



Virginia Department of  
Behavioral Health &  
Developmental Services


## Implementation Update on 2018 General Assembly Directives

Joint Commission on Health Care  
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Commissioner

### Presentation Overview

- DBHDS Goals
- 2018 General Assembly Initiatives
- What's Next –Innovation, Partnership, and Alignment
- Questions

DBHDS GOALS: Innovation, Partnership, Alignment				
<b>Expand Access to Services</b>	<b>Medicaid Integration</b>	<b>Strengthen Quality &amp; Accountability</b>	<b>Improve Facilities</b>	<b>Complete Roadmap for Future</b>
<ul style="list-style-type: none"><li>• Continue implementation of STEP-VA</li><li>• Increase availability of Permanent Supportive Housing (PSH)</li></ul>	<ul style="list-style-type: none"><li>• Ensure Medicaid expansion incorporates STEP-VA</li><li>• Complete BH Redesign (Farley Center) to create evidence and trauma informed MH services</li></ul>	<ul style="list-style-type: none"><li>• Implement DLA20 to monitor costs and outcomes in CSBs</li><li>• Overhaul performance contract with the CSBs</li><li>• Partner with DMAS, providers, and others to address BH workforce challenges</li><li>• Establish standards for BH jail services</li></ul>	<ul style="list-style-type: none"><li>• Partner with VHHA to reduce state hospital bed utilization</li><li>• Advance financial realignment: complete a needs assessment</li><li>• Continue detailed planning for new Central State Hospital</li></ul>	<ul style="list-style-type: none"><li>• Plan for the complete build out of STEP-VA services</li><li>• Develop long-range plan for right-sizing state hospitals</li></ul>
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2018 Interim Update
<p>Implementation of 2018 General Assembly Budget and Legislative Directives</p>

## Progress Implementing STEP Virginia

Item	FY19	FY20	Status
<b>Same Day Access (SDA)</b>	\$4.9M	\$5.9M	<ul style="list-style-type: none"> <li>25 CSBs have implemented SDA</li> <li>9 CSBs are scheduled to implement by the end of December 2018</li> <li>All CSBs will implement by June 30, 2019</li> <li>DLA 20 implemented January 2019, training is scheduled for the end of September</li> </ul>
<b>Primary care screening and monitoring</b>	\$3.7M	\$7.4M	<ul style="list-style-type: none"> <li>Provides support for all 40 CSBs</li> <li>Funds are phased in the first year</li> <li>Planning has begun for implementation Jan. 2019</li> </ul>
<b>Outpatient services</b>	\$0	\$15M	<ul style="list-style-type: none"> <li>Survey has been done of 40 CSBs to establish current baseline for outpatient services</li> <li>Planning for distribution of funds begins fall 2018</li> </ul>
<b>Detoxification services</b>	\$0	\$2.0M	<ul style="list-style-type: none"> <li>Provides support to phase in a statewide expansion of detoxification services at CSBs, planning begins fall of 2018</li> </ul>

## Addressing State Hospital Census

Item	FY19	FY20	Summary	Status
<b>Clinically appropriate housing options for individuals in state hospitals clinically ready for discharge</b>	\$1.75M	\$1.75M	<ul style="list-style-type: none"> <li>Funds will pay for group homes for individuals with complex and resource-intensive needs, who are ready to move to a more integrated setting</li> </ul>	<ul style="list-style-type: none"> <li>DBHDS has signed a contract with Gateway Homes and have begun accepting individuals from state hospitals (\$1.2M)</li> <li>Remaining balance will pay for housing and support services when individuals leave group homes, such as permanent supportive housing (\$500K)</li> </ul>
<b>Community Support Team</b>	\$0	\$1.0M	<ul style="list-style-type: none"> <li>To assist housing providers addressing complex needs of individuals</li> </ul>	<ul style="list-style-type: none"> <li>Positions are funded to start in FY2020</li> </ul>
<b>Discharge Assistance Planning (DAP)</b>	\$2.3M	\$4.6M	<ul style="list-style-type: none"> <li>Transition individuals on the Extraordinary Barriers to Discharge List at state mental health facilities,</li> </ul>	<ul style="list-style-type: none"> <li>95% of DAP funding has been allocated to the Regions to use based upon historical trends, the remaining 5% is being held in reserve to for evolving needs.</li> </ul>

## Administrative Actions: Addressing State Hospital Census

**VHHA Partnership:**


- Regular monthly meetings between behavioral health leadership
- Plans to:
  - Ensure adherence to doctor-to-doctor communication for individuals with medical issues
  - Adopt procedures to escalate admission denials to appropriate facility administrators as needed
  - Identify trends in the reasons for denial by private hospitals and implement targeted remedial measures

**Other Actions:**

- Established bed search expectations for CSBs that are included in the Performance Contract and reviewed as part of DBHDS' quality oversight process
- Developed contracts with two private hospitals which provide for the admission of individuals who would otherwise go to state hospitals
- Require state funded crisis stabilization programs to admit individuals under a TDO and to operate at no less than 75% of capacity
- Ensures that emergency services workers consult with developmental disability professionals on any individual with a developmental disability in crisis prior to recommending a TDO

## Behavioral Health Community Response

Item	FY19	FY20	Summary	STATUS
<b>Permanent Supportive Housing</b>	\$1.5M	\$3.1 M	• Up to 9 existing PSH programs and implementing 2-5 new PSH programs to serve up to 200 new individuals (adults) with SMI	• Funding proposals are under review
<b>Appalachian Tele-mental health Initiative</b>	\$1.1M	\$1.1M	• Establishes a tele-mental health provider directory, train mental health providers, develop IT infrastructure and extend an EBP managing patients with addiction disorders	• Contracting with UVA Mid-Atlantic Telehealth Resource Center to advance project.
<b>Alternative Transportation</b>	\$2.5M	\$4.5M	• A statewide program for children and adults under a Temporary Detention Order,	• DBHDS is currently developing a Request for Proposal for late summer/early fall
<b>SB 555 (Mason) Barrier Crimes</b>	N/A	N/A	• Adds burglary to screenable list of crimes for employment in adult MH or SUD services	• DBHDS has incorporated into current background check processes
<b>HB 569 (Gooditis) Suicide prevention</b>	N/A	N/A	• DBHDS to report on suicide prevention efforts to the Governor and General Assembly by December 1	• Staff are in the process of reviewing key information and drafting



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## Replacing Central State Hospital

### Pre-Planning Initiative

Required to conduct a pre-planning study for the replacement under the leadership of the Department of General Services (DGS). The study is to be conducted in cooperation with DBHDS and is expected to deliver the following outputs:

- Updated programmatic requirements for the building, site and utilities
- Recommended budget estimates of cost based on the defined requirements
- Recommend phasing options as required by the General Assembly with associated descriptions of components, costs and associated schedules
- A completed study for consideration by the General Assembly no later than December 1, 2018
- This request will be updated at the appropriate time once the pre-planning study is completed and available.
- Total Project Cost: \$250M - \$300M



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## Justice Involved Behavioral Health

Item	FY19	FY20	Summary	Status
<b>Crisis Intervention Training</b>	\$1.6M	\$2.5M	<ul style="list-style-type: none"> <li>• Adds 6 CIT assessment sites and training programs in unserved rural communities</li> </ul>	<ul style="list-style-type: none"> <li>• Notice of funds availability week of August 13th. Applications due September 28<sup>th</sup></li> </ul>
<b>Jail Discharge Planning</b>	\$1.6M	\$1.6M	<ul style="list-style-type: none"> <li>• Funding for CSB staff positions</li> </ul>	<ul style="list-style-type: none"> <li>• Notified CSBs that serve top 5 jails with highest proportion of SMI about funding. Applications due Sept 3rd</li> </ul>
<b>Jail Diversion Program</b>	\$708,663	\$708,663	<ul style="list-style-type: none"> <li>• Directs the establishment of an Intercept 2 diversion program in up to three rural communities each year</li> </ul>	<ul style="list-style-type: none"> <li>• CSBs were notified of funding availability. Applications due August 20<sup>th</sup></li> </ul>
<b>HB 52 (Hope) Competency and sanity evaluations; location of evaluation.</b>	N/A	N/A	<ul style="list-style-type: none"> <li>• Requires evaluations to determine whether a person is competent to stand trial or to determine a person's sanity at the time of the commission of a criminal offense be conducted on an outpatient basis</li> </ul>	<ul style="list-style-type: none"> <li>• DBHDS has sent notices to courts, Commonwealth Attorneys, defense attorneys, and state hospitals regarding the impact of this bill</li> </ul>
<b>HB 53 (Hope) – NGRI: Location of evaluation</b>	N/A	N/A	<ul style="list-style-type: none"> <li>• Developed a system to provide outpatient Temporary Custody evaluations throughout the Commonwealth. We will save approximately 100 state hospital bed days per evaluation.</li> </ul>	<ul style="list-style-type: none"> <li>• DBHDS has received one order to perform such evaluations and are mid-way through the process.</li> </ul>

## Electronic Health Records


Item	FY19	FY20	Summary	STATUS
<b>Implement electronic health records at remaining DBHDS facilities</b>	\$5.1 M	\$5.1 M	<ul style="list-style-type: none"> <li>Development and roll out costs at the remaining behavioral health facilities and SEVTC. This is to cover the budget shortfall needed for implementation of EHR across the agency and is based on implementing the Cerner Millennium product.</li> </ul>	<ul style="list-style-type: none"> <li>Contract anticipated to be signed October 2018 with full roll out at all DBHDS state hospitals and SEVTC January 2021.</li> </ul>
<b>SHHR Interagency Workgroup to develop a statewide integrated EHR system</b>			<ul style="list-style-type: none"> <li>Interagency workgroup to oversee the development of a statewide integrated EHR system.</li> </ul>	<ul style="list-style-type: none"> <li>DBHDS is currently proceeding with the Millennium project and actively participating in interagency workgroup.</li> <li>The report is due October 15, 2018</li> </ul>

## Addressing Virginia's Addiction Epidemic

STRATEGY	FY19	FY20	SUMMARY
<b>Increasing Access to Treatment</b>			
Medication Assisted Treatment (MAT)	\$5M	\$5M	Replaces federal grant funding at CSBs for individuals with opioid use disorders. HB 5002 replaced the \$5.0 million FY 2019 GF appropriation with federal funds from the recently renewed STR grant in FY 2019 only. <i>A portion must be used for non-narcotic drug treatment regimens for individuals who are justice-involved.</i>
Improving access to addiction treatment HB 155/ SB 329 (McQuinn/Dunnivant)			Removes a licensing restriction for facilitates that provide opiate addiction treatment by Methadone or other opioid replacements in Henrico Cty., City of Newport News, and City of Richmond.
<b>Permanent Supportive Housing-Maximizing Recovery Potential</b>			
Permanent Supportive Housing (PSH) for Pregnant and Parenting women	\$862,000	\$1.7 M	For up to 75 pregnant or parenting women with substance abuse disorders. DBHDS is working with stakeholders and national experts to develop its PSH model for pregnant and parenting women with substance use disorders.

## Progress in the DOJ Settlement Agreement

SETTLEMENT AGREEMENT	FY 19	FY 20	SUMMARY	STATUS
<b>Crisis Homes</b>	\$2.4M	\$3.2M	<ul style="list-style-type: none"> <li>• Funds an adult transitional home to address capacity at the adult Crisis Therapeutic Home (CTHs) and a children's CTH to divert unnecessary hospitalization.</li> </ul>	<ul style="list-style-type: none"> <li>• Homes are underway and anticipated to open in 3<sup>rd</sup> Quarter FY 2019.</li> </ul>
<b>Rental Assistance</b>	\$1.6M	\$4.1M	<ul style="list-style-type: none"> <li>• Rental assistance for individuals with Developmental Disability (DD) within the Department of Justice (DOJ) Settlement Agreement (SA)</li> </ul>	<ul style="list-style-type: none"> <li>• Serving approximately 343 individuals .</li> </ul>
<b>Developmental Disability Health Support Network</b>	\$0M	\$1.3M	<ul style="list-style-type: none"> <li>• Providing dental, health, and technical assistance to those transitioning into the Community from Central Virginia Training Center.</li> </ul>	<ul style="list-style-type: none"> <li>• Funding supports extension of the Health Support Network.</li> </ul>




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## Developmental Disabilities Waivers

- DBHDS received \$15.4M in FY19 and \$37.4M in FY20 for waiver slots. DBHDS has remixed slots across three waivers to allow more slots to be distributed, as the more expensive CL slots are swapped for more slots in the less expensive waivers. The remix increases the number of authorized slots over the biennium from the 825 included in the Governor's Budget to 1,319.
- DBHDS has plan to eliminate Priority 1 wait list by FY 2022 based on current funding, future remix of Settlement Agreement slots, and turnover slots.

Priority One Waitlist by Year		
Fiscal Year	# of Individuals Waiting	% Change to FY18 Base
FY 2018	3,451	
FY 2019	2,878	-17%
FY 2020	1,642	-52%
FY 2021	497	-86%
FY 2022	2	100%



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## What's Next?

# Innovation, Partnership, Alignment

## Grant Overviews

### State Targeted Response (STR) 2017-2018

- Virginia received \$9,762,332 each year in 2017 and 2018 to address the opioid epidemic.
- Three goals: Decrease overdoses, Increase the number of individuals receiving treatment and increase the number receiving recovery services
- Programs include: Prevention, Treatment, and Recovery
- Emphasize partnerships across state and local agencies, secretariats, and local governments to align efforts, maximize resources and effectiveness.
- The second year of STR programming sustains Year 1 programming and includes several new opportunities.

### State Opioid Response (SOR) 2018-2019

- SAMHSA grant opportunity for \$15 million for September 2018-September 2019.
- Would sustain STR projects and includes several new projects.
- Partnerships with DOC, local jails, FQHCs, and VDH.
- Program highlights include warm lines for prescribers, ED pilots, pilots with DOC to include Vivitrol.
- Application was submitted August 12th and notification is anticipated September 29.



## Behavioral Health Medicaid Transformation

### DMAS and DBHDS Partnership

- Will result in implementation of a system redesign that addresses all Medicaid mental health services regardless of who provides them – private or public (CSB)
- Will ensure evidence-based, trauma-informed Medicaid mental health continuum of care that supports STEP-VA
- University of Colorado Farley Center for Health Policy will support DMAS and DBHDS, in coordination with stakeholders, in developing a comprehensive system reform plan for Medicaid community mental health services
- The continuum of Medicaid mental health services must be evidence-based and trauma-informed
- Medicaid-covered behavioral health services will incorporate STEP-VA into a continuum of evidence-based, trauma-informed, and preventive-focused services available in many settings where individuals present
- The redesigned continuum will provide those receiving Medicaid services with a more seamless healthcare experience starting with early intervention services.

## Contact Information

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