**Criminal Justice - Continuum of Care**

|  |
| --- |
| Treatment #4: Ensure continuity of care for those within the criminal justice system, including those entering and leaving the system by providing treatment and ensuring links to services for those coming out of incarceration |

|  |
| --- |
| **ACTION ITEMS AND OBJECTIVES** |
| 1. **Expanding Peer Recovery Services** |
| Expand access to Peer Recovery Support Specialists across the state to include access to supervisors and continuing education. |
| Develop oversight for the nine recovery centers throughout the State, to include accountability and leadership development for sustainability and continuity. |
| \*Standardize the certification of Peer Support Specialist and Recovery Coach to encompass both within one certification and provide ongoing accountability. This is to include a code of ethics, background waiver, certification criteria, initial training requirements, ongoing CEU, and supervision requirements. |
| Create a network for certified peer support professionals for both community and statewide support. |
| 1. **Funding for independent assessors and other resources for individuals preparing to release from IDOC/IDJC custody/incarceration** |
| Secure 1115 waiver funding through Medicaid for services in a correctional setting. |
| Full implementation of CAA 5121 (mandatory) & 5122 (voluntary) federal law. |
| IDJC community based alternative services (CBAS) – post-release, probation services, up to 90 days of funding. |
| Main funding streams: gap funding for diversion/probation screening for MH/SUD needs, additional funding application for additional services. |
| Individuals needing congregate care MH or IDD services post-release (supported living, ICF, etc.) – juvenile supported living is a big gap. |
| 1. **Expanding MAT/MOUD across the system** |
| Develop awareness around processes serving the same clients across service areas |
| Enhancement criminal justice systems and community partnership |
| Evidence based oversight of individuals in MAT services |
| 1. **Multi-agency partnership for screening, court processes, case management, alternative placement, and PV options (non-incarcerations)** |
| Develop awareness around processes serving the same clients across service areas |
| Enhancement criminal justice systems and community partnership |

*\*Will work collaboratively with the Workforce Development implementation team*

|  |  |
| --- | --- |
| **ACTION ITEM #1** | |
| **Enhance and Expand Peer Recovery Support Services** | |
| **FULL DESCRIPTION** | |
| Enhance and expand peer recovery support services through strategically integrating recovery coaches within all intercepts of the criminal justice system | |
| **TARGET OBJECTIVES** | |
| **1.** | Expand access to Peer Recovery Support Specialists across the state to include access to supervisors and continuing education. |
| **2.** | Develop oversight for the nine recovery centers throughout the State, to include accountability and leadership development for sustainability and continuity |
| **3.**\* | Standardize the certification of Peer Support Specialist and Recovery Coach to encompass both within one certification and provide ongoing accountability. This is to include a code of ethics, background waiver, certification criteria, initial training requirements, ongoing CEU, and supervision requirements. |
| **4.** | Create a network for certified peer support professionals for both community and statewide support. |

*\*Will work collaboratively with the Workforce Development implementation team*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SMART GOALS TO ACCOMPLISH ACTION ITEM #1 OBJECTIVES** | | | | |
| **OBJECTIVE** | **SPECIFIC OUTCOME** | **METRIC FOR ACCOMPLISHMENT** | **TARGET DATE FOR COMPLETION** | **RESPONSIBLE PARTY** |
| 1. | Secure funding for additional Peer Recovery Support Specialists per Judicial District and to support training. |  |  |  |
| 1. | Assist districts with finding available resources to recruit and train new Peer Recovery Support Specialists /Recovery Coaches |  |  |  |
| 1. | Agency education on how to build and implement Peer Supports within their agencies. |  |  |  |
| 1 | Explore reimbursement requirements under management Medicaid Behavioral Health and BPA. |  |  |  |
| 1. | Explore additional options for funding Peer Recovery Support Specialists. |  |  |  |
| 2. | Identify the most effective level of oversight necessary for accountability for peer recovery support services |  |  |  |
| 2. | Identify the best administration to provide oversight for agencies providing peer recovery support services |  |  |  |
| 2. | Ensure that oversight reflects the needs of the community the peer recovery support services serve. |  |  |  |
| 2. | Develop a pathway and standards for additional entities to join the network. |  |  |  |
| 3. | Verify if there are statutory requirements around certifications. |  |  |  |
| 3. | Identify stakeholders in the issue of certification and training. |  |  |  |
| 3. | Convene a task force of existing certification and training bodies for the separate peer workforce organizations to identify opportunities for consolidation |  |  |  |
| 3. | Create a standard for following up on complaints of code of ethics violations. |  |  |  |
| 4. | Develop a regional network of certified specialists to support each other at a local level to include local leadership |  |  |  |
| 4. | Develop a statewide network of local leadership to meet on a regular basis to provide statewide support |  |  |  |
| 4. | Create a charge for local networks to have structure at meetings including minimum meeting consistency requirements |  |  |  |

|  |  |
| --- | --- |
| **TEAM LEAD** | |
| Katelyn Morris | GEO Group |
| **OTHER KEY IMPLEMENTATION STAFF FOR ACTION ITEM #1** | |
| Nancy Espeseth | Center for Hope |
| Mark Renick | St. Vincent de Paul |
| Aimee Austin | District 7 Courts |
| Keri Anderson | Ada County Misdemeanor Probation |
| Norma Jaeger | Recovery Idaho |
| Tess Reasor | 208 Recovery |
| Emily Smith | Idaho Department of Correction |
| **CONSULTING STAKEHOLDERS FOR ACTION ITEM #1** | |
|  | |
| **RESOURCES, RISKS, AND ADDITIONAL INFORMATION FOR ACTION ITEM #1** | |
|  | |

|  |  |
| --- | --- |
| **ACTION ITEM #2** | |
| **Funding for IDOC and IDJC folks preparing for release/independent assessors** | |
| **FULL DESCRIPTION** | |
| Explore funding options including Medicaid 1115 waiver for treatment of individuals within their final weeks of custody in preparation for successful community re-integration | |
| **TARGET OBJECTIVES** | |
| **1.** | Secure 1115 waiver funding through Medicaid for services in a correctional setting. It would require legislative approval (pursuant to requirements in 56-270 IC) as well as funding authorization. In addition to Idaho’s legal requirements, the federal timeframe for an 1115 amendment is extensive. At earliest, funds would become available sometime in Q2 2027 |
| **2.** | Full implementation of CAA 5121 (mandatory) & 5122 (voluntary) federal law – pre-adjudication services for incarcerated persons (both juvenile and adult up to age 21, former foster kids up to 26 – via the Medicaid EPSDT process). Under these provisions, for the last 30 days of incarceration Medicaid enrollment is activated to facilitate services immediately upon release. These federal measures allow for better coordination of correctional data at state, county, and local levels to allow for Medicaid eligibility on day 1 of release from a correctional setting. This could be pursued independent of or in conjunction with 1115 funding. |
| **3.** | IDJC community based alternative services (CBAS) – post-release, probation services, up to 90 days of funding. Focus on MH/BH, equine therapy, multi-systemic therapy, etc. Preventive intent, $1M annual budget (general funds). These general funds could be further leveraged with Medicaid billing or matching. |
| **4.** | Individuals needing congregate care MH or IDD services post-release (supported living, ICF, etc.) – juvenile supported living is a big gap. Possible connection with IDHW work on a health home program for people with developmental disabilities that may be able to support some services. |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SMART GOALS TO ACCOMPLISH ACTION ITEM #2 OBJECTIVES** | | | | |
| **OBJECTIVE** | **SPECIFIC OUTCOME** | **METRIC FOR ACCOMPLISHMENT** | **TARGET DATE FOR COMPLETION** | **RESPONSIBLE PARTY** |
| 1. | Work with Medicaid staff to identify strategic priorities for 1115 in the coming years to assess potential for funding for these needs. | Communication with Medicaid management and leadership around 1115 priorities. | 6/1/2025 |  |
| 2. | Connect with Medicaid policy team on SPA and implementation plans and timelines for CAA provisions | Communication with Angie Williams, Adam Panitch, Charles Beal, and Matt Clark and other appropriate staff from Medicaid on these activities | 8/1/2025 |  |
| 3. | Review community based alternative services and gap funding in comparison to Medicaid coverage, eligibility, and credentialing criteria to assess the potential for Medicaid coverage for those services. | Production of a summary report by IDJC staff using published Medicaid guidance and materials along with communication with Medicaid, CYFS, and Magellan staff and contractors on the potential for accessing Medicaid reimbursement and any barriers that would need to be overcome. | 12/31/2025 |  |
| 4. | Review Medicaid health home and more general BH coverage criteria and guidelines to identify opportunities for accessing services for those with developmental disabilities or similar needs |

|  |  |
| --- | --- |
| **TEAM LEAD** | |
| Matt Wimmer | Idaho Community Health Center Association |
| **OTHER KEY IMPLEMENTATION STAFF FOR ACTION ITEM #2** | |
| Adam Panitch | DHW, Division of Medicaid |
| James Phillips (or new staff in this role) | IDJC |
| Kari Portales | IDJC |
| **CONSULTING STAKEHOLDERS FOR ACTION ITEM #2** | |
| * Division of Medicaid policy, waiver, systems, and BH staff * Division of Behavioral Health staff * Division of Welfare staff * Division of Children, Youth, and Family Services staff * Local correctional facility staff * IDJC staff * IDOC staff * Providers delivering services to recently released incarcerees, especially in rural areas * Magellan staff | |
| **RESOURCES, RISKS, AND ADDITIONAL INFORMATION FOR ACTION ITEM #2** | |
| **Overall Risk** – HB 345 which recently passed this session requires significant efforts from IDHW and especially the Divisions of Welfare and Medicaid, including pursuing waivers and state plan amendments related to comprehensive managed care implementation, new approaches to work requirements and co-payments, new eligibility renewal timelines, and significant changes to other programs. These activities will rightfully be high priority for IDHW, which is also facing leadership turnover with the departure of Director Adams to head up the federal Administration for Children and Families. IDHW’s ability to support other activities such as those described here may be limited.   * 1115 waiver funding through Medicaid for services in a correctional setting will require legislative approval to pursue as well as funding authorization. * Enrollment in Medicaid as a provider can be challenging for providers groups or individuals who are not familiar with the process, and reimbursement may not be adequate to cover costs of care in all circumstances. Magellan’s role will be critical for this support and they may have competing priorities as well. | |

|  |  |
| --- | --- |
| ACTION ITEM #3 | |
| **Expand use of MAT/MOUD across the system** | |
| **FULL DESCRIPTION** | |
| Reduce use of opiates for those who are justice involved across Idaho by providing expanded Medication Assisted Treatment (MAT)- Therapeutic interventions with a broad scope of medications used to assist individuals suffering with substance use disorders / Medications for Opioid Use Disorders- narrowed scope of medications specifically designed to address opiate addiction absent other therapeutic interventions including counseling. | |
| **TARGET OBJECTIVES** | |
| **1.** | Develop awareness around processes serving the same clients across service areas |
| **2.** | Enhancement criminal justice systems and community partnership |
| **3.** | Evidence based oversight of individuals in MAT services |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SMART GOALS TO ACCOMPLISH ACTION ITEM #3 OBJECTIVES** | | | | |
| **OBJECTIVE** | **SPECIFIC OUTCOME** | **METRIC FOR ACCOMPLISHMENT** | **TARGET DATE FOR COMPLETION** | **RESPONSIBLE PARTY** |
| 1. | Develop a list of all available services within Idaho. | Comprehensive List of Services | 12/31/2025 |  |
| 2. | Distribute the comprehensive list of services to all partnering agencies. | Increase in referrals to MOUD/MAT treatment as evidenced by data pull from Atlas | 08/31/2026 |  |
| 3. | Research evidence-based supervision systems.  Gathering input from public defenders, judges, prosecutors, and probation/parole officers on current practices and potential reforms. | List of evidence-based supervision systems with a ranking of which ones would be the most feasible to apply with the current Idaho system. | 12/31/2026 |  |
| 3. | Recommendation to adapt the evidence-based system for supervision of those that struggle with substance use disorders. | Make a recommendation to the IBHC to adapt the evidence-based system for supervision of those that struggle with substance use disorders. |  |  |

|  |  |
| --- | --- |
| **ACTION ITEM #3 TEAM LEAD** | |
| Dusty Orr | Idaho Department of Correction |
| **OTHER KEY IMPLEMENTATION STAFF FOR ACTION ITEM #3** | |
| Amy McKenzie | Trivium Life Services |
| Amy Welsh | Idaho Department of Correction |
| Norma Sands | Idaho Commission of Pardons and Parole |
| Matt Wimmer | Idaho Community Health Center Association |
| **CONSULTING STAKEHOLDERS FOR ACTION ITEM #3** | |
|  | |
| **RESOURCES, RISKS, AND ADDITIONAL INFORMATION FOR ACTION ITEM #3** | |
|  | |

|  |  |
| --- | --- |
| **ACTION ITEM #4** | |
| **Cross-Agency Collaboration** | |
| **FULL DESCRIPTION** | |
| Improve understanding and collaboration across agencies related to court processes and alternative placements for probation and parole violations | |
| **TARGET OBJECTIVES** | |
| **1.** | Training for District Judges on current content and experiences for rider participants |
| **2.** | Training for all judges on assessments |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SMART GOALS TO ACCOMPLISH ACTION ITEM #4 OBJECTIVES** | | | | |
| **OBJECTIVE** | **SPECIFIC OUTCOME** | **METRIC FOR ACCOMPLISHMENT** | **TARGET COMPLETION DATE** | **RESPONSIBLE PARTY** |
| 1. | Work with the Trial Court Administrators to provide training for District Judges beginning with the fourth district in calendar year 2025 |  | 12/31/2025 |  |
| 1. | Conversation with Fourth District TCA |  | 4/30/2025 |  |
| 2. | Provide training on understanding assessments for all Fourth District Judges |  | 6/30/2025 |  |
| 1. | Work with each TCA to determine availability for training in each judicial district |  | 12/31/2025 |  |
| 1. | Provide overview of Rider Program for Felony Sentencing Committee Judges |  | 12/31/2025 |  |
| 1. | Update to APSI recommendation form |  | 12/31/2025 |  |
| 1. | Improve District Judges understanding of the rider program by providing information and education and changing relevant process changes in calendar year 2025. |  |  |  |

|  |  |
| --- | --- |
| **ACTION ITEM #4 TEAM LEAD** | |
| Amy McKenzie | Trivium |
| **OTHER KEY IMPLEMENTATION STAFF FOR ACTION ITEM #4** | |
| Katie Morris | GEO Group |
| Laura Watson | IDOC |
| Sandy Jones | AOC |
| James Phillips | IDJC |
| Jackie Lee | BSU |
| **CONSULTING STAKEHOLDERS FOR ACTION ITEM #4** | |
| Judges, Trial Court Administrators | |
| **RESOURCES, RISKS, AND ADDITIONAL INFORMATION FOR ACTION ITEM #4** | |
| Lack of availability of judges for meeting/training opportunities within the stated timelines | |