AGENDA

JOINT MILLENNIUM FUND COMMITTEE

5:00 P.M.

Room WW55

Monday, March 16, 2026

For members of the public to observe the meeting, please click on the following link:
https://www.idahoptv.org/shows/idahoinsession/ww55

SUBJECT/TIME	DESCRIPTION	PRESENTER
5:00 p.m.	Call to Order and Meeting Overview	Co-Chair **Senator Van Burtenshaw** and Co-Chair **Representative Jordan Redman**
	Consider Additional Millennium Income Fund Requests 1. ACT 2. Peer Support Services 3. Healthy Connections	
6:00 p.m.	Adjournment	Co-Chair **Senator Van Burtenshaw** and Co-Chair **Representative Jordan Redman**

COMMITTEE MEMBERS

Senator Burtenshaw, Co-chairman
Senator Bjerke (Bjerke)
Senator Woodward
Senator Ward-Engelking
Senator Semmelroth

Representative Redman, Co-chairman
Representative Erickson (Larsen)
Representative Mitchell
Representative Green
Representative Galaviz

STAFF CONTACT(S)

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Idaho Millennium Income Fund	
*FY 27 Beginning Fund Balance	$27,674,100
Transfer In from Fund 0545 (Endowment)	$29,163,700
Transfer In from Fund 0540 (Traditional)	$3,394,800
Ongoing Appropriations for FY 27	($14,537,400)
JFAC Action 03-05-26	($9,872,200)
JFAC Action 03-06-26	($25,000,000)
Projected Ending Balance	**$10,823,000**

*Estimated

Behavioral Health Program Restoration

Restore Behavioral Health Program	**2026**	**2027**
	State Funds	**State Funds**
Drug & Mental Health Court	$250,000	$250,000
Assertive Community Treatment (ACT)	$1,388,000	$4,155,000
Peer Support Services	$2,008,000	$6,022,000
Skills Training and Development	$186,000	$558,000
Transportation	$33,000	$101,000
1/2 Day Partial Hospital Program (PHP)	$75,000	$225,000
Early Serious Mental Illness (ESMI)	$165,000	$497,000
Total Behavioral Health Add-Back Budget	**$4,105,000**	**$11,808,000**

Fund Sources		
Salary Savings and Internal Savings	$4,105,000	
Millennium Fund		$6,000,000
Opioid Settlement Fund		$5,808,000
Total by Fund	**$4,105,000**	**$11,808,000**

*These totals do not include federal match. Total budget can be found on page 2.

Behavioral Health Program Restoration

Behavioral Health Add-Back Budget	2026		2027	
	State Funds	**Total**	**State Funds**	**Total**
Drug & Mental Health Court	$250,000	$250,000	$250,000	$250,000
Assertive Community Treatment (ACT)	$1,388,000	$3,389,000	$4,155,000	$10,158,000
Peer Support Services	$2,008,000	$6,848,000	$6,022,000	$20,544,000
Skills Training and Development	$186,000	$581,000	$558,000	$1,742,000
Transportation	$33,000	$115,000	$101,000	$347,000
1/2 Day Partial Hospital Program (PHP)	$75,000	$218,000	$225,000	$656,000
Early Serious Mental Illness (ESMI)	$165,000	$401,000	$497,000	$1,205,000
Total Behavioral Health Add-Back Budget	**$4,105,000**	**$11,802,000**	**$11,808,000**	**$34,902,000**

Fund Sources	State Funds	Total	State Funds	Total
Salary Savings and Internal Savings	$4,105,000	$4,150,000		
Millennium Fund			$6,000,000	$6,000,000
Opioid Settlement Fund			$5,808,000	$5,808,000
Federal Funds		$7,697,000		$23,094,000
Total by Fund	**$4,105,000**	**$11,847,000**	**$11,808,000**	**$34,902,000**

Peer Support Services & Idaho's Mental Health Courts

WHAT ARE MENTAL HEALTH COURTS?

Mental health courts help offenders in our communities with a serious and persistent mental health issue find stability and recovery while still being held accountable for the offenses that brought them into the court system in the first place. Participants in these courts are often considered high risk to commit future offenses. Most of them have a substance abuse issue along with their mental health challenges.

These situations typically involve felony offenses. Mental health court participants are required to attend treatment, take prescribed medications, drug test twice weekly, and regularly attend court. A team of court, legal, probation, and mental health professionals are involved with each participant's case.

Without mental health courts, these people would likely be in custody in our local jails or prisons. In that environment, their condition does not often improve. They may pose increased risk to staff while incarcerated and return to their communities in the same or worse condition than before.

Idaho's mental health courts have served **nearly 2,300 participants** over the **past 10 years**.

WHAT ARE PEER SUPPORT SERVICES?

A peer support specialist is someone who has gone through their own experience recovering from a mental health condition and now helps others to do the same. These specialists receive additional training and supervision in recovery interventions. They speak to mental health court participants from the perspective of their own shared recovery experience.

Having someone on a treatment court team who offers a voice of related experience for participants makes a fundamental difference. Peer support provides better connections among the judge, treatment, probation, and the participants. This allows for swift responses by team members to address a participant's issues.

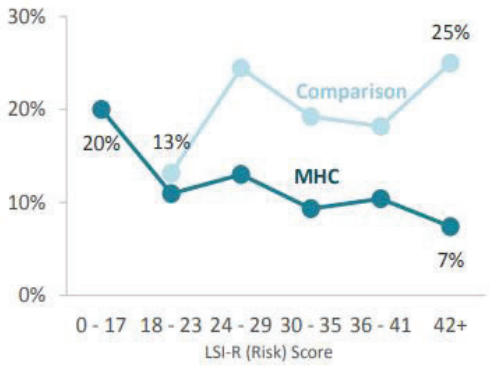
Historically, the Idaho Department of Health and Welfare has provided all treatment services for mental health court participants, including peer support services. These were covered through Medicaid or, for participants who were not eligible, through adult mental health services. On Dec. 1, 2025, IDHW eliminated all peer support services including those used for the mental health courts.

Mental health courts use an evidence-based model that creates proven results. Because peer support is critical to that model, the Idaho Supreme Court repurposed funding from other treatment courts to provide peer support services through June 30, 2026. It accomplished this by leveraging an existing managed care contract for drug treatment courts.

It is not clear if evidence-based mental health courts can continue in Idaho without peer support. In order for these courts to have peer support services in FY27, either IDHW would need to restore its peer support services, or the Supreme Court would need to fund a similar contract addendum for just the mental health courts at a cost of $250,000 for the fiscal year.

THE RESULTS

Idaho court research: A multi-year study released in 2019 found recidivism rates in mental health court participants decreased as their assessed risk increased. The highest-risk participants had the lowest rate of felony recidivism at just 7%.



Other Idaho research: The Idaho Department of Correction has noted the effect of treatment courts on recidivism in its community gap analyses over the years. One example:

"The lowest recidivism rates were amongst those involved in a treatment court (**21.7%**). In addition, those receiving state funded mental health services had the lowest recidivism rates at **19.2%**. Most of these were involved in a mental health treatment court."
— *IDOC Community Gap Analysis FY2022*

Peer support: Research from across the U.S. on the use of peer support services has found benefits across recidivism, probation, and the health and success of participants.

Studies of programs that make strong use of peer support concluded that participants were less likely to commit new crimes and had lower odds of committing probation violations. People who received peer support services reported significantly lower stress levels and fewer symptoms of their mental health condition. Participants were more likely to stick with the mental health treatment plan developed through their program.

Links to specific research can be provided on request.

DHW budget needs for restoring Behavioral Health programs and services

Assertive Community Treatment

Service Description: Assertive Community Treatment (ACT) provides intensive, multidisciplinary, team-based support for individuals with severe and persistent mental illnesses in their community, rather than in a hospital setting. Services are personalized, person-centered, and available 24/7, covering mental health treatment, substance use disorder treatment, medication management, housing assistance, vocational support, and help with daily life skills, aiming to integrate clients into the community and improve their quality of life.

The cost to restore ACT as of April 1, 2026, for the remainder of FY 2026 is $1,041,000 from the General Fund or other state fund sources and $1,500,800 from federal funds, for a total of $2,541,800 in the Department of Health and Welfare (DHW). These costs can be offset in FY 2026 with existing onetime excess appropriation in DHW; this would require transfer authority for the department to shift funds to the Divisions of Medicaid and Mental Health Services.

The appropriation needed to restore this program in FY 2027 is $4,155,000 from the General Fund or other state fund sources and $6,003,000 from federal funds, for a total of $10,158,000 in DHW.

Peer Support Services

Service Description: Adult mental health peer support services are a form of recovery-oriented care provided by and for people with lived experience of mental health challenges. These services offer hope, empowerment, and guidance through supportive interactions and shared experiences, helping individuals set and achieve personal goals for recovery and wellness.

The cost to restore Peer Support Services as of April 1, 2026, for the remainder of FY 2026 is $1,506,000 from the General Fund or other state fund sources and $3,630,000 from federal funds, for a total of $5,136,000 in the Department of Health and Welfare (DHW). These costs can be offset in FY 2026 with existing onetime excess appropriation in DHW; this would require transfer authority for the department to shift funds to the Divisions of Medicaid and Mental Health Services.

The appropriation needed to restore this program in FY 2027 is $6,022,000 from the General Fund or other state fund sources and $14,522,000 from federal funds, for a total of $20,544,000 in DHW.

Skills Training and Development (STAD)

Service Description: If an individual is in recovery from substance use concern, life skills can help them cope with the demands and challenges of life. Programs can help them enhance personal or family relationships, reduce work or family conflict, and adopt healthy, recovery-oriented behaviors.

The cost to restore STAD as of April 1, 2026, for the remainder of FY 2026 is $139,500 from the General Fund or other state fund sources and $296,200 from federal funds, for a total of $435,700 in the Department of Health and Welfare (DHW). These costs can be offset in FY 2026 with existing onetime excess appropriation in DHW; this would require transfer authority for the department to shift funds to the Divisions of Medicaid and Mental Health Services.

The appropriation needed to restore this program in FY 2027 is $558,000 from the General Fund or other state fund sources and $1,184,000 from federal funds, for a total of $1,742,000 in DHW.

Provider Mileage Reimbursement for Transportation

Service Description: Transportation and mileage, per mile, is reimbursable for certain provider types and services.

The cost to restore transportation as of April 1, 2026, for the remainder of FY 2026 is $24,800 from the General Fund or other state fund sources and $61,500 from federal funds, for a total of $86,300 in the Department of Health and Welfare (DHW). These costs can be offset in FY 2026 with existing onetime excess appropriation in DHW; this would require transfer authority for the department to shift funds to the Divisions of Medicaid and Mental Health Services.

The appropriation needed to restore this program in FY 2027 is $101,000 from the General Fund or other state fund sources and $246,000 from federal funds, for a total of $347,000 in DHW.

½ Day Partial Hospitalization Program (PHP)

This is a structured program for mental health or substance use symptoms that can be managed in a level of care that is less intensive hospitalization but higher than intensive outpatient care. You attend this structured program for half of the day. You do not spend the night in the hospital. Services include:

- Assessment and treatment planning

- Psychotherapy and/or psychoeducation
- Skill-building activities
- 24-hour crisis services
- Psychiatric evaluation
- Medication management
- Substance use screening and monitoring, and drug testing (as appropriate)
- Physical exam
- Care coordination/transition management/discharge planning

The cost to restore ½ day PHP as of April 1, 2026, for the remainder of FY 2026 is $56,300 from the General Fund or other state fund sources and $107,200 from federal funds, for a total of $163,500 in the Department of Health and Welfare (DHW). These costs can be offset in FY 2026 with existing onetime excess appropriation in DHW; this would require transfer authority for the department to shift funds to the Divisions of Medicaid and Mental Health Services.

The appropriation needed to restore this program in FY 2027 is $225,000 from the General Fund or other state fund sources and $431,000 from federal funds, for a total of $656,000 in DHW.

Early Serious Mental Illness (ESMI)

Service Description: An Early Serious Mental Illness (ESMI) (or Early Intervention in Psychosis - FEP/EIP) service provides specialized, recovery-oriented treatment for individuals (often ages 15-30) experiencing their first episode of a serious mental illness, such as a schizophrenia-spectrum disorder or bipolar disorder with psychotic features. These evidence-based programs, often using a Coordinated Specialty Care (CSC) model, deliver a team-based approach combining medication management, individual and family therapy, peer and case management support, and assistance with education and employment to promote long-term recovery and improve quality of life.

The cost to restore ESMI as of April 1, 2026, for the remainder of FY 2026 is $123,700 from the General Fund or other state fund sources and $177,000 from federal funds, for a total of $300,700 in the Department of Health and Welfare (DHW). These costs can be offset in FY 2026 with existing onetime excess appropriation in DHW; this would require transfer authority for the department to shift funds to the Divisions of Medicaid and Mental Health Services.

The appropriation needed to restore this program in FY 2027 is $497,000 from the General Fund or other state fund sources and $708,000 from federal funds, for a total of $1,205,000 in DHW.