

# **Joint Subcommittee to Study Mental Health Services in the Commonwealth in the 21st Century**

## **WORK GROUP # 1: SYSTEM STRUCTURE AND FINANCING**

Tuesday, May 17, 2016

General Assembly Building, Richmond, Virginia

The Joint Subcommittee to Study Mental Health Services in the Commonwealth in the 21st Century's (the Joint Subcommittee's) System Structure and Financing Work Group held its first meeting of the 2016 interim on Tuesday, May 17, 2016, at the General Assembly Building in Richmond.

### **Introductions and Opening Remarks; Remarks of the Secretary of Health and Human Resources**

Following the call to order and introductions, the work group invited Secretary of Health and Human Resources Bill Hazel to speak about mental health services. Secretary Hazel began by noting the fragmented nature of publicly funded mental health services and other health and human services in the Commonwealth and calling for greater coordination among the various agencies and systems providing these services. He identified the Certified Community Behavioral Health Center (CCBHC) model as a promising approach to the delivery of coordinated services that will improve system efficiency and outcomes for individuals receiving services and requested General Assembly support. Senator Deeds suggested that the Joint Subcommittee could work with Secretary Hazel to prepare a general plan for moving the Commonwealth toward the CCBHC model during the 2016 interim and encouraging the General Assembly to approve and support the plan during the 2017 Session. More detailed planning would be completed during the 2017 interim.

In response to a question from Delegate Farrell, Secretary Hazel identified several strengths and weaknesses of the existing mental health service system. He pointed to the variability in services provided by community services boards across the Commonwealth, as well as in the quality of public mental health services staff. However, a number of challenges lead to difficulty in retaining qualified staff. Another challenge is the focus on crisis services: While the Commonwealth has developed a robust system of emergency services, fewer resources have been put into developing services to prevent emergencies and keep individuals from experiencing crisis. Additionally, existing methods of funding public mental health services limit the ability of community services boards to develop the full range of services that individuals in their communities might need. Finally, data collection and analysis could be improved.

### **Overview of the Purpose and Scope of the Work Group**

Staff provided an overview of the purpose and scope of the work group. The work group was created by the Joint Subcommittee to evaluate the existing publicly funded mental health

service system, including the types of services provided by the publicly funded mental health service system, the organization and structure of the publicly funded mental health service system through which such services are provided, and the oversight and control of the publicly funded mental health service system, and to make recommendations for reform of the existing publicly funded mental health service system to ensure consistent delivery of a full array of high-quality mental health prevention, treatment, and recovery support services across the age range in a timely and effective manner throughout the Commonwealth. Specific topics that the work group might consider include:

- The appropriate degree of centralization or decentralization of the system;
- The appropriate balance of community-based and institutional services;
- The types of services to be provided to ensure appropriate access to the full array of services for children, adolescents, young adults, adults, and elderly adults;
- Methods of ensuring timely access to appropriate services;
- Appropriate oversight of services, including the quality of services and service outcomes; and
- The cost of reforms to the existing system necessary to implement changes recommended by the work group and options for financing such changes.

Senator Emmett W. Hanger, Jr., has been appointed to serve as the chairman of the work group. The other members of the work group are Senator R. Creigh Deeds and Delegate Peter F. Farrell.

### **Update on Activities of the Expert Advisory Panels**

Staff also provided an update on the activities of the expert advisory panels in the absence of Professor Richard J. Bonnie, who has been charged with overseeing the creation and work of the expert advisory panels and who was unable to attend the work group meeting.

#### Work of the Expert Advisory Panels

At its first meeting of the 2016 interim, the Joint Subcommittee announced the creation of four expert advisory panels, one for each of the Joint Subcommittee's four work groups. The purpose of the expert advisory panels is to provide research assistance and other support to the work groups as they carry out their work during the 2016 and 2017 interims. All four expert advisory panels have held at least one meeting, some in person and others by conference call, and are working to develop work plans, identify research priorities, and begin collecting information. Expert advisory panel chairs are also participating in monthly conference calls to communicate with each other and Joint Subcommittee staff to coordinate panel and work group activities.

## Research Activities

Through a contract with the Department of Behavioral Health and Developmental Services (DBHDS) and with funding provided by DBHDS, the Institute of Law, Psychiatry and Public Policy at the University of Virginia, of which Professor Richard Bonnie is the Director, has assembled a research team that includes public health data analysts, a health economist and several graduate students in public policy, law, and public health to provide research support to the expert panels and the work groups. The research team has already begun work, planning structured interviews with the directors of every community services board in the Commonwealth beginning in June and preparing a detailed written survey to collect information about emergency services from community services boards' Emergency Services Directors that will be distributed in July. The research team is also preparing an updated report on the impact of legislative changes affecting the delivery of mental health services, particularly emergency services, during the 2014 Session of the General Assembly as well as a study of emergency department waiting times for community services board prescreening evaluations. Updates on the activities of the research team will be provided to the work groups and the Joint Subcommittee regularly, and members of the work groups are encouraged to identify research topics for the research teams moving forward.

## System Structure and Financing Expert Advisory Panel

The System Structure and Financing Expert Advisory Panel (the Panel), chaired by Professor Richard Bonnie, met for the first time on April 12, 2016. At the meeting, Panel members discussed challenges affecting the existing public mental health service system; options for organization of a more efficient public mental health system; various options for funding of the public mental health system, including expanded access to Medicaid; the need for coordination among and across agencies and secretariats and between the executive and legislative branches of state government to facilitate the successful reform and ongoing operation of the public mental health service system; the need for leadership in the development of mental health policy, coordination of education and information about challenges affecting the public mental health service system and solutions that can resolve those challenges, and oversight of implementation of strategies and solutions on an ongoing basis; and other factors affecting the delivery of public mental health services. Moving forward, the Panel plans to look more closely at (i) how the public mental health service system is structured in other states to identify alternative service system models; (ii) examples of state-local service system structures in the Commonwealth, including the public health system, the social services system, and the public school system; and (iii) the content of performance contracts between the DBHDS and the community services boards.

## **Discussion of 2016 Work Plan**

At the end of the meeting, the work group discussed its work plan for the 2016 interim. Staff presented a draft work plan setting out several items for further study. These include

consideration of what the overarching service system structure should look like, the types of services to be provided, ways to improve the delivery of those services, and how the system is to be financed. Specific issues to be studied might include the balance of state and local authority and control over the delivery of mental health services; the role of private contracted providers of services; target populations and the provision of services across the lifespan; the appropriate mix of inpatient and outpatient services, voluntary and involuntary services, and crisis and prevention services; ensuring adequate availability and accessibility of services; ensuring quality of services; ensuring continued delivery of services to individuals in transition, including individuals transitioning from involuntary to voluntary services, inpatient to outpatient services, and between localities; and coordination between various service systems, including the public mental health service system, the criminal justice system, the educational system, and the social services system.

At the request of the work group, members of the audience identified various issues that the work group might wish to explore further. These included the need to understand the role of localities and the contributions of the private sector in funding mental health services; the need to understand the relationship between private providers and the public mental health system; challenges posed by uninsured individuals in need of mental health services; the impact of the Governor's Access Plan program; and potential costs and benefits of expanding Medicaid.

Looking forward, the work group agreed that a presentation on the financing of public mental health services would be beneficial. The work group also asked for demographic information about individuals receiving services from community services boards and updates on the work of the Expert Advisory Panel.

### **Next Meeting**

The next meeting of the work group is tentatively scheduled to be held the same day as the next meeting of the Joint Subcommittee.