



Idaho Sheriffs' Association

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December 01, 2025

Hon. Brad Little, Governor
Hon. Mike Moyal, Speaker of the House
Hon. Kelly Anthon, Senate Pro Tempore
Hon. Wendy Horman, Representative JFAC Co-Chair
Hon. Scott Grow, Senator JFAC Co-Chair

As Idaho's elected sheriffs, we are charged with protecting our communities, maintaining safe jail operations, and responding to behavioral-health crises across our counties. Today, we write to express our deep concern about the State of Idaho's decision to discontinue several key behavioral-health programs, effective December 1, 2025.

These reductions include:

Elimination of Assertive Community Treatment Teams (A.C.T. Teams). These teams work with people that are diagnosed with severe and persistent mental illness in our communities. We know from the history of the mental health system in Idaho, when these services are reduced or eliminated, we see an increase in crisis events, emergency room utilization and incarceration in county jails. These planned reductions eliminate A.C.T. Teams in Idaho.

Partial Hospitalization Programs (P.H.P.). This program enables people to safely transition back to the community when they are leaving inpatient treatment facilities or jails. Often, they may have mental illness and/or substance abuse. Discontinuing P.H.P. programs mean some will struggle to maintain recovery and end up back in jail, hospitalized, inpatient treatment facilities or dead.

Homes with adult Residential Treatment (H.A.R.T.) Removing funding for homes with built-in residential treatment means these homes become basic residential facilities, now lacking clinical stabilization in the facility. These people will reenter the already overburden crisis care system.

Early Serious Mental Illness (E.S.M.I) E.S.M.I. is an early psychosis program. Removing this program dumps all eligible people back into the overburdened crisis care systems; Emergency Rooms, E.M.S., Police, Sheriffs' Deputies, and Jails.

Intensive Outpatient (I.O.P.). Allows people to remain in their own surroundings and receive treatment to maintain stabilization in the community. Full hospitalization will likely result for anyone who is receiving these services when they are removed.

Peer Support. Makes a real difference for people who are navigating care systems in Idaho. They help people stay engaged with treatment and maintain a responsible quality of life. They also provide opportunities for people who have reclaimed their own lives to give back to the community they live in. Loss of these jobs is not only wrong, it will result in unfortunate outcomes for many.

When the State scales back behavioral-health funding, hospital capacity, or correctional treatment programs, Idaho sheriffs feel the impact first. Our deputies regularly serve as the initial point of contact for individuals experiencing psychiatric deterioration, substance-induced crises, and untreated severe mental illness. As upstream services reduce, more Idahoans fall into crisis—and when that happens, local law enforcement becomes the default responder. These decisions will increase: Call volumes for patrol deputies and emergency medical services, increased involuntary holds at emergency rooms, incarcerations in county jails, civil and criminal court cases, and negative outcomes for people who were otherwise stable in the community.

County sheriffs' offices, especially rural agencies, already operate with thin margins. The loss of these stabilization programs will not reduce the overall cost to the State of Idaho. Instead, it will shift those costs directly onto county budgets, jails, E.M.S. agencies, and local taxpayers, who will bear the operational and financial burden of managing the consequences.

We also know that once these functioning systems are disrupted, it will take substantially more time to build them back.

We acknowledge the State's budget challenges which are self-inflicted by an overly aggressive tax reduction stance of the Legislative Branch and a complicit Executive Branch continuing to reduce tax revenue creating a budget shortage. These reductions to mental health services represent a significant public-safety concern. As sheriffs, our foremost duty is to protect the people of Idaho. We urge State leadership to recognize the real-world public-safety consequences of these decisions and to work with counties to ensure Idahoans in crisis—and the agencies who respond to them—are not left without support.



Samuel Hulse
President, Idaho Sheriffs Association