

Coordination & System Integration



No one should fall through the cracks.

Why it matters? Better coordination means faster help, fewer crises, and better outcomes.

What we're addressing?

- Fragmented services
- Confusing referral pathways
- Missed handoffs between systems

What this plan supports?

- Navigators and peer support
- Shared referral tools and resource directories
- Strong coordination between counties, Tribes, providers, courts, and schools

The Power of Navigators: Peer support and behavioral health "sherpas" act as the glue of the system, providing the human connection needed for effective warm handoffs between institutional settings like jails or hospitals and community care.

Key Investments

- Regional behavioral health navigators and peer support workers
- Shared resource directories and referral pathways
- Warm-handoff protocols between hospitals, courts, providers, and community programs
- Ongoing regional coordination and data-informed planning

Budget

Year	%	Level	Justification
1	30%	\$300,000	This is critical component to overall system effectiveness and likely will not be Medicaid eligible services so a consistent investment is needed. Over time the system itself should identify and eliminate duplications and become more efficient. Focus on navigation centers, systems, and sherpas supported by technology and data-informed planning.
2	30%	\$300,000	
3	25%	\$250,000	Slight reduction due to elimination of duplicative services, technology integration, and system efficiency.

3-Year Targets

- Complete 2,000+ coordinated referrals and warm handoffs annually
- Reduce missed or incomplete referrals across systems
- Improve stakeholder-reported system coordination and access clarity

Impact: Faster access, fewer missed connections, clearer pathways to care.

