What is Behavioral Health?
A state of mental/emotional being and/or choices and actions that affect WELLNESS.

- Preventing and treating depression and anxiety
- Preventing and treating substance use disorder or other addictions
- Supporting recovery
- Creating healthy communities
- Promoting overall well-being
Behavioral Health Continuum of Care Model

The goal of this model is to ensure there is access to a full range of high-quality services to meet the various needs of North Dakotans.
Return on Investment
ND Youth Lifetime Substance Use (High School Students)

- Alcohol: 56.6%
- Vaping: 52.8%
- Cigarette Smoking: 29.3%
- Marijuana: 27.2%
- Prescription Pain Medication: 14.5%
- Cocaine: 3.4%
- Methamphetamine: 1.6%
- Heroin: 1.3%
Prevention Works!

Current Alcohol Use (past 30 days) among ND High School Students
Youth Risk Behavior Survey

- 1999: 60.5%
- 2001: 59.2%
- 2003: 54.2%
- 2005: 49.0%
- 2007: 46.1%
- 2009: 43.3%
- 2011: 38.8%
- 2013: 35.3%
- 2015: 30.8%
- 2017: 29.1%
- 2019: 27.6%
Youth Suicide
(High School Students; past 12 months)
“A well-functioning behavioral health system attends not only to the intensive needs of children, youth, and adults with serious mental health conditions and substance use disorders but also to the outpatient and community-based service and support needs of individuals, and, critically, to the social and emotional well-being of the majority of the population who have not been diagnosed with a behavioral health condition—especially children, youth, and young adults.”
1. Develop a comprehensive implementation plan
2. Invest in prevention and early intervention
3. Ensure all North Dakotans have timely access to behavioral health services
4. Expand outpatient and community-based service array
5. Enhance and streamline system of care for children and youth
6. Continue to implement/refine criminal justice strategy
7. Engage in targeted efforts to recruit/retain competent behavioral health workforce
8. Expand the use of tele-behavioral health
9. Ensure the system reflects its values of person-centeredness, cultural competence, trauma-informed approaches
10. Encourage and support the efforts of communities to promote high-quality services
11. Partner with tribal nations to increase health equity
12. Diversify and enhance funding for behavioral health
13. Conduct ongoing, system-side data-driven monitoring of needs and access
Keys to Reforming North Dakota’s Behavioral Health System

- Support the full Continuum of Care
- Increase Community-Based Services
- Prevent Criminal Justice Involvement for Individuals with a Behavioral Health Condition
Parents
Lead
Parents, family members, and other trusted adults play an important role in helping children make sense of what they hear in a way that is honest, accurate, and minimizes anxiety or fear.
Behavioral Health & Education Initiatives
Behavioral Health School Prevention and Early Intervention Pilot

CONSIDERATIONS FOR INTEGRATION OF BEHAVIORAL HEALTH AND EDUCATION
What systems are needed for schools to identify behavioral health needs?

**LEARNING AND BEHAVIOR**
- Education Multi-Tier System of Supports (MTSS)
  - Tier I (80% of population)
  - Tier II (15% of population)
  - Tier III (5% of population)

**BEHAVIORAL HEALTH/WELLNESS**
- Behavioral Health Continuum of Care
  - Promotion and Primary Prevention
  - Early Intervention
  - Treatment
  - Recovery

Delivered prior to the onset of a disorder, these interventions are intended to prevent or reduce the risk of developing a behavioral health problem or preventing death.

These strategies identify those individuals at risk for or showing the early signs of a disorder with the goal of intervening to prevent progression.

These clinical services are for people diagnosed with a behavioral health disorder.

These services support individuals’ abilities to live meaningful, productive lives in the community.

CURRENT AWARDS:
- Simle Middle School, Bismarck
- Dunseith Public School
- Barnes County North Public School
Behavioral Health School Grants

PROJECT GOAL:
Identify and address gaps along the behavioral health continuum of care. This includes identifying prevention and early intervention services that have no other funding source, using funds to reimburse clinical or treatment services that are effective but not currently covered services, and filling gaps in service coverage for populations that do not qualify for other forms of reimbursement.

2020-2021 School Year: 19 schools awarded

2021-2022 School Year: Applications open
www.behavioralhealth.nd.gov/education/grant-funding
Kognito is an evidenced-based, online, role-playing simulation to help school personnel learn to recognize the signs of distress, use conversation to approach a student and discuss concerns, and if necessary, refer parents/students to the appropriate resources.

Schools and districts statewide can opt into the training program with no costs to school personnel.
Suicide Prevention
Call the Suicide Prevention LIFELINE anytime
1.800.273.TALK (8255)
Suicide Prevention Funding Opportunity

To view the solicitation notice and to apply, visit www.behavioralhealth.nd.gov/funding.

- Total available funding is about $750,000. Funding will be allocated equally among six awardees to provide suicide prevention and postvention evidence-based practices.
- Applications must be submitted by Oct. 15, 2021, at 12 p.m. CT.
SUD Voucher
SUD Voucher

Goal: improve access to quality substance use disorder treatment services and allow for individual choice, by providing reimbursement where other third-party reimbursement is not available.

• Initiated during 2015 legislative session (NDCC 50-06-42)
• Began serving individuals in 2016
**Timeline of Changes/Expansion**

**65th Legislative Session (2017)**
- Methadone maintenance was added as a covered service, effective July 1, 2017 *(HB 1012)*

**66th Legislative Session (2019)**
- Providers who access the SUD Voucher were expanded to public agencies (i.e., public health and tribal agencies) who hold a substance abuse treatment program license - not including Human Service Centers. *(HB 1105)*
- Eligibility age was changed from 18 to 14 years old, effective July 1, 2020. *(SB 2175)*

**67th Legislative Session (2021)**
- DHS will develop rules to guide out of state providers to participate in the SUD Voucher *(HB 1402)*
- Grant awards to expand residential substance use disorder treatment programs in an underserved area
- Funding allocation: 45% of funds to be allowable to programs with more than 16 beds and 55% of funds for outpatient and programs with 16 beds or less
Youth Residential Substance Use Disorder Treatment
Youth Residential SUD Treatment

Eckert Youth Homes, Located in Williston, began providing residential Substance Use Disorder Treatment Programming to youth in March of 2020. Statewide program (intended for individuals from anywhere in the state)

• 8 beds: ASAM Level 3.1- Low Intensity Residential, 3.5- Medium Intensity Residential. 3.2D Social Detoxification

New RFP was awarded to Eckert Youth Homes and new contract begin in January 2022. Increased number of beds to 10.

Admission requirements:
1.  age under 18
2.  ND resident
3.  Substance Use Disorder Diagnosis
4.  Meets criteria for placement in a residential setting (Medical Necessity for Residential Level of care)
Psychiatric Residential Treatment Facilities
North Dakota Administrative Code (NDAC) 75-03-17 Psychiatric Residential Treatment Facilities for Children are the rules that establish the standards governing PRTFs.
1915(i) State Plan Amendment
Who does the 1915(i) serve?

- Individuals enrolled in Medicaid or Medicaid Expansion
- Individuals with behavioral health needs
- Individuals eligible for 1915(i) services
Eligibility Requirements

1. The individual is age 0+; and
2. The individual is currently enrolled in ND Medicaid or Medicaid Expansion; and
3. The individual’s Federal Poverty Level is 150% or below; and
4. The individual has a substance use, mental health or brain injury diagnosis (see specific diagnosis list); and
5. The individual’s WHODAS score of 50 or above; and
6. The individual resides in and will receive services in a setting meeting the federal home and community-based setting requirements.
1915(i) Services

Care Coordination

- Training and Supports for Unpaid Caregivers
- Respite
- Community Transition Service
- Non-Medical Transportation
- Housing Supports
- Supported Employment
- Supported Education
- Benefits Planning
- Peer Support
- Family Peer Support
- Pre-Vocational Training
Enrollment Update

PROVIDERS
- 23 Group Providers Enrolled
  - **12 have Individual Providers enrolled with the Group enrollment**
  - Other 11 are not able to provide service until individual providers are enrolled
  - 8 additional Group Providers have begun the enrollment process and are in pending status

MEMBERS
- **July 1, 2021** – 6 enrolled
- **August 1, 2021** – 21 enrolled
- **September 1, 2021** – 24 enrolled
- **October 1, 2021** – 34 enrolled (12 pending)
- 15 denials
Free Through Recovery
Free Through Recovery is a community based behavioral health program designed to increase recovery support services to individuals involved with the criminal justice system who have behavioral health concerns.

Current Individuals Receiving Service: 1,141
Total Served To Date: 3,496
Community
Connect
MISSION: provide quality, community-based behavioral health services that promote collaboration and partnership to meet the individual needs of every person served.

To be eligible for the program individuals must be 18 years of age or older, reside in North Dakota, and have a mental health or substance use disorder diagnosis that is impacting their functionality in domains including housing, employment/financial, physical health, and community connections.

Priority will be given to the following populations: Parents and caregivers, parents and caregivers with child protection services involvement, pregnant women, Individuals that utilize emergency and detox centers, individuals who are homeless or at risk of homelessness, individuals who use drugs intravenously.