
VIRGINIA STATE BUDGET

2018 Special Session I

Budget Bill - HB5002 (Introduced)

Bill Order » Office of Health and Human Resources » Item 312

Grants to Localities

Item 312	First Year - FY2019	Second Year - FY2020
Financial Assistance for Health Services (44500)	\$436,026,655	\$436,626,367
Community Substance Abuse Services (44501)	\$102,583,512	\$102,583,512
Community Mental Health Services (44506)	\$253,905,459	\$253,950,332
Community Developmental Disability Services (44507)	\$79,537,684	\$80,092,523
Fund Sources:		
General	\$365,240,680	\$369,640,392
Dedicated Special Revenue	\$3,800,000	\$0
Federal Trust	\$66,985,975	\$66,985,975

Authority: Title 37.2, Chapters 5 and 6; Title 2.2, Chapter 53, Code of Virginia.

A. It is the intent of the General Assembly that community mental health, intellectual disability and substance abuse services are to be improved throughout the state. Funds provided in this Item shall not be used to supplant the funding effort provided by localities for services existing as of June 30, 1996.

B. Further, it is the intent of the General Assembly that funds appropriated for this Item may be used by Community Services Boards to purchase, develop, lease, or otherwise obtain, in accordance with §§ [37.2-504](#) and [37.2-605](#), Code of Virginia, real property necessary to the provision of residential services funded by this Item.

C. Out of the appropriation for this Item, funds are provided to Community Services Boards in an amount sufficient to reimburse the Virginia Housing Development Authority for principal and interest payments on residential projects for the mentally disabled financed by the Housing Authority.

D. The Department of Behavioral Health and Developmental Services shall make payments to the Community Services Boards from this Item in twenty-four equal semimonthly installments, except for necessary budget revisions or the operational phase-in of new programs.

E. Failure of a board to participate in Medicaid covered services and to meet all requirements for provider participation shall result in the termination of a like amount of state grant support.

F. Community Services Boards may establish a line of credit loan for up to three months' operating expenses to assure adequate cash flow.

G. Out of this appropriation \$190,000 the first year and \$190,000 the second year from the general fund shall be provided to Virginia Commonwealth University for the continued operation and expansion of the Virginia Autism Resource Center.

H.1. Out of this appropriation, \$18,127,885 the first year and \$19,099,977 the second year from the general fund shall be provided for Virginia's Part C Early Intervention System for infants and toddlers with disabilities.

2. By November 15 of each year, the department shall report to the Chairmen of the House Appropriations and Senate Finance Committees on the (a) total revenues used to support Part C services, (b) total expenses for all Part C services, (c) total number of infants, toddlers and families served using all Part C revenues, and (d) services provided to those infants, toddlers, and families.

I. Out of this appropriation \$6,148,128 the first year and \$6,148,128 the second year from the general fund shall be provided for mental health services for children and adolescents with serious emotional disturbances and related disorders, with priority placed on those children who, absent services, are at-risk for custody relinquishment, as determined by the Family and Assessment Planning Team of the locality. The Department of Behavioral Health and Developmental Services shall provide these funds to Community Services Boards through the annual Performance Contract. These funds shall be used exclusively for children and adolescents, not mandated for services under the Comprehensive Services Act for At-Risk Youth, who are identified and assessed through the Family and Assessment Planning Teams and approved by the Community Policy and Management Teams of the localities. The department shall provide these funds to the Community Services Boards based on an individualized plan of care methodology.

J. The Commissioner, Department of Behavioral Health and Developmental Services shall allocate \$1,000,000 the first year and \$1,000,000 the second year from the federal Community Mental Health Services Block Grant for two specialized geriatric mental health services programs. One program shall be located in Health Planning Region II and one shall be located in Health Planning Region V. The programs shall serve elderly populations with mental illness who are transitioning from state mental health geriatric units to the community or who are at risk of admission to state mental health geriatric units. The commissioner is authorized to reduce the allocation in each year in an amount proportionate to any reduction in the federal Community Mental Health Services Block Grant funds awarded to the Commonwealth.

K. The Commissioner, Department of Behavioral Health and Developmental Services shall allocate \$750,000 the first year and \$750,000 the second year from the federal Community Mental Health Services Block Grant for consumer-directed programs offering specialized mental health services that promote wellness, recovery and improved self-management. The commissioner is authorized to reduce the allocation in each year in an amount proportionate to any reduction in the federal Community Mental Health Services Block Grant funds awarded to the Commonwealth.

L. Out of this appropriation, \$2,197,050 the first year and \$2,197,050 the second year from the general fund shall be used for jail diversion and reentry services. Funds shall be distributed to community-based contractors based on need and community preparedness as determined by the commissioner.

M. Out of this appropriation, \$2,400,000 the first year and \$2,400,000 the second year from the general fund shall be used for treatment and support services for substance use disorders, including individuals with acquired brain injury and co-occurring substance use disorders. Funded services shall focus on recovery models and the use of best practices.

N. Out of this appropriation, \$2,780,645 the first year and \$2,780,645 the second year from the general fund shall be used to provide outpatient clinician services to children with mental health needs. Each Community Services Board shall receive funding as determined by the commissioner to increase the availability of specialized mental health services for children. The department shall require that each Community Services Board receiving these funds agree to cooperate with Court Service Units in their catchment areas to provide services to mandated and nonmandated children, in their communities, who have been brought before Juvenile and Domestic Relations Courts and for whom treatment services are needed to reduce the risk these children pose to themselves and their

communities or who have been referred for services through family assessment and planning teams through the Comprehensive Services Act for At-Risk Youth and Families.

O. Out of this appropriation, \$17,701,997 the first year and \$17,701,997 the second year from the general fund shall be used to provide emergency services, crisis stabilization services, case management, and inpatient and outpatient mental health services for individuals who are in need of emergency mental health services or who meet the criteria for mental health treatment set forth pursuant to §§ [19.2-169.6](#), [19.2-176](#), [19.2-177.1](#), [37.2-808](#), [37.2-809](#), [37.2-813](#), [37.2-815](#), [37.2-816](#), [37.2-817](#) and [53.1-40.2](#) of the Code of Virginia. Funding provided in this item also shall be used to offset the fiscal impact of (i) establishing and providing mandatory outpatient treatment, pursuant to House Bill 499 and Senate Bill 246, 2008 Session of General Assembly; and (ii) attendance at involuntary commitment hearings by community services board staff who have completed the prescreening report, pursuant to §§ [19.2-169.6](#), [19.2-176](#), [19.2-177.1](#), [37.2-808](#), [37.2-809](#), [37.2-813](#), [37.2-815](#), [37.2-816](#), [37.2-817](#) and [53.1-40.2](#) of the Code of Virginia.

P. Out of this appropriation, \$10,056,250 the first year and \$10,475,000 the second year from the general fund shall be used to provide community crisis intervention services in each region for individuals with intellectual or developmental disabilities and co-occurring mental health or behavioral disorders.

Q. Out of this appropriation, \$1,900,000 the first year and \$1,900,000 the second year from the general fund shall be used to expand community-based services in Health Planning Region V. These funds shall be used for services intended to delay or deter placement, or provide discharge assistance for patients in a state mental health facility.

R. Out of this appropriation, \$2,000,000 the first year and \$2,000,000 the second year from the general fund shall be used to expand crisis stabilization and related services statewide intended to delay or deter placement in a state mental health facility.

S. Out of this appropriation, \$8,400,000 the first year and \$8,400,000 the second year from the general fund shall be used to provide child psychiatry and children's crisis response services for children with mental health and behavioral disorders. These funds, divided among the health planning regions based on the current availability of the services, shall be used to hire or contract with child psychiatrists who can provide direct clinical services, including crisis response services, as well as training and consultation with other children's health care providers in the health planning region such as general practitioners, pediatricians, nurse practitioners, and community service boards staff, to increase their expertise in the prevention, diagnosis, and treatment of children with mental health disorders. Funds may also be used to create new or enhance existing community-based crisis response services in a health planning region, including mobile crisis teams and crisis stabilization services, with the goal of diverting children from inpatient psychiatric hospitalization to less restrictive services in or near their communities. The Department of Behavioral Health and Developmental Services shall report annually on the use and impact of this funding to the Chairmen of the House Appropriations and Senate Finance Committees by October 1.

T. Out of this appropriation, \$10,500,000 the first year and \$10,500,000 the second year from the general fund shall be used for up to 32 drop-off centers to provide an alternative to incarceration for people with serious mental illness and individuals with acquired brain injury and co-occurring serious mental health illness. Priority for new funding shall be given to programs that have implemented Crisis Intervention Teams pursuant to § [9.1-102](#) and § [9.1-187](#) et seq. of the Code of Virginia and have undergone planning to implement drop-off centers.

U. Out of this appropriation, \$2,375,000 the first year and \$2,750,000 the second year from the general fund shall be used to develop and implement crisis services for children with intellectual or developmental disabilities.

V. Out of this appropriation, \$29,758,441 the first year and \$32,058,441 the second year from the general fund shall be used to provide community-based services or acute inpatient services in a private facility to individuals residing in state hospitals who have been determined clinically ready for discharge, and for continued services for those individuals currently being served under a discharge assistance plan. Of this appropriation, \$1,305,000 the first

year and \$1,305,000 the second year shall be allocated for individuals currently or previously residing at Western State Hospital.

W. Out of this appropriation, \$620,000 the first year and \$620,000 the second year from the general fund shall be used to expand access to telepsychiatry and telemedicine services.

X. Out of this appropriation, \$4,000,000 the first year and \$4,000,000 the second year from the general fund shall be used to increase availability of community-based mental health outpatient services for youth and young adults.

Y. Out of this appropriation, \$500,000 the first year and \$500,000 the second year from the general fund shall be used to increase mental health inpatient treatment purchased in community hospitals. Priority shall be given to regions that exhaust available resources before the end of the year in order to ensure treatment is provided in the community and do not result in more restrictive placements.

Z. Out of this appropriation, \$10,496,105 the first year and \$12,021,210 the second year from the general fund is provided for programs for permanent or transitional housing for individuals with serious mental illness. Of this amount, \$8,970,500 the first year and \$8,970,500 the second year shall be used for permanent supportive housing to support rental subsidies and services to be administered by community services boards or private entities to provide stable, supportive housing for persons with serious mental illness. Remaining amounts may be used to expand permanent supportive housing programs or to provide transitional housing supports for individuals with serious mental illness being discharged from state facilities into the community.

AA. Out of this appropriation, \$400,000 the first year and \$400,000 the second year is provided for rental subsidies and associated costs for individuals served through the Rental Choice VA program.

BB. Out of this appropriation, \$5,308,836 the first year and \$7,897,833 the second year from the general fund shall be used for a program of rental subsidies for individuals with intellectual and developmental disabilities.

CC. Out of this appropriation, \$3,800,000 the first year from the Behavioral Health and Developmental Services Trust Fund is provided for the development of provider capacity for individuals with medically complex support needs or those individuals who have multiple diagnoses.

DD. Out of this appropriation, \$10,795,651 the first year and \$10,795,651 the second year from the general fund shall be provided to Community Service Boards and Behavioral Health Authorities to implement same day access for community behavioral health services. The Department of Behavioral Health and Developmental Services shall report annually by October 1 to the Governor and Chairmen of the House Appropriations and Senate Finance Committees on the effectiveness and outcomes of the program funding.

EE. Out of this appropriation, \$5,000,000 the first year and \$5,000,000 the second year from the general fund is provided to increase access to medication assisted treatment for individuals with substance use disorders who are addicted to opioids. In expending this amount, the department shall ensure that preferred drug classes shall include non-narcotic, non-addictive, injectable prescription drug treatment regimens.

FF. Out of this appropriation, \$1,000,000 the first year and \$1,000,000 the second year from the general fund is provided for community detoxification and sobriety services for individuals in crisis.

GG. Out of this appropriation, \$880,000 the first year and \$880,000 the second year from the general fund is provided for one regional, multi-disciplinary team for older adults. This team shall provide clinical, medical, nursing, and behavioral expertise and psychiatric services to nursing facilities and assisted living facilities.

HH. Out of this appropriation, \$3,720,000 the first year and \$7,440,000 the second year from the general fund is provided for primary care outpatient screening services at Community Services Boards and Behavioral Health

Authorities as required by Chapter 607, 2017 Acts of Assembly.

II. Out of this appropriation, \$826,200 the first year and \$1,652,400 the second year from the general fund shall be used to provide permanent supportive housing to pregnant or parenting women with substance use disorders.

JJ. Out of this appropriation, \$11,025,231 the first year and \$11,025,231 the second year from the general fund shall be used to divert admissions from state hospitals by purchasing acute inpatient or community-based psychiatric services at private facilities.