

Study Resolution

Effectiveness of Virginia's Community Services Boards

Authorized by the Commission on December 13, 2021

WHEREAS, Community Services Boards (CSBs) are Virginia's safety net providers for community-based behavioral health, substance use disorder, and developmental disability services for adults and children, funded through a combination of federal funds, state general funds, and local funds; and

WHEREAS, Virginia's 40 CSBs are administered locally and overseen by the Department of Behavioral Health and Developmental Services (DBHDS); and

WHEREAS, CSB services and funding have recently undergone numerous changes as part of the STEP-VA initiative, Medicaid behavioral health enhancement, and Medicaid expansion; and

WHEREAS, CSBs provide key services to help manage the state mental health hospital population, including discharge planning and behavioral health crisis services; and

WHEREAS, effective community-based behavioral healthcare systems can reduce the reliance on more acute and costly services, such as inpatient hospitalization; and

WHEREAS, previous JLARC reports have noted a need for DBHDS to align its funding model for CSBs with community needs and improve data gathered from CSBs; and

WHEREAS, JLARC has not comprehensively reviewed Virginia's public community-based behavioral health, substance use disorder, and developmental disability service system; now, therefore be it

RESOLVED by the Joint Legislative Audit and Review Commission that staff be directed to review the efficiency and effectiveness of the structure and service delivery of Virginia's community services boards. In conducting its study, staff shall (i) determine what services CSBs are required to provide for adults and children and whether these requirements reflect Virginia's greatest mental and behavioral health priorities; (ii) evaluate whether the populations served by CSBs are appropriate; (iii) evaluate whether CSBs are staffed and funded to effectively respond to these requirements and priorities, including their ability to execute discharge plans for individuals in the state's mental health hospitals and provide behavioral health crisis services, (iv) determine the extent to which CSBs are able to either directly provide or facilitate access to behavioral health services in a timely, efficient, and effective manner and identify the reasons for any shortcomings, including challenges related to data and IT systems; (v) assess the outcomes of pilot programs being operated by the CSBs; and (vi) determine whether the existing structure of the CSB system—including the number of CSBs, their service regions, their relationship to their local governments, the private sector, DBHDS, the state's mental health hospitals, and each other—could be improved to strengthen the effectiveness and efficiency of service delivery.

JLARC shall make recommendations as necessary and review other issues as warranted.

All agencies of the Commonwealth, including the Department of Behavioral Health and Developmental Services, the Department of Medical Assistance Services, and all community services boards, shall provide assistance, information, and data to JLARC for this study, upon request. JLARC staff shall have access to all information in the possession of agencies pursuant to § 30-59 and § 30-69 of the Code of Virginia. No provision of the Code of Virginia shall be interpreted as limiting or restricting the access of JLARC staff to information pursuant to its statutory authority.