Idaho Behavioral Health Council C/O Idaho Supreme Court 451 W. State Street Boise, ID 83702



United States Senate Committee on Finance Washington, DC 20510-6200 Via email: mentalhealthcare@finance.senate.gov

Senator Mike Crapo 239 Dirksen Senate Office Building Washington Dc 20510-6200

Senator Ron Wyden 221 Dirksen Senate Office building Washington DC 20510-6200

RE: Bipartisan Mental Health RFI

Senator Crapo, Senator Wyden, and Members of the Senate Committee on Finance:

On September 21, 2021, the United States Senate Committee on Finance (Committee) published a request for information regarding behavioral health care in the United States. As the co-chairs of the Idaho Behavioral Health Council, we thank you for the opportunity to provide you with information and commend your efforts to gather a broad perspective on this important topic. We wish to provide you with recommendations for improving care based on evidence and best practice standards.

With the support of the legislature, the Idaho Supreme Court, and the Governor, the Idaho Behavioral Health Council (IBHC) was formed in 2020 to address our state's behavioral health system. The council focuses on collaboration and encourages coordination between public and private systems statewide. The IBHC is comprised of council members from all three branches of state government, representatives from local government, and a consumer representative. The council engaged practitioners, consumers, and community advocates in the development of recommendations adopted as a statewide behavioral health strategic action plan with 34 total recommendations, and nine prioritized for implemenation. The nine prioritized recommendations address behavioral health issues through infrastructure needs, promotion, prevention, engagement, treatment, and recovery. The council is now providing oversight and accountability during the implementation of the prioritized recommendations, as well as reviewing reports of others' that have volunteered to support and implement portions of the plan, including both public and private entities.

In regards to necessary infrastructure, a prioritized recommendation targets workforce development and aligns with the RFI from your Committee. By the end of December 2021, the IBHC will review a statewide plan to increase opportunities for behavioral health providers, including paraprofessionals, bachelor-level through doctorate—level folks, in both psychology and psychiatry. A critical component of creating these opportunities will be to increase opportunities for internships and residencies within the state, and incentivize long-term employment focusing on rural areas. We request the Senate Finance Committee prioritize programs that make education and continued training for behavioral health professionals financially feasible for students and new professionals, and incentivize work in rural areas. We also asks the Committee to look at Medicaid reimbursement rates, including payment parity for mental health and substance use disorder in-person and telehealth appointments, in order to encourage equitable access to behavioral health services in rural areas. The Committee should also consider reimbursable rates for federal programs that attract new professionals and ensure providers are fairly compensated for challenging work in behavioral health.

Another statewide initiative supported by the IBHC is increasing crisis response systems for youth and adults. Idaho is working to establish a 988 mental health crisis emergency line to comply with the National Suicide Hotline Designation Act of 2020. This line will utilize professionals trained to respond to behavioral health crises and collaborate with 911 emergency systems to dispatch proper support to each individual in need. We request the Committee consider policies that support access to behavioral health professionals during a crisis for both youth and adults and assist in funding law enforcement training to identify and refer behavioral health crises to behavioral health professionals, diverting them from the criminal justice system. In conjunction with crisis response, the Committee should consider continued support of Certified Community Behavioral Health Centers (CCBHC). CCBHCs allow for wrap-around care of individuals experiencing behavioral health crises and stabilization services for long-term, client-centered support.

An additional priority of the IBHC is establishing systems to support early engagement in services for justice-involved individuals navigating behavioral health concerns. We implore the Committee to explore funding for pre-adjudication programs to divert people experiencing mental health and substance abuse crises from the court system and to treatment programs.

In collaboration with early intervention, long-term recovery can best be achieved with continued supports in a person's local community. Idaho has a small network of recovery centers statewide. These centers can provided needed peer support and physical health and wellness activites that encourage community engagement and continued recovery. However, in Idaho, we need support in expanding these services in both urban and rural areas alike.

One last consideration is the need for wrap-around care for families who interact with the behavioral health system. Providing reimbursement for services to strengthen family systems and resilience is integral to preventing future interaction with behavioral health and the criminal justice systems.

The Idaho Behavioral Health Council is dedicated to improving the quality and availability of behavioral health services across the state. We request the Senate Committee on Finance join us in this effort by considering our feedback and requests.

Respectfully,

Sara Omundson

Sara Omundson Co-Chair Dave Jeppesen Co-Chair

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