WICHE
BEHAVIORAL
HEALTH PROGRAM
ANNUAL REPORT
FY 2022
ALASKA • ARIZONA • CALIFORNIA • COLORADO • HAWAI'I • IDAHO • MONTANA • NEVADA • NEW MEXICO • NORTH DAKOTA • OREGON • SOUTH DAKOTA • U.S. PACIFIC TERRITORIES AND FREELY ASSOCIATED STATES • UTAH • WASHINGTON • WYOMING
MISSION

We focus on improving services and building a qualified workforce responsive to, and informed by, persons with behavioral health challenges and their families. In the past 67 years, much has changed, but our mission has remained consistent. Our mission is to support our member states and territories in a manner that extends capacities and informs action.

"Guam is one of the newest members of WICHE and was welcomed with open and helpful partnership. On September 1, 2022, we launched the Guam Psychology Internship Consortium, on time and on budget with WICHE’s support and guidance. We’re making a difference in building the Guam behavioral health workforce, and WICHE understands our needs and steps up to help."

THERESA C. ARRIOLA Director, Department of Mental Health and Substance Abuse, Guam
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"WICHE Behavioral Health was instrumental in helping state agencies in Hawai‘i develop an APA-accredited predoctoral psychology internship training program for our state. The ability of the WICHE consultants to integrate our internship into the nationwide APPIC match selection process and their invaluable assistance with obtaining APA accreditation has enabled our program to attract and train highly competent doctoral students for work in our public service agencies across the state."

ALEX BIVENS, PH. D. Clinical Psychologist
Faculty, Hawai‘i Psychology Internship Consortium
Dear Colleagues and Friends:

The Behavioral Health Program (BHP) of the Western Interstate Commission for Higher Education (WICHE) has engaged partners like you for 67 years. Our program was created at the direction of the Western governors shortly after WICHE was founded in 1953. Our focus then and today is a collaboration with our member states, U.S. territories, and freely associated states to improve our public systems of care and meet the evolving behavioral health needs in our communities.

Together with you, these efforts help improve these systems of care and build and sustain a high-quality behavioral health workforce, which is needed now more than ever. Like other programs in WICHE’s broad and deep portfolio of work, we accomplish this by fostering innovation, sharing resources, and promoting sound public policy. The WICHE Behavioral Health Program expands the capabilities of partners like you through technical assistance, research and evaluation, and professional development. As we do our work, our cumulative knowledge informs our partners across the region. The Behavioral Health Program and its staff have been busy this past year. This report provides you with a snapshot of our efforts across the West.

Highlights include:

▶ **Doctoral clinical psychology internship programs** in Alaska, Hawai‘i, Nevada, Oregon, Idaho, New Mexico, Utah, and our newly developing programs in Guam, South Dakota and with Sanford Health.

▶ **Together With Veterans** is our rural military veteran suicide prevention program in collaboration with the Rocky Mountain Veterans Administration Mental Illness Research, Education and Clinical Centers, which continues to expand through new community-based efforts from New Hampshire to Guam.

▶ **Addiction in Rural Communities** is a critical issue for our nation. WICHE BHP is providing a range of technical assistance and consultation to support rural communities in responding to this crisis.

The work described within this report is illustrative of the breadth of our capabilities and the value of regional collaboration. As you receive this report, we’re already engaged in another busy year supporting our partners throughout and beyond the WICHE West.

Sincerely yours,

Dennis F. Mohatt
Vice President for Behavioral Health

Demarée Michelau
WICHE President

This report covers fiscal year 2022
Alaska Native Tribal Health Consortium Behavioral Health Aide Assessment

The Alaska Native Tribal Health Consortium (ANTHC), in conjunction with the Alaska Mental Health Trust Authority, contracted with the WICHE Behavioral Health Program to assess ANTHC’s Behavioral Health Aide (BHA) Program. The WICHE BHP assessed the efficacy of the BHA training program in the provision of training and technical assistance to Alaska Tribal Health Organizations. The WICHE BHP also prepared a written report emphasizing the strengths of the BHA program, areas for improvement, and any possible recommended changes. This project laid the foundation for the newly-funded Native American Research Centers for Health four-year study of the BHA program.

PROJECT LEAD: DENNIS MOHATT

Native American Research Centers for Health Behavioral Health Aide Assessment

The WICHE Behavioral Health Program, in collaboration with the Northwest Indian College, the Center for Alaska Native Health Research (CANHR) and the Alaska Native Tribal Health Consortium (ANTHC), was awarded a National Institutes of Health (NIH) research grant. This project will evaluate the behavioral health aid program focusing on efficacy, implementation, and best practices. Year one of this project involves examining the BHA program implementation in Alaska through a statewide environmental scan of BHA practice throughout the state. This research will provide pilot data for a test of the BHA training curriculum’s effectiveness, with a long-term goal of establishing an evidence-base for effectiveness of the ANTHC’s BHA program in building local capacity for place-based behavioral health services in rural and remote American Indian and Alaska Native (AIAN) community settings. As behavioral health workforce issues continue to grow in tribal areas, this research has the potential to significantly influence the development of new programs across the West.

PROJECT LEAD: DENNIS MOHATT

Alaska Psychology Internship Consortium

The Alaska Department of Health and Social Services (DHSS), Division of Behavioral Health, and the Alaska Mental Health Trust Authority contracts with the WICHE Behavioral Health Program to support the Alaska Psychology Internship Consortium (AK-PIC) in gaining American Psychological Association Accreditation and the training of students enrolled at the University of Alaska’s Ph.D. program in Clinical-Community Psychology, as well as other psychology doctoral students who wish to train and work in Alaska. In FY 22, the 12th year of the AK-PIC, the program graduated 11 interns from three sites. A total of 115 interns have graduated in the past 12 years. The AK-PIC was recredited by the APA, receiving the maximum accreditation period of 10 years.

PROJECT LEAD: DEBRA KUPFER

ak-pic.org
Arizona Evidence-Based Practices Fidelity Monitoring

The WICHE Behavioral Health Program partners with the Arizona Health Care Cost Containment System to support fidelity reviews of four evidence-based practices (EBP) in the Maricopa County public behavioral health system. Additionally, two evidence-based practices are being reviewed in the northern and southern regions of the state. The WICHE BHP employs and supports the project team conducting the fidelity reviews.

PROJECT LEAD: ANN JONES

Arizona Mercy Maricopa Evidence-Based Practices

The WICHE BHP collaborates with Mercy Care Arizona to provide training, education, and guidance concerning evidence-based practices and fidelity tools to ensure provider staff are offering high-quality EBP and are ensuring fidelity to identified EBP protocols.

PROJECT LEAD: DEBRA KUPFER

Arizona Mercy Care C.A.R.E.S. Training

The WICHE Behavioral Health Program collaborates with Mercy Care Arizona, C.A.R.E.S (Community Action Resources Education and Service) community giving initiative to plan and provide trainings to increase workforce expertise by implementing training strategies for evidence-based practices: Trauma-informed Care for Children, Youth and Adults; Transition to Independence Model; Infant-Toddler Mental Health Coalition of Arizona 0-5 Training; and Cognitive Behavioral Therapy for Substance Use Disorders including Opioids.

PROJECT LEAD: DEBRA KUPFER
Guam Psychology Internship Program

The Guam Behavioral Health and Wellness Center (GBHW) has contracted with the WICHE Behavioral Health Program to facilitate development of a Doctoral Psychology Internship Program to support the preparation and retention of doctoral-level psychologists in Guam. The WICHE BHP is working with GBHW to ensure the program meets the accreditation requirements of the American Psychological Association (APA), and to support the internship program through the accreditation process. The Guam Psychology Internship Program successfully matched with its first two post-doctoral interns who began the program in September 2022.

PROJECT LEAD: DENNIS MOHATT

guam-pic.org
Hawai‘i Department of Education: Supplement Recruitment of Clinical Psychologists

The Hawai‘i Department of Education continued its contract with the WICHE Behavioral Health Program to recruit and contract with clinical psychologists to ensure all program requirements for supervision and support of staff, students, and program fidelity are maintained for the West Hawai‘i’s School-Based Behavioral Health (WH-SBBH) program. The WH-SBBH program has historically faced significant challenges recruiting and retaining professionals for service provision because of the rural and workforce challenges that leave WH-SBBH without the needed professional credentials to supervise and train new SBBH personnel.

PROJECT LEAD: ERIN BRILEY

Hawai‘i Psychology Internship Consortium

The WICHE Behavioral Health Program continues to assist Hawai‘i in the operation and continuous accreditation of its psychology internship consortium. A primary goal of the internship is to increase the number of psychologists in Hawai‘i and build the state’s behavioral health workforce. Three Hawai‘i state agencies (Department of Education, Department of Health, and Department of Public Safety) provide funding to support the WICHE BHP’s ongoing development and operations of the Hawai‘i Psychology Internship Consortium (HI-PIC). In FY 22, the HI-PIC program graduated nine interns across seven sites, and since its inception in 2013, the program has graduated 70 interns, achieving a 98.91% graduation rate.

PROJECT LEAD: ERIN BRILEY

hi-pic.org
Idaho Psychology Internship Consortium

The WICHE Behavioral Health Program continues to work with partner agencies to develop a broad and culturally relevant training program to support the preparation and retention of doctoral-level psychologists in Idaho through the Idaho Psychology Internship Consortium (ID-PIC). The WICHE BHP facilitates program development, ensures the program meets American Psychological Association accreditation standards, and assists in the accreditation process. Because the program successfully recruited the minimum required number of interns for the 2020-21 training year, ID-PIC will move forward with the accreditation process, including preparing and submitting a comprehensive self-study and scheduling an accreditation site visit. This year, the Idaho-PIC increased the number of intern site locations, and broadened training in areas like psychotherapy, assessment skills, behavioral health training in primary care, as well as individual and group psychotherapy.

PROJECT LEAD: DENNIS MOHATT
idaho-pic.org

Montana Crisis Services/Technical Assistance

Phase I: July 1-September 30, 2021

The WICHE Behavioral Health Program was contracted by the State of Montana’s Addictive and Mental Disorders Division (AMDD) to work specifically with the Crisis Coalitions in the counties of Missoula, Gallatin, Cascade, and Lewis & Clark. The goal was to evaluate current needs and resources necessary to implement crisis receiving and stabilization facilities for each county. Through this work, the WICHE BHP not only assessed the current status of crisis services, but also offered additional guidance for further development of crisis services.

Phase II: January 1-October 31, 2022

Upon completion of the initial summary report to Montana’s State leadership for Phase I, the WICHE BHP was asked to provide continued technical assistance in a second phase to the above mentioned four counties – with the addition of Flathead, Yellowstone, and Butte Counties. The WICHE BHP was also asked to assist in a statewide assessment of crisis services including Mobile Crisis Response and Crisis Receiving and Stabilization facility development. The WICHE BHP is currently reviewing statewide rules and policies as they apply to crisis services, reviewing and recommending funding initiatives, reviewing bed registry dashboards for continuity of care, and providing guidance for a regionalized model of crisis services for the state. Throughout this project, the team has conducted over 75 key informant interviews, provided technical assistance at both the state and county levels, and participated in statewide leadership meetings to examine the development, structure, and implementation of behavioral health services across Montana.

PROJECT LEAD: TODD HELVIG
Montana PACT Fidelity Reviews

The WICHE BHP is providing consultation and technical assistance to the Montana Department of Public Health and Human Services Addictive and Mental Disorders Division regarding the implementation of its Program for Assertive Community Treatment (PACT). This work includes fidelity assessments of each PACT in Montana using the SAMHSA Assertive Community Treatment Fidelity Review Toolkit. Based on areas of need established by the fidelity reviews, the WICHE BHP will design and implement improvement activities including education, training, and consultation.

PROJECT LEAD: ANN JONES

Montana Zero Suicide

The rate of loss of life caused by suicide in Native American communities in Montana is the highest in the nation. The State of Montana retained the WICHE Behavioral Health Program to assist urban and reservation-based Native American primary care clinics in developing protocols and skills to help prevent suicides in Native American communities. The WICHE BHP helped assess the training needs of six primary care clinics and their respective communities and delivered training on the Suicide Prevention Toolkit for Primary Care Practices, focusing on societal and clinical issues specific to Native Americans. The WICHE BHP also developed an American Indian Addendum for the Suicide Prevention Toolkit for Primary Care Practices for use in this project and other trainings.

PROJECT LEAD: DENNIS MOHATT

Nevada Psychology Internship Consortium

The WICHE Behavioral Health Program continues to provide support to the Nevada Division of Public and Behavioral Health for the ongoing operations and accreditation of the Nevada Psychology Internship Consortium (NV-PIC), which aims to increase the number of psychologists in Nevada and build the state’s behavioral health workforce. In FY 2022, NV-PIC graduated two of its three interns, and continues to refine the internship experience.

PROJECT LEAD: TODD HELVIG

nv-pic.org
**New Mexico Psychology Internship Consortium**

Working in partnership with the New Mexico Department of Human Services, the New Mexico Department of Health, and the Indian Health Service agency, the WICHE Behavioral Health Program provides consultation and technical assistance to develop and implement a Doctoral Psychology Internship Consortium. The consortium will help build quality behavioral health resources in rural areas of the state. The focus of this work is facilitating the development of the program, ensuring that the internship program meets the accreditation requirements of the American Psychological Association, and supporting and assisting the internship program from initial planning through the accreditation process. In FY 2022, the program graduated its first cohort of two interns. Overcoming episodes of New Mexico heat, drought, wildfires, and ongoing struggles with the effects of COVID-19, this past year provided ample opportunities for the interns and staff to weather the challenges and strengthen their team and training.

**PROJECT LEAD: TODD HELVIG**

nm-pic.org

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**Oregon State Hospital Psychology Internship Program**

The WICHE Behavioral Health Program continues to assist the Oregon State Hospital Psychology Internship Training Program by providing support for the internship website.

**PROJECT LEAD: DENNIS MOHATT**

oshpip.org
South Dakota IMPACT Fidelity Reviews and Training

The WICHE Behavioral Health Program is providing consultation and technical assistance to the South Dakota Division of Behavioral Health regarding the implementation of their Individualized Mobile Programs of Assertive Community Treatment (IMPACT). The focus of this work includes conducting quality assurance reviews based upon the state-specific IMPACT Quality Assurance Scale and the design and implementation of activities based on areas of need, established by the quality assurance scale findings and previous SAMHSA fidelity reviews, along with providing education, training, and consultation.

**PROJECT LEAD: ANN JONES**

South Dakota Human Services Center Consultation

The WICHE BHP is providing consultation and technical assistance to the South Dakota Division of Behavioral Health, Human Services Center (HSC), conducting a full operations and program analysis to help establish optimal capacity and patient programming, while ensuring patient and staff safety. HSC’s objective is to align the campus mission with community needs and available resources, and to review their current programming to ensure it meets the evolving needs of the state’s behavioral health system.

**PROJECT LEAD: DEBRA KUPFER**

Utah Psychology Internship Consortium

With support from the Utah Medical Education Council, the WICHE BHP worked with partner agencies to develop a broad and culturally relevant training program to support the preparation and retention of doctoral-level psychologists in Utah. In FY 2022, the Utah Psychology Internship Consortium (UT-PIC) achieved full accreditation from the APA Commission on Accreditation, and successfully graduated five interns. This last year the UT-PIC interns enjoyed the opportunity to participate in a service project for the unsheltered population in Salt Lake City and volunteered their time for the Wellness Fair at Utah Tech University.

**PROJECT LEAD: DENNIS MOHATT**

ut-pic.org
The WICHE BHP, in partnership with the University of North Dakota (UND) continued to co-administer the Mountain Plains Mental Health Technology Transfer Center (MP-MHTTC) grant, with Dennis Mohatt as co-director of the MHTTC. In Year Four, the grant was moved from the UND College of Nursing and Professional Disciplines to the College of Education and Human Development, when Dr. Rachel Navarro assumed the responsibilities of grant co-director.

Funding for the five-year MP-MHTTC grant comes from the Substance Abuse and Mental Health Services Administration (SAMHSA). Rural mental health is the focus area of the grant, and it provides for the development and implementation of free training, technical assistance, and other resources for the behavioral and mental health workforce in the U.S. Department of Health and Human Services (HHS) Region 8 states: Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming.

In addition to the main grant, SAMSHA funded the MHTTC School Mental Health Supplement (SMH), administered by the WICHE BHP, for Years Two, Three and Four. In Year Five, the SMH funding has been reduced to allow for addressing critical regional needs, while SAMSHA considers how to best consolidate its focus and efforts in SMH going forward.

In Year One, the MP-MHTTC completed an extensive regional needs assessment enabling the WICHE BHP to host training and provide technical assistance in the identified areas of need during Years Two, Three, and Four. Areas of training included suicide prevention, suicide training for primary care providers, mental health courts, mental health for people with intellectual and developmental disabilities, traumatic brain injury, mental health practices for college-age youth and providers working with them, and farm stress, with an emphasis on suicide prevention and meeting the mental health needs of the Latino Agricultural workforce.

In Year Two, as part of the SMH supplement, the WICHE BHP produced a white paper entitled *Helping Teachers Support Student Mental Health: Recommendations for Strengthening K-12 Teacher Preparation Curricula*, providing recommendations to higher education institutions about the value of K-12 teacher preparation programs to address mental health issues in the classroom. These recommendations were based on findings by the Higher Education Teacher Preparation Workgroup.

In Year Three, SAMSHA also funded a Provider Well-Being Supplement to provide support and relief to the behavioral and mental health workforce from the impact of COVID-19. The WICHE BHP expanded these training efforts using funds from the Provider Well-Being supplement. Clinicians and Trainers from Weill Cornell | New York Presbyterian Youth Anxiety Center led a Community of Practice (CoP) for college mental health providers. This CoP trained college mental health providers in wellness strategies and resiliency-building exercises over two months. Funding from this supplement also allowed the WICHE BHP to provide additional training for providers on compassion fatigue, mental wellness, and developing resilience throughout the spring and summer of 2021. Efforts to promote provider well-being and develop resiliency by learning evidence-based mindfulness practices continued through Year Four, based on demand and feedback from key regional stakeholders.

Leadership development is another area of focus for the main grant. For the past four years, the WICHE BHP has hosted the Mountain Plains MHTTC Leadership Academy. The purpose of the Leadership Academy is to develop and support behavioral health leaders in HH5 Region 8 states.

In Year Three, to accommodate COVID-19 restrictions, the Leadership Academy adapted its forum and curriculum to a virtual format. In Year Four, the Leadership Academy was once again hosted at the WICHE offices in Boulder, Colorado. Representatives from all HHS Region 8 states attended, including several from remote and frontier communities. Participants experienced the chance to engage with their peers, network, and learn about their individual styles of leadership.

Additional efforts to support and grow the behavioral health workforce included hosting a second Summit for Western State MHTTC directors. These meetings continue to serve as a springboard for regional collaborations.

In Years Three and Four, a key initiative for the SMH supplement was providing training and technical assistance focused on trauma-responsive practices in schools. This included trainings related to transitioning back to school for anxious youth, suicidal awareness and response, supports for staff and families, a six-part Communities of Practice regarding becoming a trauma-informed school, and two Training of Trainers events. Ongoing technical assistance to help support training implementation and sustained integration of trauma-informed practices in schools was also provided.

**PROJECT LEAD: DENNIS MOHATT**

[mhttcnetwork.orgcenters/mountain-plains-mhttc](mhttcnetwork.orgcenters/mountain-plains-mhttc)
The WICHE BHP was selected by the National Institutes of Health (NIH) to prepare an electronic book and annotated bibliography, *Mental Health in Rural America 2006–2020*, summarizing research findings on mental health and substance use in rural America and to incorporate stakeholder input regarding exemplary research, lesser known but still impactful research, and the research gaps and priorities in this area. This book will provide researchers, policymakers, educators and health care providers with the latest information and results from research concerning mental illness, mental health, and substance use in rural areas, as well as with information about gaps in current research and priorities for future research needs.

**PROJECT LEAD: DENNIS MOHATT**
Working with the Health Resources and Services Administration (HRSA) and the Federal Office of Rural Health Policy (FORHP), the Rural Communities Opioid Response Program (RCORP) is a multi-year initiative that addresses barriers to treatment for substance use disorder (SUD), including opioid use disorder (OUD), in rural communities. In FY 2022, the WICHE BHP, through a sub-award agreement with JBS International, provided intensive technical assistance to support 63 designated grant award recipients of the RCORP-Planning and Implementation and/or Psychostimulant grantees, in their efforts to implement and sustain prevention, harm reduction, treatment, and recovery services to address substance use including opioids and psychostimulants in rural communities.

RCORP’s focus of WICHE’s grant initiatives includes:

- **Planning Grants** designed to strengthen the capacity of multi-sector consortia to develop plans to implement and sustain SUD/OUD prevention, treatment, and recovery services in rural communities. Award recipients received up to $200,000 each over an 18-month period.

- **Implementation Grants** designed to strengthen and expand SUD/OUD prevention, treatment, and recovery services in designated rural areas. Award recipients receive up to $1 million each over a three-year period.

- **Psychostimulant Grants** are designed to strengthen and expand prevention, treatment, and recovery services for individuals in rural areas who misuse psychostimulants and to enhance their ability to access treatment and move towards recovery. Grantees receive up to $500,000 each over a three-year period of performance to implement a set of evidence-based interventions and promising practices.

**PROJECT LEAD: DEBRA KUPFER**
Together With Veterans (TWV) is funded by the U.S. Department of Veterans Affairs Office of Rural Health and supported by the VA Office of Mental Health and Suicide Prevention. It is a partnership of the VA Rocky Mountain Mental Illness Research, Education and Clinical Center (MIRECC), the WICHE Behavioral Health Program (BHP), and rural veteran-led suicide prevention partnerships. The WICHE BHP engages veterans to build local teams with community partners. The WICHE BHP also provides training, tools, and support for these teams to assess community strengths, needs, and resources to create and implement an evidence-informed suicide prevention plan.

The WICHE BHP has played an integral role since the inception of TWV in 2015, developing the design of TWV and creating program tools and resources, including a web portal to support program implementation and evaluation.

TWV guiding principles:

- Veteran-driven, utilizing a local Veteran majority leadership structure
- Collaborative, engaging community partners
- Evidence-informed approach to suicide prevention
- Community-centered to addresses the unique strengths, needs, and resources of the community it serves

From inception through FY 2022, the WICHE BHP has established 31 rural TWV sites across 25 states and territories, including 11 WICHE member states and territories. TWV will onboard four to seven additional sites in the coming year.

**PROJECT LEAD: JASON ALVES**

mirecc.va.gov/visn19/togetherwithveterans

"We realized that we may not know what an impact this program has had on Veterans, [until] a Veteran in Colorado received one of our gun locks and it save[d] his life. What we do in our area can be felt through our nation." —TWV at Sparrows Nest
Rocky Boy Health Center Technical Assistance

The WICHE BHP is providing consultation and technical assistance to the Rocky Boy Health Center's Department of Behavioral Health regarding the implementation of their Tribal Assertive Community Treatment team (TACT). The focus of this work includes regular support calls between Health Center leadership and WICHE BHP staff. Assistance will adapt to meet the needs of the newly developed team.

PROJECT LEAD: ANN JONES

University of Wisconsin Technical Assistance

The University of Wisconsin contracted with the WICHE BHP as a lead agency to provide training to a pre-determined Learning Collaborative. The training consisted of six remote sessions over 12 weeks educating students, educators, and paraprofessionals on the integration of behavioral health in rural communities. The WICHE BHP collaborated with the Montana Primary Care Association for the provision of trainers on the implementation of substance use and mental health services in traditionally underserved rural areas. Individual technical assistance and mentoring were offered as additional services for those participating in the learning collaborative.

PROJECT LEAD: TODD HELVIG
The Western States Decision Support Group (WSDSG) is an information-sharing network for state government behavioral health data and evaluation staff and managers from the WICHE states and territories. Since 1985, the WICHE Behavioral Health Program has managed initiatives including information sharing platforms and support to stay apprised of developments and best practices in the field of behavioral health data and evaluation.

PROJECT LEAD: ANN JONES
The WICHE Behavioral Health Program is one of two self-funded units within WICHE, and as such, must earn sufficient revenue to cover all expenses. Additionally, the WICHE BHP is required to maintain a reserve to ensure stable operations in lean economic times. As shown in Figure 1, revenue increased over the last three years, exceeding $7.0 million in FY 2022, allowing the unit to contribute to its reserve fund in all three years. The WICHE BHP anticipates that revenues will again increase slightly in FY 2023.

The largest growth in revenues has come from federally-funded projects, including the VA-funded Together With Veterans – Rural Veteran Suicide Prevention Program, the SAMHSA-funded Mental Health Technology Transfer Center, and the HRSA-funded Rural Communities Opioid Response Program. Additionally, in conjunction with the Northwest Indian College and the University of Alaska-Anchorage, the WICHE BHP received a grant award from the National Institutes of Health to study the efficacy of the Native Alaskan Tribal Health Consortium’s Behavioral Health Aide Program. The Behavioral Health Program also received a large contract from the State of Montana to evaluate its Behavioral Health Crisis System. As shown in Figure 2, in FY 2022 federal sources of revenue accounted for just over 53.0% of all revenue generated by the BHP, which is an increase from 44.0% in FY 2021. Conversely, revenue from contracts with state agencies, non-profits and other sources decreased from 48.0% in FY 2021 to 39.0% in FY 2022.
As shown in Figure 3 above, like previous years, the largest portion of actual FY 2022 expenditures was for staff salaries and benefits at 47% and for consultants at 30%. The WICHE BHP's use of consultants increased significantly in fiscal years 2021 and 2022. While travel expenses comprised only 4% of all FY 2022 expenditures, the Behavioral Health Program saw a dramatic increase in travel as compared to fiscal years 2020 and 2021, when travel was minimal during the height of the pandemic.
BEHAVIORAL HEALTH OVERSIGHT COUNCIL

Founded in 1955, the mission of the WICHE Behavioral Health program is twofold: 1) to assist states in improving systems of care for behavioral health consumers and their families and 2) to advance the preparation of a qualified behavioral health workforce in the West. The program collaborates with states to meet the challenges of changing environments through regional research and evaluation, policy analysis, program development, technical assistance, and information sharing.

The Behavioral Health Oversight Council is the WICHE Behavioral Health Program’s advisory board. It is comprised of the chief state behavioral health official from each WICHE state or territory and two representatives of the WICHE Commission.

The purpose of the Behavioral Health Oversight Council is to advise in establishing the direction of the program, to provide active representation of the public behavioral health service system in the program’s formulation of its policies, objectives, and priorities, and to review the fiscal performance of the program and advocate for financial and participatory support of the program.

2021–2022 Council Members

Rodney Jacob, U.S. Pacific Territories and Freely Associated States (WICHE Commissioner)

Antwan Jefferson, Colorado (WICHE Commissioner)

Theresa Arriola, Guam (Chair)

Neal Bowen, New Mexico (Vice Chair)

Ross Edmunds, Idaho (Past Chair)

Steve Allen, Oregon

Amy Curtis, Hawai’i

Rebecca de Camara, Montana

Brent Kelsey, Utah

Morgan Medlock, Colorado

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Pam Sagness, North Dakota

Jami Snyder, Arizona

Joseph Villagomez, Commonwealth of the Northern Marianas Islands

Keri Waterland, Washington

Tiffany Wolfgang, South Dakota

Stephanie Woodard, Nevada
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