JLARC ongoing review of HHR

- 2018 Appropriation Act requires ongoing review and evaluation of HHR agencies and programs
- Study topics directed by JLARC, in consultation with the Joint Subcommittee for HHR Oversight
- Members and committees may request studies by letter to the JLARC chair
# 2019 HHR Projects

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STEP-VA: Background

- STEP-VA initiated during 2017 session
  - Expands required services at all CSBs
  - Goal of providing consistent access to quality services and increasing accountability statewide

- Legislation requires full implementation by July 2021
  - Same-day access and primary care screening required to be implemented by July 2019
STEP-VA: Key questions

- To what extent is initial implementation enabling CSBs to meet STEP-VA’s overall goals?
- Is there an adequate plan in place to support the full implementation of STEP-VA by July 2021?
STEP-VA: Key findings

- Same-day access has reduced wait times for assessments, but the availability of same-day access hours varies and is not adequately being measured.
- Seven of nine steps remained to be implemented by July 2021.
- More time and increased oversight capacity at DBHDS is needed to effectively implement remaining steps.
STEP-VA: Recommendations

- **DBHDS should:**
  - develop performance measures to determine if each CSB offers enough same-day access hours and if individuals are assessed on the same day
  - devote a senior-level staff person to STEP-VA implementation on a full-time basis

- **General Assembly may wish to consider:**
  - allowing DBHDS to use a portion of future STEP-VA funding allocation for central oversight functions
  - providing an additional year for STEP-VA implementation (July 2022)
  - requiring that sufficient planning for future steps be complete before funds are disbursed
CSB Funding: Background

- Medicaid fees (Federal and state funds): 34%
- State and federal non-Medicaid funds: 33%
- Local funds: 23%
- Other funds: 10%

Total funding through DBHDS:
- $420M
  - No DBHDS discretion: $64M
  - DBHDS has discretion: $356M
CSB Funding: Key questions

- How much total funding does each CSB receive?
- What criteria is DBHDS using to allocate state and federal funding sources?
- What alternative funding models are used by:
  - public behavioral health services in other states?
  - other public services in Virginia?
- What are the potential impacts of using alternative models to fund public behavioral health services in Virginia?
CSB Funding: Key findings

- DBHDS allocates most state and federal funding based on historical CSB budgets rather than current need for services
  - Several different funding models could be considered to better support Virginia’s goals
- DBHDS funding allocations do not account for Medicaid reimbursements or local funding
CSB Funding: Recommendations

- DBHDS should:
  - work with DMAS and the CSBs to analyze whether CSBs are maximizing potential Medicaid reimbursements
  - account for Medicaid reimbursements that CSBs can receive when allocating state and federal funds
Medicaid Expansion: Background

- 2018 Appropriations Act authorized DMAS to
  - expand Virginia’s Medicaid program
  - pursue federal authority to implement three reforms, through what is now called the COMPASS waiver

- Medicaid expansion started on January 1, 2019
  - Expected to enroll more than 300K new Virginians, at a cost of $2.4B in non-general funds in FY20
  - Funded through federal reimbursement and hospital tax
Access to Services: Key questions

- Are Medicaid provider networks sufficient to ensure access to health-care services?
- Are there strategies Virginia can use to better ensure Medicaid enrollees have access to health care?
Eligibility Determination: Key questions

- Is eligibility for Medicaid being determined in a timely manner given the increased workload for Medicaid expansion?
- Are Virginia’s policies and processes ensuring accurate eligibility determinations?
Spending and Enrollment: Key questions

- How has Medicaid spending and enrollment compared to projections for FY19?
- Did Virginia realize expected general fund savings in other programs as a result of Medicaid expansion?
COMPASS Waiver: Key questions

- What is the status of the CMS review process for the COMPASS waiver application?
- What progress has been made in planning for the implementation of the COMPASS waiver?
- What is the status of lawsuits in other states related to Medicaid work and community engagement requirements?
Questions?

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