

MINUTES

MONTANA HOUSE OF REPRESENTATIVES 53rd LEGISLATURE - REGULAR SESSION

JOINT SUBCOMMITTEE ON INSTITUTIONS & CULTURAL EDUCATION

Call to Order: By REP. ED GRADY, Chairman, on February 1, 1993,
at 8:00 AM

ROLL CALL

Members Present:

Rep. Ed Grady, Chair (R)
Sen. Eve Franklin, Vice Chair (D)
Sen. Gary Aklestad (R)
Sen. Tom Beck (R)
Rep. Red Menahan (D)
Rep. Linda Nelson (D)

Members Excused: SEN. J.D. LYNCH

Members Absent: NONE

Staff Present: Sandra Whitney, Legislative Fiscal Analyst
Mary LaFond, Office of Budget & Program Planning
Judy Murphy, Committee Secretary

Please Note: These are summary minutes. Testimony and
discussion are paraphrased and condensed.

Committee Business Summary:

Hearing: CHEMICAL DEPENDENCY OVERVIEW
Executive Action: NONE

HEARING ON CHEMICAL DEPENDENCY OVERVIEW

Tape No. 1:A

Informational Testimony:

Darrell Bruno, Administrator of the Alcohol and Drug Abuse
Division, outlined the appropriations for fiscal year 1993.

General Fund	\$ 250,661
State Special Revenues	1,696,372
Federal	3,337,470

TOTAL	\$5,284,503

State Special Revenues are earmarked alcohol tax funds for Galen
and the CD office.

Operations (Central Office)	FTE 8.00	
Residential Services -Galen	FTE 51.65	EXHIBIT 1

page 13

DIVISION OPERATIONS - CENTRAL OFFICE

The division has had these responsibilities long before the alcohol & drug division had the responsibility for the administration of services at Galen

Planning and Program Development
Distribution of State & federal Funds
Program Evaluation & Approval & Standards Development
Certification of Alcohol & Drug Counselors
Prevention/Education
Alcohol and Drug Information System

Residential Services on the Galen Campus are:

Detoxification services in the hospital
Length of stay 1-3 days
Montana Chemical Dependency Center
87 Treatment & 12 Orientation beds
28 day and 60 day inpatient programs
(14 day treatment will start in Feb. 1993)

All patients entering MCDC must enter through Detox. Based on the level of care determined by the evaluation provided at the detox and orientation unit, an individual is either returned to the community for outpatient treatment or referred to MCDC for inpatient chemical dependency treatment. After completing treatment, individuals are referred to a community program for aftercare services. EXHIBIT 1 page 14

Community Services

Services are provided by state-approved Chemical Dependency Treatment Programs and Community Based Prevention Programs. ADAD contracts with private not-for-profit providers for outpatient, inpatient, detoxification, transitional living and prevention services. Currently 23 state-approved programs receive contracts for treatment and prevention services to cover all 56 counties. In addition, ADAD contracts with community-based prevention programs for prevention/education services only.

CHEMICAL DEPENDENCY TREATMENT SYSTEM

33 State Approved Programs in 68 Locations
(MCDC at Galen included)
2 - Detoxification
3 - Inpatient Hospital
7 - Inpatient Freestanding
2 - Intermediate (TLF)
24 - outpatient *services available in
all counties - 16 provide intensive

outpatient
21 - DUI Court Schools EXHIBIT 1 page 14

FUNDING FOR CHEMICAL DEPENDENCY SERVICES

State general fund - Galen only
Earmarked alcohol tax - sales of liquor, beer and wine and
cost recovery Galen.
Federal block and categorical grants EXHIBIT page 14

Mr. Bruno said the department's proposal for the next biennium is a stand alone chemical dependency program on the Galen campus. With the budget the department is presenting there would not be an acute care hospital or a nursing home on the Galen campus. The CD program would be moved into the hospital and provide non-hospital detox in a program they call the DEAR Program. The DEAR program is a merger of the department's detox and orientation programs.

GALEN RESTRUCTURE

DEAR PROGRAM

Detox, Education, Assessment & Referral
24-16 beds combined detox & orientation
3 counseling staff
4-5 days in length

SERVICES

Detoxification-medically monitored
Education
Lectures
Video programs & AA/Recovery literature
Closed AA meetings
Assessment
Initial interview
Questionnaire to significant one
Data from the legal system etc.
Referral
Back to community
Short term track
Primary track
Extended Track Exhibit 1 page 16

There is a bill in the Health and Human Services committee that would require all referrals to the Galen program be assessed. The assessment would state that the person is chemically dependent and that services are not available in the individual's community. The bill will help the department with the waiting list for the CD program. This bill will only help the people who are on a volunteer basis.

87 BED INPATIENT PROGRAM PROPOSAL

1. Short Term Track (start out)
 - 9 beds
 - Length of stay 14 days
 - 1 primary counselor 9-1 ratio
 - Individuals appropriate for intensive outpatient
 - Individuals with a history of treatment & sobriety
2. Primary Track (in place now)
 - 60 beds - length of stay
 - 6 counselors 10-1 ratio
3. Extended Track (running now)
 - 18 beds 60 day length of stay
 - 2 counselors 9-1 ratio
 - individuals with a history of treatment failures

EXHIBIT 1 page 16

Mr. Bruno explained that according to the proposal (Executive Budget) the department would supervise the direct treatment only and the support services would be paid for through a rental agreement with Warm Springs State Hospital.

Mr. Bruno said the funding for Galen is \$270,000 general fund and the balance comes from the earmarked alcoholic beverage tax account.

Mr. Bruno told the committee in order to bring the CD program up to standard, the department is proposing some additional positions. The program needs three counselor techs and one duty counselor.

Questions, Responses, and Discussion:

CHAIRMAN GRADY stated that if the CD program were moved off the Galen campus there would be nothing left at Galen.

Mr. Bruno stated in the executive budget the CD program is the only program that is being proposed on the Galen campus. He said one possibility would be the St. James Community Hospital East in Butte. He told the committee that space may not be available for the full 110 beds which are being proposed. St. James feels they could accommodated at least 90 beds so the department would have to look at contracting with another facility to house the over-flow patients.

Mr. Bruno told the committee it would cost between \$250,000 and \$300,000 for the square footage to rent the Butte facility. He is not sure what comes in the rent package. He said it would be costly to leave the program at Galen because the campus is expensive to operate.

CHAIRMAN GRADY asked Mr. Bruno about the possibility of using the

facility at Warm Springs?

Mr. Bruno said there is not one building on the Galen campus that could be renovated unless the committee is willing to pay a large sum of money for renovation.

SEN. GARY AKLESTAD asked if the department had thought about closing everything on the campus except the CD program? He asked if that would still be more expensive than renting the facility at St. James Hospital in Butte? He asked Mr. Bruno if there is going to be an increase in liquor fees for this program?

Mr. Bruno responded by saying no to the above questions. The department can offset some of the costs in the CD program due to their Federal Block grants.

REP. RED MENAHAN asked the number is of clients being sentenced for DUI's and is this number increasing the community programs?

Mr. Bruno stated it increases all programs but it has remained fairly consistent over the past few years. There are approximately 5000 admissions to court schools each year. The community-based programs are not funded for court schools, just for treatment.

REP. MENAHAN asked how many certified counselors are in the program at the present time?

Mr. Bruno told the committee at the present time there are over 600 certified counselors in the state. There are between 150-200 certified counselors in state approved programs. Insurance companies will pay for treatment if the treatment is from a certified counselor.

CHAIRMAN GRADY feels the state cannot keep both of the complexes operating. He feels the programs could consolidate onto one campus and that Galen cannot be run economically for just one program.

Mr. Bruno feels the cost may be more to remodel. The cost to bring the buildings up to code would also be a big expense.

REP. MENAHAN said the St. James Hospital East was once used for a CD program but it was not state approved.

SEN. AKLESTAD asked if the building were closed down completely could the facility be sold?

Mike Ruppert, President of Chemical Dependencies Program in Montana & Executive Director of the Boyd Andrew Chemical Dependency Care Center in Helena, told the committee the CD program at Galen is much better than it was in the past. He feels the more cost there is for the inpatient treatment at Galen the more it threatens the rest of the system. The administrative

rule is what they charge for DUI's treatment cannot exceed what they spend to provide treatment.

CHAIRMAN GRADY supports the CD programs but is concerned where the program should be housed. He would like the department to furnish the committee with some costs regarding the St. James facility and the Warm Springs facility so the committee can compare the expenses.

SEN. AKLESTAD asked how closely related are the Boyd Andrew program and the CD program at Galen?

Mr. Bruno said the Boyd Andrew program provides intensive outpatient services, aftercare services, operates DUI schools and prevention services. The Galen CD program provides inpatient care which is a longer period of treatment.

SEN. AKLESTAD asked how long is intensive outpatient care?

Mr. Ruppert explained that intensive care treatment is four weeks and could be up to five weeks and then there are 12 weeks of aftercare. In the near future the Boyd Andrew Center and other community-based programs are starting what they call Managed Care. The patients will be evaluated periodically and their length of stay may be from two-eight weeks of intensive care. The Boyd Andrew Center in Helena is the only center which has a half-way house.

REP. MENAHAN asked if the Boyd Andrew Center charges insurance companies for alcohol treatment?

Mr. Ruppert said they do get paid for alcohol treatment by insurance companies but not for half-way houses. He stated most insurance companies will pay \$1,000 for intensive alcohol treatment. State and federal grants finance the half-way houses.

Mr. Bruno said the state contracts with Boyd Andrew for the half-way house services because there is no insurance reimbursement within the state. He feels there is a great need for half-way houses for women in the state.

CHAIRMAN GRADY asked if women were harder to treat then men?

Mr. Ruppert told the committee that women are more expensive to keep in half-way houses because of day care issues but they are not necessarily more difficult to treat.

CHAIRMAN GRADY asked if the alcohol problem is increasing?

Mr. Bruno stated he did not think the alcohol problem was increasing it is just being recognized. He said since the problem is being recognized it is putting a demand on the treatment services in Montana. Laws have been passed in the last

few years demanding people receive CD treatment. The groups of people are: repeated DUI offenders, welfare recipients with CD problems, family service referred CD people, SRS, and Corrections. The federal funds which the department receives for the CD program are regulated.

SEN AKLESTAD asked what the success ratio is for the DUI's?

Mr. Bruno did not have any statistics that would separate the DUI's from the general population.

SEN. AKLESTAD asked what the success ratio is for the general population?

Mr. Bruno said the completion ratios for people completing treatment were; 79% inpatient, 74% day treatment, 75% intensive outpatient, 61% intermediate and 60% outpatient.

SEN. AKLESTAD asked what the number is of repeaters who have been through the treatment for DUI or CD?

Tape 1:A

Mr. Bruno stated 43% of the patients are first time admissions and 57% are readmissions to the CD programs. The percentages at Galen are much higher. The percentage of first time admissions is 33% and 67% are readmissions.

REP. MENAHAN told the committee in order to be treated a person must be willing to accept treatment.

CHAIRMAN GRADY asked how many inmates are court ordered or volunteers to the CD program?

Mr. Bruno said approximately 50% at Galen are volunteers and the rest are court ordered or forced voluntary.

Mr. Bruno stated at Galen there are eight beds set aside for MSP and SRFC inmates. He also stated that volunteers entries are increasing.

CHAIRMAN GRADY asked if the trend is still leaning toward the young population? He also asked what the age limit is at Galen for their CD program?

Mr. Bruno stated that Galen takes people 18 years and older. He has a contract with Rimrock to handle the adolescents, pregnant women and people with severe medical problems that cannot be treated at Galen.

Mr. Ruppert said once a week Boyd Andrew has an adolescent outpatient program and an adolescent intensive outpatient

program. He said it is doubtful BA will continue their adolescent intensive outpatient program because they do not have enough adolescents in the program.

CHAIRMAN GRADY asked where a young person with an alcohol problem could go for help?

Mr. Bruno said the place to start would be with their community program. If the problem is not severe they may be handled in an outpatient program. If the problem is severe the person would have to be sent for inpatient care.

SEN. AKLESTAD asked how many contracts does the state work with on a private basis?

Mr. Bruno told the committee the state works with all private outpatient facilities that are approved outpatient programs. The state also has contracts for inpatient needs that cannot be met at the Galen state hospital. The contracts for half-way houses are \$40 per day and \$76 per day for inpatient care. The cost at Galen is \$230 per day for Detox, and \$60 per day for inpatient care.

Rick Day, Director of the Department of Corrections and Human Services, told the committee it takes approximately \$1 million dollars per year to run the general rent/maintenance type of obligations for the CD program on the Galen campus.

CHAIRMAN GRADY asked **Mr. Day** to project the figures to see the long-range affect on the budgets.

Mr. Day told the committee he would have the figures and would also work out the figures to show the consolidation of the Warm Springs/Galen facilities.

CHAIRMAN GRADY asked the department to tell the committee what portion of the Galen campus are being used at this time?

REP. MENAHAN said at Galen the hospital and the treatment center are the only facilities being used at this time.

Mr. Day explained the campus has central heating and sewer systems. It is not possible to shut down any part of the campus because the system was designed to service the entire campus at one time.

REP. LINDA NELSON asked **Mr. Bruno** about expanding the CD program to cover gambling addictions?

Mr. Bruno stated the department was considering phasing the gambling addiction into the CD program because the department felt legislation was going to be introduced which would require the department to provide the necessary treatment. The money for this program was not included in the department's budget

proposal. He did not feel the cost would be great to start the gambling program. To start with they would need one FTE and then in the next session they would use a managed care approach.

CHAIRMAN GRADY asked how many patients could be treated on an inpatient basis?

Mr. Bruno told the committee there are 5500 compulsive gamblers in the state. Out of this number the department feels only 8% would seek treatment. The department feels most people could be treated on an outpatient basis.


REP. NELSON asked how many addictions are there and how many addictions is the state willing to treat?

Mr. Bruno told the committee that at this time the department is working with gambling and CD addictions.

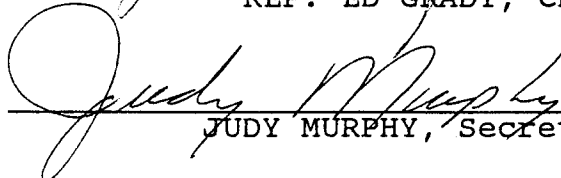
A motion was made to adjourn.

ADJOURNMENT

Adjournment: 9:00 am



REP. ED GRADY, Chair



JUDY MURPHY, Secretary

EG/jm

HOUSE OF REPRESENTATIVES

INSTITUTIONS/CULTURAL EDU. SUB-COMMITTEE

ROLL CALL

DATE 2-1-83

NAME	PRESENT	ABSENT	EXCUSED
SEN. GARY AKLESTAD	✓		
SEN. TOM BECK	✓		
SEN. EVE FRANKLIN, VICE CHAIRMAN	✓		✓
SEN. J.D. LYNCH			✓
REP. RED MENAHAN	✓		
REP. LINDA NELSON	✓		
REP. ED GRADY, CHAIRMAN	✓		

ALCOHOL & DRUG ABUSE DIVISION (ADAD)

(Program 40)

FY 93 APPROPRIATIONS

General Fund	\$ 250,661
Special Revenues	1,696,372
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TOTAL	\$5,284,503
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OPERATIONS (Central Office) FTE 8.00

RESIDENTIAL SERVICES - Galen FTE 51.65

MONTANA CHEMICAL DEPENDENCY CENTER (MCDC)

COMMUNITY SERVICES

MISSION STATEMENT

To promote a lifestyle free from chemical abuse for all Montanans by advocating and encouraging the barrier free delivery of responsive and innovative, residential and community based services in an environment of dignity and respect for all consumers, their families and staff.

DIVISION OPERATIONS - CENTRAL OFFICE

PLANNING AND PROGRAM DEVELOPMENT

DISTRIBUTION OF STATE & FEDERAL FUNDS

PROGRAM EVALUATION & APPROVAL & STANDARDS DEVELOPMENT

CERTIFICATION OF ALCOHOL & DRUG COUNSELORS

PREVENTION / EDUCATION

ALCOHOL & DRUG INFORMATION SYSTEM

Residential Services on the Galen Campus are:

Detoxification services in the hospital.

Length of stay 1-3 days.

Montana Chemical Dependency Center (MCDC)

87 Treatment & 12 Orientation beds

28 day and 60 day inpatient programs

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33 State Approved Programs in 68 Locations
(MCDC AT GALEN INCLUDED)

- 2 - Detoxification
- 3 - Inpatient Hospital
- 7 - Inpatient Freestanding
- 2 - Intermediate (TLF)
- 24 - Outpatient * Services Available in All
Counties -16 Provide Intensive Outpatient
- 21 - DUI Court Schools

FUNDING FOR CHEMICAL DEPENDENCY SERVICES

- . State general fund - Galen only
- . Earmarked alcohol tax - sales of liquor, beer and wine and cost recovery Galen.
- . Federal block and categorical grants

Major Accomplishments

Merger of the of the Lighthouse Drug Program and the Alcohol Services Center into one program Montana Chemical Dependency Center (MCDC).

Availability of Intensive Outpatient Programs (IOP) in all urban communities with a population of over 10,000.

Implementation of the revised Alcohol and Drug Information System (ADIS) which meets federal criteria and state needs.

Completion of the 4 year state plan for chemical dependency services.

Establishment of 10 ongoing community prevention projects from funding received under the Community Youth Activity Program (CYAP) federal grant.

Incorporation of HB 909 legislation upgrading counselor certification into our existing certification system.

Completion of the Gambling Treatment Study required under HB 909 and the Incidence and Prevalence Study not required under HB 909 but requested by the Gambling Control Advisory Council.

Development of Patient Placement criteria to ensure the most appropriate, effective and cost efficient utilization of services.

POLICY ISSUES

Completion of the chemical dependency program reorganization on the Galen campus to include the implementation of the 14 day program and Detox, Education, Assessment and Referral (DEAR) program.

Promoting Galen as a responsive, effective and innovative residential chemical dependency treatment program and not a minimum security facility for the criminal justice system, a homeless shelter, etc.

Ensure treatment on demand at Galen by virtually eliminating the waiting list.

Ensure the availability of public funding for chemical dependency services in both the community and Galen.

Meeting both federal funding requirements and serving our state targeted critical populations.

Providing gambling addiction treatment and prevention services within the chemical dependency system.

GALEN RESTRUCTURE

DEAR PROGRAM

DETOX, EDUCATION, ASSESSMENT & REFERRAL

- . 24-26 BEDS COMBINED DETOX & ORIENTATION
- . 3 COUNSELING STAFF
- . 4-5 DAYS IN LENGTH

SERVICES

- . DETOXIFICATION-MEDICALLY MONITORED
- . EDUCATION
 - LECTURES
 - VIDEO PROGRAMS & AA/RECOVERY LITERATURE
 - CLOSED AA MEETINGS
- . ASSESSMENT
 - INITIAL INTERVIEW
 - QUESTIONNAIRE TO SIGNIFICANT ONES
 - DATA FROM THE LEGAL SYSTEM ETC.
- . REFERRAL
 - BACK TO COMMUNITY
 - SHORT TERM TRACK
 - PRIMARY TRACK
 - EXTENDED TRACK

87 BED INPATIENT PROGRAM

1. SHORT TERM TRACK
 - . 9 BEDS
 - . LENGTH OF STAY 14 DAYS
 - . 1 PRIMARY COUNSELOR 9-1 RATIO
 - . INDIVIDUALS APPROPRIATE FOR INTENSIVE OUTPATIENT
 - . INDIVIDUALS WITH A HISTORY OF TREATMENT & SOBRIETY
2. PRIMARY TRACK *see plan*
 - . 60 BEDS - LENGTH OF STAY 28 DAYS
 - . 6 COUNSELORS 10-1 RATIO
3. EXTENDED TRACK *admission*
 - . 18 BEDS 60 DAY LENGTH OF STAY
 - . 2 COUNSELORS 9-1 RATIO
 - . INDIVIDUALS WITH A HISTORY OF TREATMENT FAILURES

HOUSE OF REPRESENTATIVES
VISITOR'S REGISTER

COMMITTEE

BILL NO.

DATE 2-1-93 SPONSOR(S) _____

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NAME AND ADDRESS	REPRESENTING	SUPPORT	OPPOSE
John McRae-Helen	Int Fed of State Employees		
Mike Pippard	LOVED AND RATION		

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