



AN ACT IMPLEMENTING THE PROVISIONS OF THE GENERAL APPROPRIATIONS ACT; REQUIRING THAT A PORTION OF THE HOSPITAL UTILIZATION FEE BE USED FOR HOSPITAL QUALITY AND EFFICIENCY INCENTIVE PAYMENTS; REQUIRING THAT A PORTION OF THE HOSPITAL UTILIZATION FEE BE USED FOR PAYMENTS TO INDEPENDENT NONAFFILIATED CRITICAL ACCESS HOSPITALS; ALLOWING LOAN REPAYMENT AND FUNDING FOR ADDITIONAL BEDS AT THE MONTANA STATE HOSPITAL TO BE ELIGIBLE USES OF THE BEHAVIORAL HEALTH SYSTEM FOR FUTURE GENERATIONS FUND ON A ONE-TIME BASIS; PROVIDING FOR A STUDY ON THE LONG-TERM SUSTAINABILITY OF OBJECTIVES IN HB 872; ESTABLISHING REPORTING REQUIREMENTS; AMENDING SECTION 50-1-119, MCA; AND PROVIDING AN EFFECTIVE DATE AND A TERMINATION DATE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

Section 1. Section 50-1-119, MCA, is amended to read:

"50-1-119. Behavioral health system for future generations fund. (1) There is an account in the state special revenue fund established in 17-2-102 to be known as the behavioral health system for future generations fund.

- (2) There must be deposited in the account money received from legislative general fund transfers.
- (3) Eligible uses of the fund include:
 - (a) medicaid and CHIP matching funds for payments made to behavioral health settings;
 - (b) medicaid and CHIP matching funds for payments made to intermediate care facilities for individuals with intellectual disabilities;
 - (c) statewide community-based investments to stabilize behavioral health and developmental disabilities service providers and delivery, increase and strengthen the behavioral health and developmental

disabilities workforce, increase service capacity to meet identified behavioral health and developmental disabilities services demands, and increase opportunities for Montanans to receive integrated physical and behavioral health care;

(d) acquisition of new or remodeling of existing infrastructure or property to support the establishment of behavioral health settings and intermediate care facilities for individuals with intellectual disabilities;

(e) planning, operation, or other contract expenses associated with intermediate care facilities for individuals with intellectual disabilities;

(f) planning, operation, or other contract expenses associated with behavioral health settings; and

(g) studying and planning of the development of a comprehensive behavioral health system;

(h) offering student loan repayment programs for nurses, licensed practical nurses, and psychiatrists at state health facilities and prioritizing employees at the Montana state hospital for the programs;
and

(i) providing additional licensed beds at the Montana state hospital.

(4) (a) Funds in this account may not be used to operate existing state facilities.

(b) Student loan repayments and the addition of licensed beds are not considered operating expenses for the purposes of this section."

Section 2. Near-term initiatives. The department of public health and human services shall continue using its approved funding for behavioral health system for future generations near-term initiative number one to support community-based court-ordered evaluations and clinical stabilization services in local detention facilities.

Section 3. Reporting -- comprehensive school and community treatment services to children. The department of public health and human services shall develop and report patient-centered health outcome measures and total costs for each program and for each child for comprehensive school and community treatment services to children. The report shall be provided on a quarterly basis to the health and human services interim budget committee and the children, families, health, and human services interim committee.

Section 4. Montana state hospital reporting. (1) Starting July 1, 2025, and each month thereafter, the department of public health and human services shall submit a written report on the Montana state hospital.

The report must outline the department's hiring efforts and following data:

- (a) the number of applications received;
- (b) the number of qualified applicants;
- (c) the number of interviews conducted; and
- (d) the number of new employees hired.

(2) The monthly reports must be submitted to the legislative finance committee, the interim budget committee section B, and the interim budget committee section F.

Section 5. Long-term sustainability of HB 872 study -- committee. (1) During the interim following the 69th legislative session, there is a House Bill No. 872 long-term sustainability committee to analyze and propose mechanisms to provide sustainable funding for long-term objectives of House Bill No. 872 to the executive branch and to the legislative finance committee in preparation for the 70th legislative session.

(2) The committee consists of the following members:

- (a) the chair of the health and human services appropriations joint subcommittee;
- (b) four members of the health and human services appropriations joint subcommittee, with one appointed by the speaker of the house, and one appointed by the minority leader of the house, one appointed by the president of the senate, and one appointed by the minority leader of the senate, in consultation with the chair of the health and human services appropriations joint subcommittee;

- (c) the director of the department of public health and human services, or the director's designee;
- (d) the medicaid bureau chief; and
- (e) the budget director or the director's designee.

(3) The department of public health and human services shall staff the committee and pay for the operational costs of the committee.

(4) The office of budget and program planning and the legislative fiscal division shall provide research and analysis at the request of the committee.

(5) The committee shall elect a presiding officer from one of the members who is a legislator and elect a vice presiding officer.

(6) Starting June 1, 2025, the committee shall meet every 2 months and may meet remotely.

(7) The committee shall reserve time at each committee meeting for public comment. Public participation is encouraged.

Section 6. Coordination instruction. The appropriation in House Bill No. 2 for certified community behavioral health centers is contingent on the passage and approval of House Bill No. 574. If House Bill No. 574 is not passed and approved, the appropriation in House Bill No. 2 is void.

Section 7. Effective date. [This act] is effective July 1, 2025.

Section 8. Termination. [This act] terminates June 30, 2027.

- END -

I hereby certify that the within bill,
HB 936, originated in the House.

Chief Clerk of the House

Speaker of the House

Signed this _____ day
of _____, 2025.

President of the Senate

Signed this _____ day
of _____, 2025.

HOUSE BILL NO. 936

INTRODUCED BY J. GILLETTE

AN ACT IMPLEMENTING THE PROVISIONS OF THE GENERAL APPROPRIATIONS ACT; REQUIRING THAT A PORTION OF THE HOSPITAL UTILIZATION FEE BE USED FOR HOSPITAL QUALITY AND EFFICIENCY INCENTIVE PAYMENTS; REQUIRING THAT A PORTION OF THE HOSPITAL UTILIZATION FEE BE USED FOR PAYMENTS TO INDEPENDENT NONAFFILIATED CRITICAL ACCESS HOSPITALS; ALLOWING LOAN REPAYMENT AND FUNDING FOR ADDITIONAL BEDS AT THE MONTANA STATE HOSPITAL TO BE ELIGIBLE USES OF THE BEHAVIORAL HEALTH SYSTEM FOR FUTURE GENERATIONS FUND ON A ONE-TIME BASIS; PROVIDING FOR A STUDY ON THE LONG-TERM SUSTAINABILITY OF OBJECTIVES IN HB 872; ESTABLISHING REPORTING REQUIREMENTS; AMENDING SECTION 50-1-119, MCA; AND PROVIDING AN EFFECTIVE DATE AND A TERMINATION DATE.