Representative Bob Keenan.
- **Comprehensive Public Input:** Over 14 months, the *BHSFG Commission* held 12 public meetings to gather expert testimony and insights from those with lived experience.
- **Strategic Recommendations:** The Commission's final 2024 report outlined 22 long-term recommendations and 11 Near-Term Initiatives (NTIs) to expand intensive, community-based services statewide.
- **Budgetary Commitment:** Governor Gianforte integrated 10 key recommendations into the 2027 biennium budget, all of which received full funding from the legislature.
- **Implementation Phase:** DPHHS is currently executing these initiatives to modernize care delivery and enhance service accessibility for all Montanans.



BHSFG - Community-Based Court Ordered Evaluations (NTI #1)

- As of February 2nd, DPHHS has facilitated and paid for more than **141** court-ordered evaluations (COEs) and evaluation-related activities that were conducted in community settings.
- DPHHS has outlined a process to access these funds
 - [Community-Based COE Process](#)
- 9 providers have been providing COE services in community settings
 - [COE Provider List](#)
- Services have been provided in 23 counties
- Extension of provider contracts to allow services through 06/30/2027



BHSFG - Community-Based Stabilization Infrastructure (NTI #1)

- RFP to be posted late summer 2026
- Total available funding - \$6.5 million
- Counties and Tribes are eligible to apply
- Allowable uses
 - One-time costs to increase capacity to provide community-based (jail-based) services
 - Services are not an allowable expense due to one-time nature of funding



BHSFG - Support for Tribes and Urban Indian Health Organizations (NTI #7)

- This initiative will provided up to \$6.5 million in one-time grants to Tribal nations and Urban Indian Health Organizations (UIHOs) to support and improve behavioral health services provided in Native American communities.
- Each Tribe and UIHO was awarded approximately \$500K, and the funding can be used to improve, repair, or expand existing behavioral health facilities, support mobile crisis response teams, and cover transportation expenses to facilities that serve individuals with behavioral health needs in a culturally relevant manner.



BHSFG - Funding to Pilot Local Innovations Grants to Counties and Tribes (NTI #11)

- This initiative provided \$2.5 million to support rural counties and tribal communities as they design and implement targeted, locally developed solutions to behavioral health needs within their communities.
- The one-time, two-year grants of up to \$250,000 have been awarded to 10 tribal communities and rural and/or frontier counties throughout Montana and all agreements have been signed.
- Seven applicants were awarded funding through the System-Level Innovation track, including the Chippewa Cree Tribe of Rocky Boy and the counties of Teton, Dawson, Pondera, Beaverhead, Jefferson, and Richland. Awardees to the System-Level Innovation track will work with MTPHI to implement their Behavioral Health Toolkit. The toolkit will help communities to assess the local prevalence and impact of behavioral health issues, catalog the local resources currently available, identify and implement new programs, and monitor and evaluate the efficacy of new interventions.
- The Local- based Community Health Workers (CHWs) track focuses on hiring, training, and supporting CHWs to act as intermediaries between community members and behavioral health service providers. Catalyst for Change provides clinical supervision and training to CHWs, helping them to be effective responders to behavioral health crises and connect community members to needed services and resources. Three applicants were awarded funding, including the Little Shell Chippewa Tribe and the counties of Garfield and Fallon.



Healing to End Addiction through Recovery and Treatment



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HEART Jail Based Contracts

- \$1.1 million per year to 7 counties awarded a contract through a jail-based services RFP
- Current Contracts extended through 6/30/2027
- DPHHS is currently exploring options to expand availability to more counties and potentially utilize Medicaid funds

