

BEHAVIORAL HEALTH

CSB Behavioral Health Services, 2022

RECOMMENDATIONS

Better data on CSB consumer outcomes ► The General Assembly may wish to consider including language in the Appropriation Act requiring the Department of Behavioral Health and Developmental Services (DBHDS) to report annually on (i) community services board (CSB) performance in improving the functioning levels of its consumers based on composite and individual item scores from the DLA-20 assessment, or results from another comparable assessment, by CSB, (ii) changes in CSB performance in improving consumer functioning levels over time, by CSB, and (iii) the use of functional assessment data by DBHDS to improve CSB performance to the State Board of Behavioral Health and Developmental Services and the Behavioral Health Commission (Recommendation 2)

Salary increase for CSBs' direct care staff ► The General Assembly may wish to consider including funding in the Appropriation Act to fund a salary increase for direct care staff at community services boards. (Recommendation 3)

Improved data on CSB workforce ► The General Assembly may wish to consider including language in the Appropriation Act directing the Department of Behavioral Health and Developmental Services to report annually to the State Board of Behavioral Health and Developmental Services and the Behavioral Health Commission on average salaries, turnover, and vacancy rates, by position type, across community services boards. (Recommendation 4)

Restricting state funding for CSB staff salary increases ► The General Assembly may wish to include language in the Appropriation Act directing the Department of Behavioral Health and Developmental Services (DBHDS) to amend community services board (CSB) performance contracts to require that (i) any funding appropriated by the General Assembly to CSBs for staff compensation only be used for staff compensation and (ii) CSBs report annually on any staff compensation actions taken during the prior fiscal year to DBHDS. (Recommendation 5)

Streamlining CSBs' administrative requirements ► The General Assembly may wish to consider including language in the Appropriation Act directing the Department of Behavioral Health and Developmental Services (DBHDS) to (i) identify all current DBHDS requirements related to documentation and reporting of community services board (CSB) behavioral health services; (ii) identify which of these requirements currently apply to work by CSB direct care staff; (iii) identify any DBHDS requirements of direct care staff that are duplicative of or conflict with other DBHDS requirements; (iv) eliminate any requirements that are not essential to ensuring consumers receive effective and timely services or are duplicative or conflicting; and (v) report to the State Board of Behavioral Health and Developmental Services and the Behavioral Health Commission on progress made toward eliminating administrative requirements that are not essential, are duplicative, or are conflicting. (Recommendation 6)

Preadmission screening training ► The General Assembly may wish to consider including language in the Appropriation Act directing the Department of Behavioral Health and Developmental Services (DBHDS) to contract with one or more higher education institutions to establish training and technical assistance centers to (i) deliver standardized training for preadmission screening clinicians on developing appropriate preadmission screening recommendations, interpreting lab results, and understanding basic medical conditions and (ii) provide technical assistance to preadmission screening clinicians, particularly when quality improvement is deemed necessary by DBHDS. (Recommendation 7)

Residential crisis stabilization unit staff ► The General Assembly may wish to consider including funding in the Appropriation Act for the Department of Behavioral Health and Developmental Services to help community services boards hire additional staff for residential crisis stabilization units whose bed capacity is not fully utilized because of a lack of staff. (Recommendation 9)

Additional residential crisis stabilization units ► The General Assembly may wish to consider including language and funding in the Appropriation Act to support the development and ongoing operations of additional residential crisis stabilization units for children and adolescents, the Southside area, and any other underserved areas of the state, and to direct that the Department of Behavioral Health and Developmental Services provide detailed information on the following before such funding is provided for a new unit to ensure the most strategic deployment of limited resources: (i) the unmet needs the new unit will address, (ii) the capacity of community service boards or private providers to staff the proposed unit, (iii) the unit's ability to serve individuals under a temporary detention order, (iv) expected initial and ongoing costs of the proposed unit, and (v) the planned timeframe for when the unit would become operational. (Recommendation 10)

Repealing state bed registry requirement ► The General Assembly may wish to consider amending §37.2-308.1 of the Code of Virginia to repeal the requirement that every state facility, community services board, behavioral health authority, and private inpatient provider licensed by the Department of Behavioral Health and Developmental Services participate in the acute psychiatric bed registry. (Recommendation 12)

Improving CSBs' Medicaid reimbursements ► The General Assembly may wish to consider including language in the Appropriation Act directing the Department of Behavioral Health and Developmental Services to work with the Department of Medical Assistance Services to (i) develop and implement a targeted review process to assess the extent to which community services boards (CSBs) are billing for Medicaid-eligible services they provide, (ii) provide technical assistance and training, in coordination with Medicaid managed care organizations, on appropriate Medicaid billing and claiming practices to relevant CSB staff, and (iii) report the results of these targeted reviews, and any technical assistance or training provided in response, to the House Appropriations and Senate Finance and Appropriations committees no later than December 1, 2023, and annually thereafter. (Recommendation 14)

MCO standardization ► The General Assembly may wish to consider including language in the Appropriation Act directing the Department of Medical Assistance Services to (i) work with the managed care organizations (MCOs) to standardize, to the maximum extent practicable, policies, procedures, and requirements that CSBs must follow to receive reimbursement for the cost of Medicaid services they provide, including documentation, training, and credentialing requirements; and (ii) report on the improvements made to MCO policies, procedures, and requirements to the Behavioral Health Commission no later than December 1, 2023. (Recommendation 15)

Articulating CSBs' purpose in state law ► The General Assembly may wish to consider amending §37.2 of the Code of Virginia to (i) clearly articulate the purpose of community services boards (CSBs) services within the state's system of community-based behavioral health services and (ii) require the Department of Behavioral Health and Developmental Services to develop clear goals and objectives for CSBs that align with and advance the articulated purpose and include them in the performance contracts. (Recommendation 17)

Improving DBHDS's oversight of CSBs ► The General Assembly may wish to include language in the Appropriation Act directing the Department of Behavioral Health and Developmental Services (DBHDS) to develop and implement clear and comprehensive requirements and processes for monitoring community services boards' (CSBs) performance with respect to the provision of behavioral health services. At a minimum, DBHDS's monitoring requirements and processes should (i) evaluate CSB performance on key consumer outcome measures, including measures of functional impairments, and compliance with performance contract requirements on an ongoing basis; (ii) use existing data and information it collects to analyze performance of CSBs and facilitate needed improvements; (iii) integrate the monitoring efforts and reporting requirements across all offices involved in CSB funding and oversight; (iv) establish a process for communicating the results of performance monitoring to CSBs; (v) develop expectations for the content and outcomes of quality improvement plans; and (vi) clearly articulate the enforcement mechanisms that will be used to address substantial underperformance or non-compliance. (Recommendation 20)

Accountability mechanisms for CSBs ► The General Assembly may wish to consider amending § 37.2-508 of the Code of Virginia to require the Department of Behavioral Health and Developmental Services to (i) regularly monitor community services boards' (CSB) compliance in meeting performance contract requirements; and (ii) use available enforcement mechanisms, as necessary, to ensure CSBs are in substantial compliance with the requirements established in their performance contracts. (Recommendation 21)

Reporting CSB performance information ► The General Assembly may wish to include language in the Appropriation Act directing the Department of Behavioral Health and Developmental Services (DBHDS) to report community services board (CSB)-level performance information, including any substantial underperformance or non-compliance and associated enforcement actions, annually to (1) each CSB governing board, (2) the Behavioral Health Commission, and (3) the State Board of Behavioral Health and Developmental Services. (Recommendation 22)