

Governor's Budget Proposal for DBHDS

Senate Finance – HHR Subcommittee

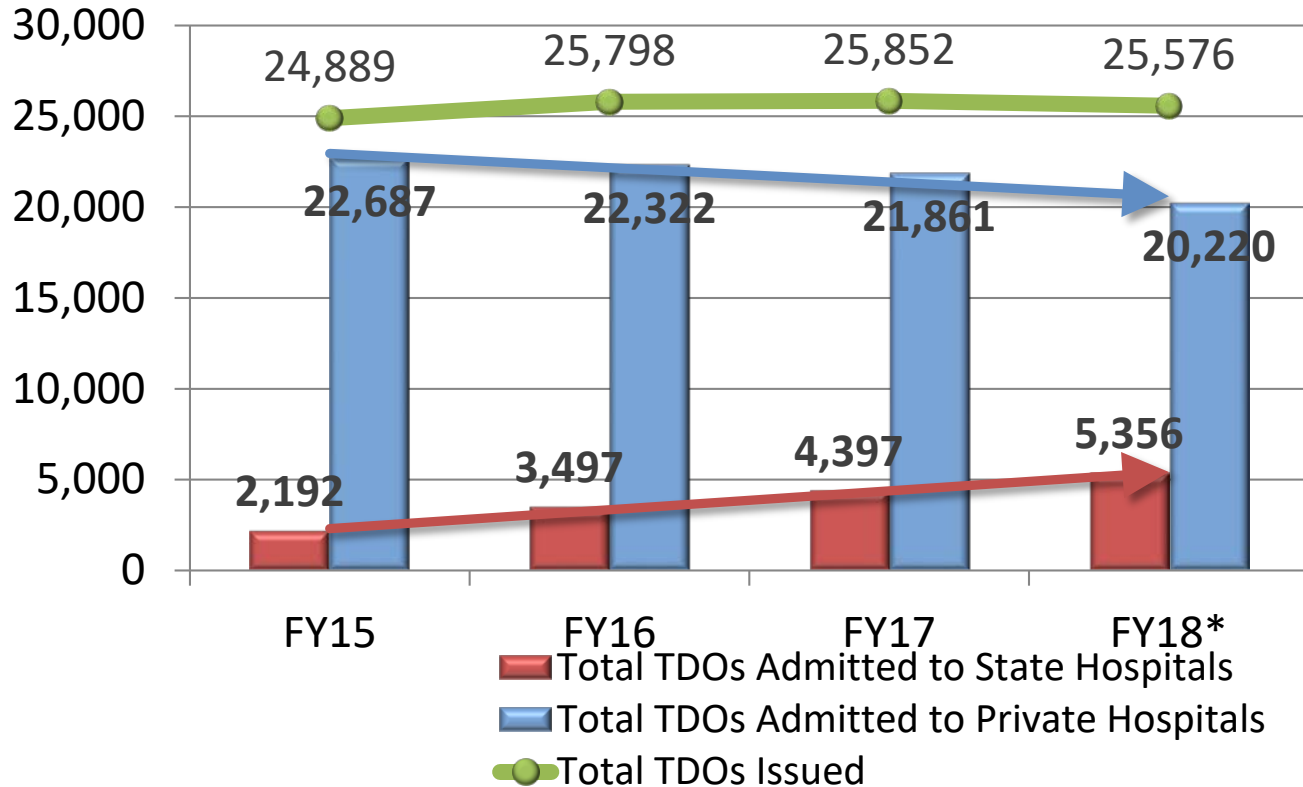
January 07, 2019

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Commissioner
Virginia Department of Behavioral Health
and Developmental Services

Budget Items Overview

Actions to Address High Census at State Facilities	FY 2019 GF (in millions)	FY 2020 GF (in millions)
Bed Census Management – MH Hospital Operations / Staffing	-	\$7.9
Bed Census Management – DAP and CCCA	-	\$6.0
Permanent Supportive Housing	-	\$2.1
Crisis Services	-	\$9.0
Obligations Requiring Funding		
DOJ Settlement Agreement/ Part C	\$0.4	\$0.8
Piedmont & Catawba Hospitals Certification – Disallowance	-	\$27.3
Other Amendments		
Opioids / Substance Use Disorders	\$1.6	\$1.6
System Oversight/ VMAP	-	\$1.4
Operating TOTAL	\$2.0	\$56.1

Statewide TDOs and Hospital Admission Trends



- Civil TDO have increased **294%** since FY 2013.
- **70%** of admissions are Civil TDOs.
- **1,000** additional individuals admitted each year to state facilities.
- Census of licensed beds 93%, but staffed beds 127%.

MH Hospital Operations

Support Critical Staffing MH Hospitals	FY 2019 GF	FY 2020 GF
Support 254 additional direct care staff positions (nurses, psychiatrists, and DSAs) – operate at 90% capacity	-	\$7.9 million

- State hospitals currently funded and staffed to operate at 85% capacity. When they consistently operate at more than 90% of licensed bed capacity, they are operating at >120% staffed bed capacity.
- \$7.9 million for 254 FTEs is critical for safety and quality care in state hospitals (81 RNs, 103 LPNs, 62 DSAs, 8 Psychiatrists). Total cost for the 254 positions is \$20 million, offset by \$12 million of projected overtime savings resulting in final cost of \$7.9 million.

Bed Census Management

Expand Transitional Assistance (DAP)	FY 2019 GF	FY 2020 GF
Support transition to community settings of approximately 100 individuals	-	\$5.2 million

- In FY 2017, an average of 185 individuals were on the EBL each month. In FY 2018 it decreased to 167 individuals; but this still takes up **11.8% of all state hospital beds**.
- 86% of the time a lack of housing keeps someone on the EBL
- \$5.2 million in additional **DAP** (Discharge Assistance Planning) is needed to maintain state hospital census growth rate at 2%
- DAP is helping 550 new individuals each year transition to the community; DAP plans have grown by 73% since FY 2013

Bed Census Management

CCCA Alternative Settings	FY 2019 GF	FY 2020 GF
Provide six beds in a residential setting for children/youth at CCCA for whom there are no community based alternatives	-	\$850,000

- **Last year alone** CCCA had a 51% increase in the number of TDO admissions, growing from 636 in FY17 to 961 in FY18
- These funds are critical to managing CCCA's census during peak admission times

Other Community Supports- PSH

Increase Permanent Supportive Housing (PSH)	FY 2019 GF	FY 2020 GF
Create an additional 150 permanent supportive housing units for individuals with serious mental illness.	-	\$2.1 million

- DBHDS' PSH is producing very positive cross-systems outcomes, including a 94% housing stability rate and 12 month post-PSH reductions in local hospital and jail utilization.

Cost Type	Change in Utilization	Cost Avoidance
State Hospital	- 89.2%	\$1.72 million
DMAS Emergency Department Claims	- 73.7%	\$855,796
Local Jail	- 48.0%	\$57,470

- Rental assistance and housing supports funded through this initiative are critical to interagency efforts to develop more affordable PSH units for DBHDS priority populations.

Community Supports - Crisis Services

Support Crisis Services	FY 2019 GF	FY 2020 GF
Expand crisis services for dually-diagnosed (MH and DD) children and adults and those who present with cognitive impairments without an established diagnosis	-	\$9.0 million

- **CHILD \$5.2 M**: Combines into cross-disability, children BH and DD crisis services to enhance mobile crisis and crisis stabilization service array to children to reduce out-of-home placements
- **ADULT \$ 3.8 M**: Expand community based mobile crisis teams DD, DD-MI and individual with Cognitive Challenges-MI
 - Expand capacity of existing REACH Teams
 - Enhance linkages with Emergency Services to reduce hospitalization
 - The expansion of these services is inline with STEP VA initiatives

Developmental Disability Waivers and Waitlist

DD Waitlist as of 1.3.2019

Priority	# of Individuals
Priority One	3,227 (25%)
Priority Two	5,724 (45%)
Priority Three	3,838 (30%)
Total Waitlist	12,789



- DBHDS assumes growth in the P1 waitlist can be offset by turnover.
- Approximately 1,032 of the approved FY20 slots can be used to offset P1 waitlist (accounting for slots designated to reduce facility census).
- P1 waitlist less FY20 available slots = **2,195 slots needed.**
- DBHDS approximates that the majority of the identified need can be met with services on the FIS waiver.

DD Waivers as of 1.3.2019

Waiver Type	Current number of Appropriated Slots (through FY 2019)	Approved in GA for future year (FY 2020)	Total Appropriated Slots (through FY 2020)
Community Living (CL)	11,516 (82%)	220	11,736
Family and Individual Supports (FIS)	2,176 (15%)	807	2,983
Building Independence (BI)	360 (3%)	40	400
Total Waivers	14,052	1,067	15,119

DD / DOJ Settlement Agreement

Continue SIS Assessment	FY 2019 GF	FY 2020 GF
Provide necessary resources for SIS assessments for new waiver population	-	\$81,279

- Provide ongoing funding for the first-time assessments of the 1,067 new waiver slots appropriated as part of the FY 2020 budget
- Adjust re-assessment cycle to cover on going costs

DBHDS Trust Fund	FY 2019 NGF	FY 2020 NGF
Appropriate the remaining available funds (\$2.5 million NGF) from the sale of state facilities to support employment assistance training efforts, start-up costs for a new children's Crisis Therapeutic Home (CTH), and the construction of a new REACH Crisis Home	-	\$2.5 million

Early Intervention Program Part C

Early Intervention Part C	FY 2019 GF	FY 2020 GF
Address growth in the number of children served by Part C Early Intervention Program for Infants and Toddlers	\$459,258	\$661,288

- This federally funded program meets the developmental needs of infants, toddlers, and their families and this addresses the projected deficit for the program due to growing enrollment – in SFY 2018 program served 20,202 unique infants and toddlers.
- From 2009 to 2018, program enrollment grew by 73% and will grow an additional 11% by 2020
- Eight local Early Intervention Part C programs have reported that they expect a possible deficit of \$1 million by the end of SFY 2019. The budget request addresses this fiscal deficit.

DBHDS Plan for Piedmont Geriatric and Catawba

Current Operations and Certifications

Purpose (Service Delivery):

Psychiatric Treatment and Care

Current Certification:

Long Term Care Hospitals

Piedmont Operational Beds: 123

Catawba Operational Beds: 110

Future Operations and Certifications

Purpose (Service Delivery):

Psychiatric Treatment and Care

Future Certification:

Psychiatric Hospitals certified under
the Special Conditions of
Participation with CMS

Piedmont Operational Beds: 123

Catawba Operational Beds: 110

- Unless appeals process is granted by CMS, DBHDS will no longer be able to bill as a long term care hospital. The Governors budget contains \$27.3 million GF to cover lost revenue.

Piedmont Geriatric & Catawba Hospitals

Piedmont & Catawba Medicaid Disallowance	FY 2019 GF	FY 2020 GF
Provide for the continued of operations of Piedmont Geriatric and Catawba Hospitals.	-	\$27.3 million

- DMAS and DBHDS have engaged in extensive discussions with CMS and retained national consultants to explore alternative certifications.
- The only viable alternative identified is certification under the Special Conditions of Participation consistent with other DBHDS hospitals and will result in a annual net \$27.3 million decrease in Medicare/Medicaid reimbursement.

	Operating Budget	Beds	# of Staff
Piedmont	\$30.8 million	123	350
Catawba	\$25.0 million	110	250

Opioids/Substance Use Disorders

Naloxone Kits (REVIVE)	FY 2019 GF	FY 2020 GF
Provide funds for the purchase and distribution to first responders and high risk individuals of REVIVE! kits and naloxone spray used for the reversal of opioid overdose.	\$1.6 million	\$1.6 million

- First General Fund appropriation for REVIVE! or naloxone since the initial allocation of \$10,000 for the pilot in 2013.
- Most of these funds will be used to support actual purchase of naloxone spray, a product which was not available when REVIVE! was initiated.
- High risk individuals include those recently released from emergency departments, jails and prisons, the homeless and the uninsured.

VMAP - a statewide Mental Health Access Program

Virginia Mental Health Access Program (VMAP)	FY 2019 GF	FY 2020 GF
Provides funds to contract with the Virginia Mental Health Access Program to develop integrated mental health services for children.	-	\$1.2 million

Key objectives of the Virginia Mental Health Access Program:

1. **Education for PCPs** on screening, diagnosis, management and treatment
2. **PCP telephonic/video consults with regional VMAP teams** comprised of child and adolescent psychiatrist, psychologist and/or social worker
3. **Telehealth visits** with psychiatrists or psychologists
4. **Care coordinators** to help identify regional mental health resources

System Oversight

Fund Sterilization Compensation	FY 2019 GF	FY 2020 GF
Restore victims of eugenical sterilization compensation base appropriation	-	\$75,000

- For eligible individuals who have made claims or who may make in the future
- Many of the claimants are elderly and otherwise may need to wait a year for fund replacement

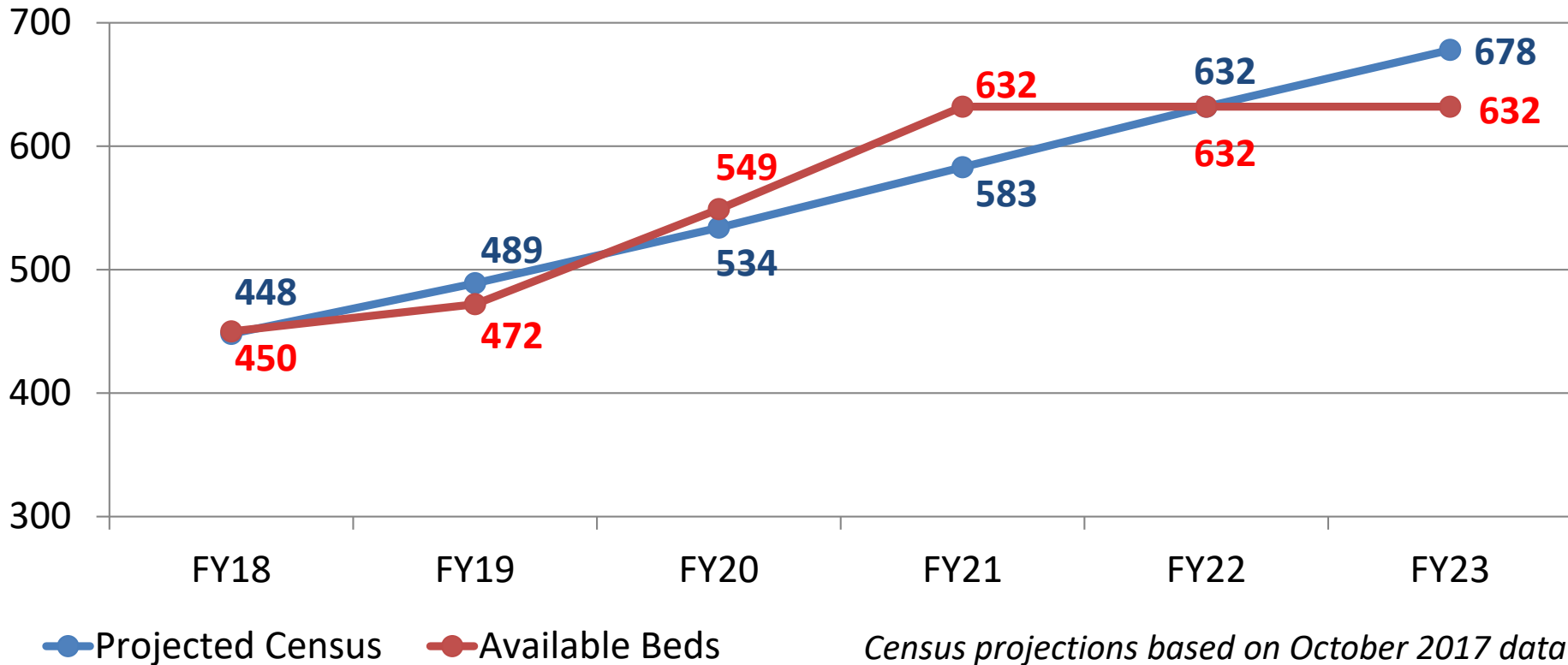
Support Juvenile Competency Restoration	FY 2019 GF	FY 2020 GF
Support juvenile competency restoration services to address the increasing number of court orders in Virginia	-	\$74,250

- Between FY 2013 and FY 2018 experienced 51% increase in number of children served each year, 15% in the last 12 months alone.
- Per §16.1-357 DBHDS is required to arrange for the provision of restoration services to juveniles adjudicated incompetent to stand trial. DBHDS accomplishes this through contracts with CSBs/providers and by its own staff. It's becoming harder to find willing providers so these funds provide one position to handle increasing work load.

Age of Facility Structures

Facility and Building	Avg. Age	0-10 yrs.	11-20 yrs	21-30 yrs	31-40 yrs	41-50 yrs	51-60 yrs	61-70 yrs
Catawba Hospital	64 yrs							
Central State Hospital	56 Yrs							
Commonwealth Center for Children and Adolescents	21 Yrs							
Eastern State Hospital	10/56 Yrs	treatment	support buildings					
Hiram W. Davis Medical Center	43 Yrs							
Northern Virginia Mental Health Institute	21/52 Yrs	addition			original building			
Piedmont Geriatric Hospital	68 Yrs							
Southeastern Virginia Training Center	5 yrs.							
Southern Virginia Mental Health Institute	47 Yrs							
Southwestern Virginia Mental Health Institute	26/71 Yrs	treatment			support			
Western State Hospital	4 Yrs.							
Virginia Center for Behavioral Rehabilitation	9 Yrs.							
Less than 20 years old				Less than 20 years old				
Over 20 but less than 30				Over 20 but less than 30				
Over 30- needs renovation or replacement				Over 30- needs renovation or replacement				

Projected VCBR Census vs Existing and Expansion Beds (FY 2018 – FY 2023)



DBHDS Capital Projects

Renovation of Catawba Hospital (\$15.1 million)

- Renovations needed to sustain operations for the next 10 years include such things as:
 - Replacing heating, air conditioning, and ventilation systems
 - Harden ceilings, replace floors and lights,
 - Renovate kitchen, bathrooms, and nursing stations
 - Improvement to water and boiler plant

Central State Hospital Detailed Planning (\$16.0 million)

- Build a new 300 bed hospital

Eastern State Hospital Phase II Detailed Planning (\$2.2 million)

- Required to complete Phase III of the new ESH built in 2011 and includes:
 - Replacement of food services building and equipment which are at risk of imminent failure
 - Consolidates administrative support and human resource operations
 - Provides for warehouse, buildings and grounds, and other critical support services

VCBR Furniture, Fixtures and Equipment (\$10.6 million)

- Required for the 182 bed addition funded in 2016 to provide needed bed space