

Restoring funding for targeted case management in Montana

What is targeted case management? Besides close family, case managers are one of the most important persons in the life of a developmentally disabled or mentally ill person. They help them get necessary services and care, thus allowing more Montanans to live in their community instead of often expensive and isolating institutional settings. Case managers help people get and keep jobs, transition to independent living, find doctors and therapists, assist clients with finding stable housing, trouble-shooting benefits paperwork, and checking on medications. They help clients navigate the transition from high school and living at home to entering the workforce and independent living. Case managers can also help people find medical and therapy providers and make sure they get to appointments and take medication. In some cases, a person can have the same case manager for years or decades, building a relationship that creates a high level of understanding.

What happened to the funding? A state budget shortfall that developed in the fall of 2017 forced the governor to cut many millions from the state Department of Public Health and Human Services. Private companies such as Opportunity Resources in Missoula, who employed targeted case managers under contract with DPHHS, were forced to stop. An improved budget picture in 2018 allowed the state to undo some of the cuts, but funding is still well below 2016 levels.

What have been the consequences? Reductions in services for the developmentally disabled mean that families have struggled to care for children and adults with disabilities who have fewer community-based supports. It has become harder for adults with disabilities to maintain independence and remain free of institutions. As the mentally ill have lost longstanding providers, they have increasingly started to seek care only when it reaches a crisis point by visiting emergency rooms to deal with mental health issues, which is the most costly way to deliver health care. In addition, people with mental health issues are also increasingly finding their way into another setting that's not designed to house them: jails.

What can we do? As parishioners of Holy Spirit, we can make our voices heard to advocate in the 2019 legislative session for better support and more humane treatment for some of the most vulnerable among us. In addition, we can advocate for a more far-sighted approach to social services for the mentally ill and developmentally disabled. Some people referred to the state budget cuts as "savings." But the true cost will shift to other areas: public safety, the state mental hospital, the prison system, and our public schools. These cuts will also have long-term financial consequences for local, county, and state budgets. The bigger picture involves maintaining Medicaid in Montana for nearly 97,000 people, which is set to expire this summer unless renewed. Medicaid dollars are vital for case management and for helping vulnerable citizens in general and Medicaid is a sensible investment in the health of our people. So we will be advocating for that, as well.