Behavioral Health Services for Idahoans

By Rosie Andueza
Program Manager

The Division of Behavioral Health is working on implementing programs and services that will help Idaho’s most vulnerable citizens struggling with mental health and/or substance use disorder issues. We are in the process of launching the following new services:

Mental health services for Idaho’s felony parole and probation population

During the 2017 legislative session, the Joint Finance-Appropriations Committee (JFAC) appropriated $5.6 million to the division to design a system that provides mental health services for Idaho’s medium- and high-risk felony parole and probation population upon their release from incarceration. The division is currently working on finalizing a contract with the Idaho Primary...
Care Association/Community Health Center Network of Idaho that will provide these services through the federally qualified health centers throughout the state. If you have questions or comments, Don Caagbay is leading this work and can be reached at don.caagbay@dhw.idaho.gov.

Homes with Adult Residential Treatment (HART)
HART will provide a level of residential care for adults with Severe and Persistent Mental Illness that is integrated with clinical treatment services. Each HART home provides a safe and therapeutic homelike environment that includes meals, living space and personal care services. The HART model will allow for clinical treatment interventions to address behavioral health-related issues which previously were unable to be addressed without escalating the resident to a crisis or emergency facility. The division, Medicaid, and Optum are partnering with Idaho residential providers to develop guidelines regarding eligibility, referral, and an array of services that will be provided to all eligible clients in the HART demonstration sites (e.g., counseling, community supports, group therapy, etc.). It is planned to initially contract with at least one provider in each of the three state HUBs during the demonstration project. The goal is to launch this new service over the next several months. Stay tuned!

Idaho’s Response to the Opioid Crisis (IROC)
Progress is being made on all four approaches of IROC (see IROC website for more information on the project). Most notably, Medication Assisted Treatment (MAT) is now available for individuals struggling with Opiate Use Disorder (OUD) in most regions of the state. We are still working with prescribers to make this critical service available in regions 5 and 6 in southeastern Idaho. To access IROC treatment and MAT services, please call BPA Health at 800-922-3406. The division is also working on finalizing a contract with Recovery Idaho (see page 5) that will provide critical recovery support services in the form of recovery coaching, support groups and recreational activities for the OUD population. The goal is to have this contract finalized in November, with services rolling out shortly thereafter. Updates on other IROC initiatives will be provided in future editions of this newsletter. In the meantime, if you have questions, please contact our new IROC Project Manager, Denise Jensen at denise.jensen@dhw.idaho.gov.

Legislative Proposals for Upcoming 2018 Legislative Session

By Treena Clark
Program Manager

IDAPA Rule Changes
Proposed changes to IDAPA were published in the Idaho Administrative Bulletin on Wednesday, September 6, 2017. The published dockets can be found in the September Idaho Administration Bulletin. The division is proposing minor changes to the following chapters to allow individuals providing peer services in a division program access to the Division of Behavioral Health Background Check Clearance Waiver.

- 16-0715-1701 – Behavioral Health Programs.
- 16-0717-1701 – Substance Use Disorders Services.
- 16-0730-1701 – Behavioral Health Community Crisis Centers.
- 16-0733-1701 – Adult Mental Health Services.
Minimum Standards for Non-Hospital, Medically-monitored Detoxification/Mental Health Diversion Units

Adding division-specific sections to IDAPA 16.05.03 “Rules Governing Contested Case proceedings and Declaratory Rulings” will also be proposed. The proposed sections will establish:

- Administrative review for program approval
- Grievance and expedited hearing for non-Medicaid matters related to YES services

Title 39, Chapter 57 Prevention of Minors’ Access To Tobacco

The Department of Health and Welfare is proposing an amendment to the statute to establish a $100 annual permit fee to cover the costs for inspections when Millennium Funds are no longer available.

Under Idaho Code 39-5710 (3), the Department of Health and Welfare is responsible for costs related to conducting yearly inspections at all locations where tobacco products are sold or distributed at retail establishments to ensure compliance with Title 39, Chapter 57.

The tobacco program, known as the Idaho Tobacco Project, is currently funded with a blend of funds that includes Millennium Funds and fine receipts; however, the Joint Millennium Fund Committee recently announced that they will discontinue making ongoing grants. The Millennium Fund currently comprises 47 percent of the Tobacco Project budget and $187,000 was appropriated to the project from the Millennium Fund for State Fiscal Year 2018.

In an average year, the Tobacco Project issues 1,600 permits. At $100 per permit, the estimated income will be $160,000. Due to low violation rates, fine receipts have decreased significantly while the costs for inspections has increased. The division will use federal block grant funds to make up the difference.

A Guide to Children’s Mental Health Services in Idaho

By Brenda Bielke
Public Involvement Coordinator

We are excited to announce that a new information guide describing Idaho’s mental health system for children will be available on December 1. This guide will contain information that applies starting January 1, 2018.

The Youth Empowerment Services Project Guide will explain what is currently available to children in Idaho and introduce some of the elements of the new YES system of care for children with serious emotional disturbance that will launch in July 2018.

The guide will describe the goals of the new system of care and how children, youth, and families can access behavioral health services. In addition, the guide will provide information about the services and supports available, including crisis services, and what to do if you have questions or concerns.

As the YES system of care rolls out new services and supports between July 2018 and May 2020, the Youth Empowerment Services Project Guide will become a YES Practice Manual for families, providers and other child-serving agencies to use as a guide to understand the YES program’s principles, terms and procedures.

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The ICANS has arrived

By Seth Schreiber
Program Manager
The ICANS has arrived! Regional Youth Empowerment Services (YES) program specialists started using a new web-based platform for the administration and scoring of the Child and Adolescent Needs and Strengths (CANS) on Monday, September 18th. The ICANS pilot will continue through the end of October and will be focused on testing the ICANS web-based system, while also helping us to better understand the issues that arise with the use of the CANS in clinical practice. It will also help us further understand the accuracy of our decision-support algorithms. Thus far, feedback related to the user experience of the ICANS has been largely positive, and aside from some minor typos and issues with generating a report, there have been no critical issues. This has been a real success for the Automation Unit, and a relief for pilot members who are hoping to complete the CANS with two clients per week (84 total). The CANS for each of these clients will be updated within 30 days of the initial CANS, allowing us to test operational processes as well as system functionality related to routine updates of the CANS. Ideally, information from the ICANS Pilot will also be used to help identify appropriate clients for the Wraparound Pilot project that is set to happen later this fall. If you have any questions about the ICANS Pilot, the ICANS system, or the CANS, please don’t hesitate to contact Seth Schreiber at seth.schreiber@dhw.idaho.gov or Jim Calderhead at james.calderhead@dhw.idaho.gov.

Project ECHO comes to Idaho

By Stacey St. Amand
SHIP Communications Specialist
The Department of Health and Welfare’s Statewide Healthcare Innovation Plan (SHIP) is helping to bring a state-of-the-art program that delivers medical care through a telehealth model to rural and frontier medical communities throughout the state. The Project Extension for Community Healthcare Outcomes (Project ECHO) will operate through the University of Idaho WWAMI (Washington-Wyoming-Alaska-Montana-Idaho) Regional Medical Education Program to help alleviate the state’s physician shortage and provide much-needed specialty diagnosis and treatment knowledge to rural primary care practitioners. Idaho’s project will begin with interventions related to opioid addiction. Started and run by the University of New Mexico Health Sciences Center, Project ECHO began in 2003 as an attempt to help doctors in rural areas of the state treat a widespread outbreak of hepatitis C. By 2006, primary care providers were acquiring new skills and competencies in mental health disorders, substance abuse, gestational diabetes, and rheumatologic diseases. It has now evolved into an established, globally-recognized program. Project ECHO creates ongoing learning collaboratives allowing primary care providers to receive support and develop the skills they need to treat specific, complex conditions and provide best-practice care to patients right where they live. Project ECHO has implications for increasing workforce capacity in rural and medically-underserved communities, improved resource utilization, and transforming medical education and knowledge delivery. It has replicated its model, operating more than 120 “hubs” for at least 60 diseases in 23 countries.
Suicide Prevention Program Launches Statewide Public Awareness Campaign

By Kim Kane  
Suicide Prevention Program Manager

The Idaho Department of Health and Welfare’s Suicide Prevention Program in the Division of Public Health has been up and running for just over one year, and a lot has been accomplished in that time. One notable accomplishment includes rolling out a statewide public awareness campaign. This campaign will be the first of its kind in Idaho and likely, the nation. The premise behind the campaign aligns closely with the 2011 Idaho Suicide Prevention Plan which promotes the idea that everyone has a role to play in suicide prevention. The Suicide Prevention Program public awareness campaign focuses on the helping person; the friend, family member, co-worker.

The campaign slogan, “Rock Your Role,” reminds people that suicide is preventable and everybody plays a part. It stresses that watching for warning signs, asking if someone is thinking of suicide, and getting help can save a life. The public awareness campaign includes TV spots and printed materials. TV spots began airing Monday, September 25, 2017, and statewide distribution of printed materials by the program and suicide prevention partners began in August 2017. The printed materials, including posters with tear-off pads, table tents, coasters and gatekeeper cards (like business cards) are available for free at healthtools.dhw.idaho.gov. Get involved and rock your role!
Contact the Idaho Suicide Prevention Program at 208-334-4953 or visit www.spp.dhw.idaho.gov.

IROC and the Recovery Oriented System of Care

By Norma Jaeger  
Recovery Idaho Executive Director

Idaho’s Response to the Opiate Crisis (IROC) will take a large step forward into a recovery-oriented system of care with Recovery Idaho’s IROC-Recovery, a comprehensive recovery support project. IROC-Recovery will bring combined strengths of nine recovery community centers together, one or more in every region, to address the complex needs of people seeking relief and recovery from an opiate use disorder. Complementing treatment, IROC-Recovery will engage recovery coaches in immediate contact with those who will enter treatment through IROC, provide a host of sober-support groups and socialization activities, and develop partnerships with a wide range of supportive resources in each community.
Through an exciting partnership with Phoenix Multisport, IROC-Recovery will offer high-intensity, skill-based sober recreational activities targeting the young adult population. Phoenix Multisport will also provide a sober-sports leadership
academy for volunteers across the state who will return home and provide similar sober recreation activities. IROC-Recovery will reach into jails, crisis centers, and other health facilities such as emergency rooms and clinics to provide the warm handoff into a welcoming recovering community. IROC-Recovery will establish MAT recovery support groups for those served in the state’s first-ever publicly-funded medication assisted treatment services. Recovery Idaho hosted an implementation meeting with the recovery community centers October 2-3 to assure understanding of the full scope of services to be provided and establish consistent operations and data collection. Recovery community centers operate in Coeur d’Alene, Moscow, Lewiston, Emmett, Caldwell, Boise, Twin Falls, Pocatello and Idaho Falls.

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Readiness for Eclipse Visitors Sets the Stage to Prepare for Whatever Comes Next

By Cheryl Brower, Healthcare Preparedness Program Coordinator

Visitors and Idahoans alike enjoyed the Great American Eclipse in southern Idaho cities, towns, and the backcountry on August 21. Preparation efforts to ensure their experience was safe and trouble-free began a year in advance. Agencies and eclipse observers agree that those efforts paid off!

The Division of Behavioral Health was in the midst of those efforts right from the beginning. By training to utilize the state’s primary information sharing platform, WebEOC, Division of Behavioral Health staff had access to real-time situational awareness in case needs arose. Providers prepared in advance to ensure clients would have access to services and medications. The division used a dispersed work location plan to ensure staff would be able to travel to provide services regardless of the traffic congestion that was experienced in some areas. Volunteers were on call in case of staffing shortages. Online resources including the Disaster Distress Helpline were pre-staged and promoted to serve as a first “go-to” resource if needed. Senior leadership was well-briefed and ready to collaborate with other Department of Health and Welfare divisions if unanticipated circumstances had arisen.

Preparedness efforts such as these go on behind the scenes on a continual basis to ensure that the Division of Behavioral Health is ready to respond to potential natural disasters or man-made challenges that might create a demand for services. Recent events around the country show how essential this attitude of preparedness is among those who serve the citizens of Idaho.

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Ada County Indigent Services team employees enjoy the Aug. 21 solar eclipse. (Photo courtesy of Ada County Indigent Services)
Optum Idaho offers Intensive Outpatient Programs for Medicaid Members

By Optum Idaho

As part of our commitment to enhance the health and well-being of Idaho’s Behavioral Health Care system, Optum is excited to implement an Intensive Outpatient Program (IOP) for adults and adolescents with Mental Health and Substance Use Disorder needs. IOPs are structured programs that occur at a minimum of three days per week and maintain at least nine hours of service per week for adults and six hours of service per week for children and adolescents.

Services consist primarily of group counseling and education about mental health and substance use-related problems. Individuals appropriate for participation in IOPs have moderate behavioral health signs and symptoms that can be addressed and managed in a level of care that is less intensive than partial hospitalization and more intensive than outpatient programming. Most admissions to IOP last 60 days, followed by outpatient continuing care. The first phase of the IOP implementation is now active! Eleven providers around the state are contracted to provide IOP programs to Medicaid members.

Phase II of the IOP implementation is underway. Optum has contracted with the Altarum Institute to assist in a provider readiness assessment to ensure providers have the necessary programs and support to be able to provide this much-needed service. The second readiness assessment took place in August and we anticipate starting the Phase II credentialing and contracting process in the next few weeks to expand IOP to more members in 2018.

For a complete listing of the Phase I providers, please visit www.optumidaho.com > For Providers > Alerts & Announcements > IOP Phase I Providers.

NOTE: Optum Idaho is Idaho’s Medicaid managed care contractor for behavioral health services.

New Services Released at BPA Health

By BPA Health

BPA Health has been working with the Division of Behavioral Health to launch new services to best meet client needs. Three specific substance use disorder services launched this quarter include:

Enhanced Safe & Sober Housing:
Research shows that a stable recovery environment is essential in establishing and maintaining recovery. Providing integrated dual-diagnosis (substance use disorder and mental health) services is an effective approach that produces positive outcomes. In August, BPA Health launched a pilot program with Supportive Housing and Innovative Partnerships to make available a house dedicated to clients with co-occurring diagnoses who are discharging from the department’s state inpatient psychiatric hospitals and need further assistance as they transition back to the community.

Medically Monitored Residential (ASAM 3.7):
Level 3.7 programs involve a planned and structured routine of 24-hour professionally directed evaluation, observation and monitoring in an addiction treatment inpatient facility. This service was launched in July and adds a level of service that includes 24-hour nursing and medical monitoring when the full resources of an acute care hospital are not needed.

IROC – MAT:
Medication Assisted Treatment (MAT) was successfully launched in August as a component of the IROC grant, and access continues to expand. Adding Methadone, Buprenorphine, and Suboxone as an option is an important step in expanding the continuum of treatment and recovery support services currently available through the BPA Health network of participating providers. Individuals with opioid use disorder who are eligible for SUD-related services may have access to MAT services in various locations throughout the state.

NOTE: BPA Health is the management services contractor for Idaho’s Substance Use Disorder (SUD) treatment and RSS network.
Second Recovery Month celebration a success!

By Crystal Campbell
Program Specialist
The second Annual Recovery Month Awards and Proclamation celebration and Art Display was yet again a success. The Division of Behavioral Health received nominations from around the state for the following awards:

- Idaho Champion of Recovery
- Regional Advocate for Recovery
- Regional Contributions of Honor

There was tough competition, but the Idaho Champion of Recovery for 2017 is Libertie Potts! Libertie’s nomination stated, “Her ability to identify and motivate new persons in recovery is unique and rare. Her presence on our team provides hope amongst the professional staff as well as a visible example of success to new participants in our program.” Libertie received her award at the Annual Recovery Month Awards and Proclamation celebration, which was held at the Idaho State Capitol on September 1, 2017.

The Regional Advocates for Recovery and Regional Contributions of Honor recipients were recognized at the event. They also were each presented with their award at their local Regional Behavioral Health Board meetings throughout September. A full list of award recipients can be found at www.BehavioralHealthEvents.dhw.idaho.gov under 2017 Recovery Awards.

A video of the second Annual Recovery Month Awards and Proclamation celebration presentation can be found here. At the event, Secretary of State Lawrence Denney presented the 2017 proclamation declaring September as Recovery Month in Idaho. Program Manager Rosie Andueza expressed the Division of Behavioral Health’s commitment to recovery. Matt Sather, Swede Schmidt, George Moore, and Brandi Irons spoke of how substance use disorders have affected their lives. Ross Edmunds, administrator of the Division of Behavioral Health, presented Libertie Potts with the 2nd Annual Champion of Idaho award and Libertie shared her story of recovery.

The Recovery Month Art Display was shown in the Idaho State Capitol on September 1 and was then moved to the lobby of the Health and Welfare office in downtown Boise for the remainder of September. The artwork can be found on the Behavioral Events website under Recovery Month Art Display.

Please contact Crystal Campbell at crystal.campbell@dhw.idaho.gov or (208) 334-6506 for future Mental Health Awareness and Recovery Month Awards and Proclamation events.

See a picture from the event below.

Recovery Month 2017

Brandi Irons discusses recovery on Sept. 1 in Boise at the second Annual Recovery Month Awards and Proclamation celebration.

Behavioral Health Board Contacts

**Region 1—Website**
Panhandle Health District  
Jennifer Ugolini  
jugolini@phd1.idaho.gov

**Region 2—Website**
Public Health – Idaho North Central District  
Perri Larson  
plarson@phd2.idaho.gov

**Region 3—Website**
Southwest District Health  
Katrina Williams,  
Katrina.Williams@phd3.idaho.gov

**Region 4—Website**
Central District Health  
Julie Nease,  
JNease@cdhd.idaho.gov

**Region 5—Website**
Administrative Assistant I  
Public Health Administration-SCPHD  
Nancy Andreotti,  
nandreotti@phd5.idaho.gov

**Region 6—Website**
Southeastern Idaho Public Health  
Administrative Assistant  
Mandi Nelson  
mnelson@siph.idaho.gov

**Region 7—Website**
Eastern Idaho Public Health  
Board Liaison  
Mimi Taylor  
mimi_taylor@eiph.idaho.gov