

## Recovery Community Organization - amended

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*2025 Montana Opioid Abatement Trust  
Grants-second half of 2025*

### ***Greater Impact Inc***

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# Application Form

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## *Region Selection*

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To collaborate with someone else on this request, click the blue "Collaborate" button in the top-right corner.

### **Project Name\***

Recovery Community Organization - amended

**You may only select one Abatement Region, if you are applying for funding from more than one region you will need to fill out and submit a separate application for each region.**

### **Select Multi County Abatement Region OR Metro Region\***

Select the Multi-County Abatement Region **OR** the Metro Region you are requesting grant funds from. Click [HERE](#) for a detailed map of Multi-County Regions and Metro Regions.

Gallatin County Metro Region

### **Regional Funding Request\***

If you are applying to multiple regions, please select all the regions to which you are submitting applications.

N/A

## *Application Overview*

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### **About the Organization/Program\***

Give a brief description of the Organization/Program/Project. Include the mission statement and the services provided.

Greater Impact – Mission and Services

Mission: Restoring Hope, Rebuilding Lives-Together.

Core Services: Greater Impact operates a diverse set of programs addressing recovery, prevention, and community stability. This includes Sober Living Homes—two for men and one for women in Gallatin Valley. Recovery Coaching offers guidance, strategies, and emotional support for individuals through peer-led programs and support groups.

Proposed Project: Greater Impact opened a Recovery Community Organization (RCO) in November 2025, located at 7000 N. 7th Ave. in Bozeman, Montana. Additional space will be available at the Greater Impact RCO, for warm hand-offs, enhancing coordination and access to services for the Gallatin County community. Western Skies Behavioral Health has a Licensed Addiction Counselor that is local and able to support assessments for those re-entering from the Department of Corrections and any other services needed on-site.

As Rimrock Foundation establishes itself in Gallatin County, Western Skies Behavioral Health will begin coordinating with them to provide additional capacity for services.

One-Door Model: Individuals with opioid use disorder (OUD), other substance use disorders (SUDs), or co-occurring mental health conditions will be able to access evidence-based treatment, recovery housing, harm reduction, and community support without navigating fragmented systems. Western Skies Behavioral Health will partner with the Rimrock Foundation to provide crisis receiving and stabilization, outpatient SUD treatment, MAT, psychiatric care, and therapy. Greater Impact will operate recovery housing, peer coaching, relapse prevention, transportation, job readiness resources, family supports, and outreach.

## What category does the program fit into\*

Check the category/categories the program fits into. You may select more than one option.

Click [HERE](#) for a list of approved opioid remediation uses

Prevention  
Treatment  
Recovery

## Exhibit E List of Opioid Remediation Uses

### *Schedule A - select all that apply*

- A. NALOXENE/OTHER FDA-APPROVED DRUG TO REVERSE OPIOID OVERDOSES
- B. "MAT" DISTRIBUTION & OTHER OPIOID-RELATED TREATMENT
- C. PREGNANT & POSTPARTUM WOMEN
- E. EXPANSION OF WARM HAND-OFF PROGRAMS AND RECOVERY SERVICES
- F. TREATMENT FOR INCARCERATED POPULATION
- G. PREVENTION PROGRAMS
- I. EVIDENCE-BASED DATA COLLECTION & RESEARCH ANALYZING EFFECTIVENESS OF ABATEMENT STRATEGIES

## Exhibit E List of Opioid Remediation Uses

### *Schedule B - select all that apply*

- A. TREAT OPIOID USE DISORDER "OUD"
- B. SUPPORT PEOPLE IN TREATMENT & RECOVERY
- C. CONNECTIONS TO CARE
- D. ADDRESS THE NEEDS OF CRIMINAL JUSTICE-INVOLVED PERSONS
- E. NEEDS OF PREGNANT/PARENTING WOMEN, BABIES W/ NEONATAL ABSTINENCE SYNDROME
- G. PREVENT MISUSE OF OPIOIDS
- H. PREVENT OVERDOSE DEATHS & OTHER HARMS (HARMS REDUCTION)
- J. LEADERSHIP, PLANNING, & COORDINATION
- K. TRAINING

## How does the program meet the Opioid Remediation Guidelines\*

Provide a detailed explanation of how the program fits into the approved Opioid Remediation Guidelines selected in the above question.

*Please be specific*

### Exhibit E: A and H – Naloxone and Overdose Prevention

Distribute naloxone and fentanyl test strips to high risk populations, including residents of recovery housing, justice-involved individuals, and rural communities.

Provide overdose response training to staff, peers, and community members with education on Montana Good Samaritan protections.

Integrate prevention education into support groups, outreach, and recovery meetings.

### Exhibit E: B – MAT and OUD Treatment

Coordinate MAT with psychiatric care, counseling, and case management.

Reduce stigma through targeted outreach and normalize MAT as a treatment option.

Provide low-barrier MAT with wraparound peer support.

Exhibit E: C – Pregnant and Postpartum Women  
Implement SBIRT screening and immediate service linkage.

Partner with a certified Recovery Doula provider.

Provide counseling, MAT, parenting education, and care navigation.

### Exhibit E: D and F – Criminal Justice-Involved

Create referral protocols with probation, parole, and detention facilities.

Provide treatment and housing connections upon release.

### Exhibit E: E – Warm Handoff Programs

Operate as a central hub for referrals from crisis response, hospitals, first responders, and law enforcement.

Assign peer recovery coaches for 24 hour transitions from crisis to care.

### Exhibit E: G – Prevention

Deliver school-based prevention, parenting workshops, and fentanyl awareness campaigns.

Partner with healthcare providers for best prescribing practices and drug disposal.

### Exhibit E: I – Data Collection

Collect ongoing data to measure impact on overdoses, treatment engagement, and recovery sustainability.

Share results with local and state stakeholders, present at conferences, and create a framework for replication.

### New Program or Existing\*

Is the funding intended for a new program or to expand an existing program?

A new program for your region.

## Fiscal Information

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### Requested Amount\*

\$500,000.00

### Program Budget\*

How will the funds be allocated? Attach a detailed line item budget breakdown for the program. If the funds are intended for a multi-year program please specify the amount budgeted for each year.

Greater Impact Montana Opioid Abatement Trust budget.xlsx

### Source of Funding\*

Does the program currently receive funding from another source? If yes, please explain in detail. (i.e. amount, funding source, etc.)

Grant funding is intended for the creation or expansion of opioid prevention, treatment, and recovery projects. The money is **NOT** meant to replace or supplant existing funding.

Funding for the Recovery Community Organization (RCO), in partnership with Western Skies Behavioral Health and Health Equity Solutions will come from multiple sources, including Medicaid and other insurance reimbursements, Alcohol Tax Dollars, and a combination of contracts and grants, such as those from the Montana Department of Public Health and Human Services (DPHHS) and the Substance Abuse and Mental Health Services Administration (SAMHSA). The partnership is also exploring additional revenue streams, including tenancy support reimbursement and other funding opportunities through the HEART Program. In addition to maintaining these established funding sources, the partners actively monitor and pursue emerging opportunities, including forecasted sources such as the SUPPORT for Patients and Communities Reauthorization Act, to ensure sustainability and program growth.

Current Funding:

HRSA grant for the Recovery Community Organization -\$298,448.00 awarded (Greater Impact)  
 DPHHS \$29,000 (awarded to Greater Impact) to provide services to those ages 18 - 24 that are at risk of being houseless such as GED training, job training, life skills, etc.  
 Montana Board of Crime Control \$38,000 (awarded to Greater Impact) to support individuals transitioning from DOC or county jail into community

## Do you have a Fiscal Agent\*

No

## Program Abstract

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### Program Description\*

Describe the objectives of this project. Provide a detailed overview of the program, including its purpose, priorities & objectives, and intended results.

Greater Impact has established a new clinical partnership with Western Skies Behavioral Health, which will be expanding outpatient substance use disorder treatment services into Gallatin County. Western Skies Behavioral Health will serve as the primary clinical provider, offering licensed outpatient services, Medication-Assisted Treatment (MAT), and therapy to individuals served through the Recovery Community Organization (RCO). Western Skies Behavioral Health has five psychiatric nurse practitioners that provide contracted MAT services.

Although Western Skies Behavioral Health and Rimrock Foundation are new to the Gallatin County community, continuity of care and local expertise will be ensured through collaboration with key lead staff from Greater Impact and Health Equity Solutions ensuring a seamless transition for clients and preserves established best practices, referral pathways, and community relationships.

Greater Impact officially opened the Recovery Community Organization (RCO) on November 29, providing peer recovery support, navigation, recovery coaching, and wraparound services. As Rimrock Foundation establishes its own permanent office, they will take over some of the services from Western Skies Behavioral Health that are better offered in person. Greater Impact and Rimrock plan to have a shared space at the current RCO to deliver an integrated, one-door model of care. This co-location will allow individuals to access peer support and clinical services in a coordinated environment, reducing barriers to treatment and improving outcomes.

Together, Greater Impact, Western Skies Behavioral Health, Rimrock Foundation and Health Equity Solutions will deliver a comprehensive continuum of recovery-oriented care that strengthens Gallatin County's behavioral health infrastructure and supports long-term recovery.

- Provide immediate access to integrated treatment, housing, and recovery supports for individuals with OUD/SUD.
- Reduce opioid-related overdoses through targeted harm reduction and prevention activities.
- Increase service integration across healthcare, housing, justice, and community systems.
- Support families affected by opioid use through childcare, prevention, and parenting education.
- Establish sustainable partnerships and referral pathways to ensure continuity of care.
- Build a replicable community recovery hub model that can be adapted by other Montana communities.

**Intended Results:**

- Decrease in opioid-related overdose deaths in Gallatin County by at least 15% within two years.
- At least 90% of participants will be connected to essential services within 30 days of intake.
- Sustained recovery rates improve through integrated housing and treatment supports.
- Improved family stability and child wellbeing among participating households.
- Reduction in recidivism rates among justice-involved participants engaged in the program.
- A roadmap developed for other organizations to adopt this framework.

**Specific Goals\***

Describe the primary goals your program seeks to achieve. For each goal, explain how the program intends to accomplish it.

**Goal 1: Increase access to overdose prevention and harm reduction.**

**Strategy:** Train 30 or more community members and staff in naloxone use, distribute 2 doses per trainee, and provide education on fentanyl test strips and Good Samaritan protections (50-32-609).

**Measurement:** Participant registry with 30-, 60-, and 90-day follow-up to track naloxone use and refills.

**Goal 2: Strengthen service integration with housing as a core component.**

**Strategy:** Develop partnerships in medical care, legal aid, job training, housing, and treatment, and assign a navigator for service connections.

**Measurement:** Track percentage of new participants connected to services within 30 days of intake, with a target of 90 percent.

**Goal 3: Expand family recovery supports.**

**Strategy:** Provide childcare, youth prevention programs, and trauma-informed parenting education through direct services and partnerships.

**Measurement:** Track families served, childcare hours provided, and participation in prevention or parenting programs.

**Goal 4: Build a justice reentry pathway.**

**Strategy:** Establish referral MOUs with probation and parole, offer warm handoffs to housing and treatment, and provide peer support for justice-involved participants.

**Measurement:** Track MOUs signed, referrals, and percentage increase in justice-involved participants, with phased targets to allow for hiring and partnership development.

**Goal 5: Launch a fully functional Community**

## Recovery Hub.

Strategy: Open a co-located center for outpatient treatment, peer coaching, housing, and wraparound supports, with services rolled out in phases to match staffing and readiness.

Measurement: Track service start dates, staffing levels, and participant enrollment, with full operation targeted by December 2025.

## Evaluation Method\*

Please explain in detail how you will gauge the effectiveness and overall impact of the program. What specific evaluation methods, tools, or metrics will you use to measure success.

Evaluation will be coordinated by Health Equity Solutions with support from service leads and partner agencies. Data will be collected continuously, compiled monthly, and reviewed quarterly to measure progress and guide program improvements.

Collection Methods: Secure digital records, participant surveys, referral logs, service utilization data, and staff reports. Interviews and focus groups with participants, staff, and partners will provide qualitative insights.

By Program Area:

Naloxone and Overdose Prevention: Number trained, doses distributed, and reversals reported, with follow-up calls at 30 and 90 days.

MAT: Number served, retention rates, and stigma-reduction survey results.

Pregnant and Postpartum: Number screened, enrolled, and maintaining postpartum engagement.

Justice-Involved: Number of MOUs, referrals, and housing or treatment linkages.

Warm Handoff: Percentage of clients with needs met within 30 days, and number of successful transitions.

Prevention: Number of events, youth reached, provider trainings, and disposal kits distributed.

Quality Improvement: Quarterly outcome dashboard, documented improvements, and reports submitted to stakeholders.

Please note that Dr. Jennifer Rolfes at Health Equity Solutions will lead the evaluation team. She has seven data scientists, data engineers and PhD level statisticians to support data collection, validation, analysis and reporting. Being able to tell the story of the grant journey from the lens of all participants is critically important. Health Equity solutions will do this by utilizing a mixed methodology approach including quantitative data collections and semi structured interviews. The team will partner with all stakeholders including the Department of Corrections, DPHHS, Recovery Access Montana (RAM), and the Montana Board of Crime Control to ensure that there is alignment in the various efforts taking place both in Gallatin County and across the state of Montana. Health Equity Solutions has led evaluation and reporting for over twenty HRSA and SAMHSA grants and has extensive experience in systems design and Electronic Health Record (EHR) optimization to offer seamless and automated reporting solutions and take the burden off of those providing direct services.

## Data Source\*

What data or evidence will you collect to show you are meeting your program goals? What specific information, metrics and documentation will you provide to demonstrate the program objectives have been achieved.

Greater Impact, in partnership with Western Skies Behavioral Health, Health Equity Solutions, and other collaborators, will collect both quantitative and qualitative data to measure progress toward program goals. Data will be drawn from a combination of secure electronic systems, partner records, and direct participant feedback, ensuring accuracy and compliance with HIPAA and confidentiality standards.

The following information will be collected to demonstrate progress toward program goals and measure success:

For overdose prevention, naloxone training attendance will be tracked via sign-in sheets entered into a secure database. Naloxone doses distributed will be logged through inventory records, and overdose reversals will be recorded through 30- and 90-day follow-up calls, anonymous reports, and partner incident forms.

For Medication-Assisted Treatment (MAT), participant counts and retention rates will be drawn from Western Skies Behavioral Health's electronic health record (EHR) Simple Practice. Stigma-reduction survey results will be gathered pre- and post-service by peer recovery coaches using secure survey tools.

For pregnant and postpartum participants, screening and enrollment data will come from intake forms at both agencies, while postpartum engagement will be monitored through follow-up case management notes in the EHR.

For justice-involved participants, referrals through MOUs with probation, parole, and detention facilities will be tracked in shared referral logs. Linkages to housing or treatment will be documented in navigator case notes and housing placement databases. Service connection timelines will be monitored using a tracker that records intake and service dates, and stable transitions verified through housing and treatment records.

For prevention activities, events will be verified against calendars and attendance sheets; youth reached will be counted from sign-in sheets; provider trainings will be documented through training logs and agendas; and disposal kits tracked through inventory logs.

Continuous quality improvement actions will be documented in quarterly evaluation meeting notes and stored in a program improvement tracker. Data will be compiled monthly, reviewed quarterly, and reported to MOAT to ensure accountability and continuous improvement.

## Awareness\*

How do you plan to create awareness of this program? Briefly describe what action the program plans to take to create awareness in the community.

Greater Impact, Western Skies Behavioral Health, Rimrock Foundation, and Health Equity Solutions will implement a comprehensive awareness and engagement strategy to ensure that the Recovery Community Organization (RCO) is visible, trusted, and accessible throughout Gallatin County and beyond. Efforts will focus on promoting services, educating the community about opioid use disorder (OUD) and recovery supports, and fostering collaboration across sectors.

Community Partnerships: Leadership will actively participate in local, statewide, and national networks, including Recovery Access Montana (RAM), the Gallatin County Behavioral Health Coalition, the Montana Community Re-entry Coalition, and the Community Collaboration Team. Engagement with professional

associations such as ASAM, NAADAC, and SAMHSA will ensure alignment with national best practices. Letters of Commitment will be secured from key partners to demonstrate sustained community support.

**Public Education and Media Outreach:** The program will coordinate public awareness campaigns on overdose prevention, harm reduction, and recovery success stories through social media, local newspapers, radio, and television. Educational content will include information on naloxone use, fentanyl risks, Good Samaritan protections, and available services. Testimonials from program participants and families will be shared—with consent—to reduce stigma and promote hope.

**Training and Conference Participation:** Staff and peer leaders will attend and present at statewide conferences, workshops, and community forums, sharing lessons learned, data-driven results, and replicable strategies. These appearances will position the RCO as a subject matter expert and resource hub.

**Targeted Outreach:** The program will prioritize outreach to underserved and high-risk populations, including justice-involved individuals, rural residents, pregnant and postpartum women, and youth. Strategies will include informational sessions in schools, partnerships with first responders, and direct engagement at community events.

**Visibility as a Central Hub:** The co-located RCO facility will serve as a physical point of connection for individuals and families, with clear signage, welcoming spaces, and open-door access during extended hours. Cross-sector collaborations and policy advocacy will ensure the RCO remains central to the region's recovery infrastructure.

## *Additional Documents*

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### **Tax Exempt Organization\***

By clicking this box you are confirming the applying organization is a tax exempt organization.

Yes

### **Tax Exempt Determination Letter\***

Please upload a copy of the Organization 501(C)(3) Tax Exempt Determination Letter.

Copy of TaxLetter (1).pdf

**Use this section to upload or explain any additional information regarding the program/organization. ie. a detailed budget projection, program/organization history, etc.**

### **Upload #1**

*[Unanswered]*

**Upload #2**

**Upload #3**

**Additional Information**

## File Attachment Summary

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### *Applicant File Uploads*

- Greater Impact Montana Opioid Abatement Trust budget.xlsx
- Copy of TaxLetter (1).pdf

# Budget Justification & Revenue Summary

Total Project Budget: \$809,217.86

## Expense Summary (Detailed)

| Category   | Amount              |
|--|---------------------|
| Personnel - Certified Peer Support Specialists (4 FTE)     | \$206,400.00        |
| Personnel - Certified Family Support Specialist (1 FTE)    | \$43,344.00         |
| Personnel - Case Managers (2 FTE)                          | \$86,688.00         |
| Personnel - RCO Program Director (1 FTE)                   | \$45,000.00         |
| Personnel - Certified Behavioral Health Counselor (1 FTE)  | \$55,000.00         |
| Personnel - Certified Licensed Addiction Counselor (1 FTE) | \$50,000.00         |
| Personnel - Recovery Doula (0.5 FTE)                       | \$28,896.00         |
| Supplies - Technology & Office Equipment                   | \$9,531.96          |
| Supplies - Health & Safety                                 | \$12,297.90         |
| Supplies - Program Materials                               | \$17,300.00         |
| Supplies - Operational                                     | \$5,800.00          |
| Other - Training   | \$9,600.00          |
| Other - Facilities   | \$36,000.00         |
| Other - Utilities & Communications                         | \$7,200.00          |
| Other - Security & Insurance                               | \$8,500.00          |
| Other - Infrastructure & Equipment                         | \$13,000.00         |
| Other - Operational Costs                                  | \$12,330.00         |
| Contract - Psychiatric Nurse Practitioner Consulting       | \$30,000.00         |
| Contract - Western Skies Behavioral Health                 | \$40,000.00         |
| Contract - Rimrock Foundation                              | \$30,000.00         |
| Contract - Health Equity Solutions                         | \$40,000.00         |
| Indirect Costs   | \$78,688.79         |
| <b>Total Expenses</b>                                      | <b>\$865,576.65</b> |

## Revenue Summary

| Revenue Source                 | Secured      | Pending      |
|--------------------------------|--------------|--------------|
| Montana Opioid Abatement Trust |              | \$500,000.00 |
| HRSA Grant                     | \$298,448.00 |              |
| DPHHS                          | \$29,000.00  |              |
| Montana Board of Crime Control | \$38,000.00  |              |
| Totals                         | \$365,448.00 | \$500,000.00 |

| Description  |
|--|
| Provide lived-experience mentoring, advocacy, and recovery support to participants. Salary plus 25% fringe (\$41,280 salary per FTE and \$10,320 fringe per FTE) |
| Offers targeted family-centered support to families impacted by substance abuse. Salary plus 25% fringe (\$34,752 salary and \$8,558 fringe)                     |
| Offers targeted family-centered support to families impacted by substance abuse. Salary plus 25% fringe (\$34,752 salary per FTE and \$8,558 fringe)             |
| Oversees program operations, supervises staff, ensures compliance, and delivers outcomes. Salary plus 25% fringe (\$36,000 salary, \$9,000 fringe)               |
| Provides counseling services for co-occurring mental health and substance abuse disorder. (\$44,000 salary, \$11,000 fringe)                                     |
| Delivers evidence-based addiction treatment, assessments, and individualize recovery plans. (\$40,000 salary, \$10,000 fringe)                                   |
| Supports pregnant and parenting individuals in recovery, bridging gaps between treatment, parenting needs, and sober living stability. (\$23,116 salary, \$5,779 |
| Seven laptops (\$4,872), four printers (\$2,159.96), AED (\$2,500).  |
| Six first aid kits (\$1,053.90), naloxone and fentanyl test strips (\$3,000), first aid  |
| Educational materials (\$8,000), arts and crafts supplies (\$1,500), job readiness   |
| Office supplies (\$5,000), marketing and advertising (\$800), postage/shipping   |
| State approved certified peer recovery support specialist training (\$1,200 per participant)   |
| Property lease for primary Drop-In services site.  |
| Electricity/gas (\$4,000), water/sewer (\$1,400), internet (\$1,800).  |
| Vivint security system (\$1,320), general liability insurance (\$5,000), cyber insurance   |
| Furniture (\$8,000), washer/dryer (\$2,000), small tools and equipment (\$3,000)   |
| Dues/subscriptions (\$3,500), printing/publishing (\$1,200), supplies & materials  |
| Contractual MAT Services through Western Skies Behavioral Health and Rimrock   |
| Provide supervision to peers, provide SUD/MH services to individual clients, manage billing for peer services through Simple Practice, administrative costs      |
| Crisis services, SUD/MH services, co-located services  |
| Evaluation, Continuous Quality Improvement, Data Collection and Reporting, Training  |
| 10% de minimis rate covering administrative/organizational support.  |
|  |

**Notes**

Primary grant request for personnel, supplies, and facilities tied to operation of RCO.

HRSA funding to support expanded recovery and behavioral health services.

To provide services to those ages 18 - 24 that are at risk of being houseless such as GED training, job training, life skills

Community contributions and year-end giving commitments.

\$865,448.00

INTERNAL REVENUE SERVICE  
P. O. BOX 2508  
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: **JUL 03 2019**

GREATER IMPACT INC  
C/O NATHAN SALO  
PO BOX 4199  
BOZEMAN, MT 59772

Employer Identification Number:  
82-1691384  
DLN:  
17053098333019  
Contact Person:  
THERESA L PAYNE ID# 17293  
Contact Telephone Number:  
(877) 829-5500  
Accounting Period Ending:  
December 31  
Public Charity Status:  
170(b)(1)(A)(vi)  
Form 990/990-EZ/990-N Required:  
Yes  
Effective Date of Exemption:  
June 01, 2017  
Contribution Deductibility:  
Yes  
Addendum Applies:  
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to [www.irs.gov/charities](http://www.irs.gov/charities). Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

GREATER IMPACT INC

Sincerely,

*Stephen A. Martin*

Director, Exempt Organizations  
Rulings and Agreements