



COMMONWEALTH of VIRGINIA

DEPARTMENT OF
MENTAL HEALTH, MENTAL RETARDATION AND SUBSTANCE ABUSE SERVICES

JAMES S. REINHARD, M.D.
COMMISSIONER

Post Office Box 1797
Richmond, Virginia 23218-1797

Telephone (804) 786-3921
Voice/TDD (804) 371-8977
www.dmhmrzas.virginia.gov

April 1, 2009

The Honorable Charles J. Colgan, Chairman
Senate Finance Committee
General Assembly Building, Room 626
P.O. Box 396
Richmond, Virginia 23218

Dear Senator Colgan:

I am pleased to forward to you the first quarter report on the implementation of services funded by Item 316.KK and other activities related to Item 316.LL in the *2008 Appropriation Act*. Item 316.LL requires me to submit a report to your committee on the implementation of new services funded in this item and a report describing the reporting process used to measure CSB performance on participation in the civil commitment process. My report, submitted on December 1, 2008 in response to that requirement, included information on the reporting process and indicated that I would submit a first quarter implementation report when the data became available.

I hope that you and your staff find the information in this report helpful. My staff and I are available at your convenience to answer any questions you may have about this report.

Sincerely,

A handwritten signature in cursive script that reads "James Reinhard".

James S. Reinhard, M.D., D.F.A.P.A.

JSR/prg

pc: The Honorable R. Edward Houck
The Honorable Marilyn B. Tavenner
Betsey Daley
Joe Flores

Heidi R. Dix
Frank L. Tetrick, III
Ruth Anne Walker
Paul R. Gilding



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April 1, 2009

The Honorable Lacey E. Putney, Chairman
House Appropriations Committee
General Assembly Building, Room 947
P.O. Box 406
Richmond, Virginia 23218

Dear Delegate Putney:

I am pleased to forward to you the first quarter report on the implementation of services funded by Item 316.KK and other activities related to Item 316.LL in the *2008 Appropriation Act*. Item 316.LL requires me to submit a report to your committee on the implementation of new services funded in this item and a report describing the reporting process used to measure CSB performance on participation in the civil commitment process. My report, submitted on December 1, 2008 in response to that requirement, included information on the reporting process and indicated that I would submit a first quarter implementation report when the data became available.

I hope that you and your staff find the information in this report helpful. My staff and I are available at your convenience to answer any questions you may have about this report.

Sincerely,

A handwritten signature in black ink that reads "James Reinhard". The signature is fluid and cursive, with a long, sweeping underline that extends to the left and then curves back under the name.

James S. Reinhard, M.D., D.F.A.P.A.

JSR/prg

pc: The Honorable Phillip A. Hamilton
The Honorable Marilyn B. Tavenner
Robert P. Vaughn
Susan E. Massart

Heidi R. Dix
Frank L. Tetrick, III
Ruth Anne Walker
Paul R. Gilding



**Report On Item 316.LL
of the 2008 Appropriation Act
for the First Quarter of FY 2009**

**To The Chairs of the House Appropriations and
Senate Finance Committees of the General Assembly**

**Presented By
James S. Reinhard, M.D., D.F.A.P.A.
Commissioner**

**Virginia Department of Mental Health, Mental
Retardation and Substance Abuse Services**

April 1, 2009

Report On Item 316.LL of the 2008 Appropriation Act for the First Quarter of FY 2009

Item 316.LL the *2008 Appropriation Act* requires the Department of Mental Health, Mental Retardation and Substance Abuse Services to develop and maintain a reporting process to monitor the implementation of the new services funded in this item (316.KK). The Report submitted to the Chairmen of the House Appropriations and Senate Finance Committees on December 1, 2008 to meet the requirements of Item 316.LL indicated the Department would provide a summary of first quarter implementation information, and that information is contained in this document.

The December 1, 2008 Report contained a table, reproduced below, that displayed the proposed uses of the \$9.9 million allocated to the 40 CSBs implementing new services associated with Mental Health Law Reform and funded in Item 316.KK.

FY 2009 Mental Health Law Reform Approved CSB Proposals (Item 316.KK) ¹				
Service	FTEs ²	Consumers	State Funds³	Total Cost⁴
Emergency Services/Crisis Intervention	42.39	8,640	\$2,555,080	\$3,350,744
Emergency Services/Preadmission Screening	14.50	3,909	\$812,078	\$843,970
Emergency Services/Independent Examination	0.53	192	\$39,691	\$39,691
Emergency Services/Hearing Attendance	24.44	8,066	\$1,604,254	\$1,831,025
Emergency Services/Post Hearing Follow Up	4.75	665	\$259,293	\$259,293
Emergency Services/Mandatory Outpatient Treatment	4.45	820	\$278,622	\$301,614
Total for Emergency Services	91.02	22,292	\$5,549,018	\$6,626,337
Outpatient Services	17.78	2,674	\$1,280,278	\$1,343,663
Outpatient Services/Medication Management	8.82	2,135	\$1,074,209	\$2,364,304
Mandatory Outpatient Treatment	5.00	275	\$261,205	\$273,650
Total for Outpatient Services	31.60	5,084	\$2,605,692	\$3,981,617
Case Management Services	27.85	2,854	\$1,522,222	\$1,589,272
Case Management Services/Mandatory Outpatient Treatment	3.50	205	\$221,354	\$221,354
Total for Case Management Services	31.35	3,061	\$1,743,576	\$1,810,626
Grand Totals for Approved CSB Plans	153.97	30,441	\$9,908,286	\$12,428,580

¹ Figures reflect proposals of all 40 CSBs, which have been approved by the Department.

² Figures in this column reflect the full-time equivalents (FTEs), the staff that CSBs project hiring in FY 2009 to provide these services.

³ State funds reflect the uses, proposed by CSBs and approved by the Department, of the funds allocated from Item 316.KK of the 2008 Appropriation Act and communicated to CSBs in the Commissioner's June 30, 2008 memorandum.

⁴ The difference between State Funds and Total Cost figures for some of the services reflects additional projected revenues from other sources, such as Medicaid fees.

Report On Item 316.LL of the 2008 Appropriation Act for the First Quarter of FY 2009

Implementation of New Services Funded in Item 316 for the First Quarter of FY 2009

As the December 1, 2008 Report noted, community services boards and behavioral health authorities submit quarterly status reports on their implementation of these services. The following table summarizes the first quarter reports from all 40 CSBs.

FY 2009 Mental Health Law Reform Quarterly Status Report for the First Quarter						
Service	FTEs	Services	Consumers	State Funds	Total Funds	Total Expenses
Emergency Services (ES) Crisis Intervention	17.16	3,476 hours	1,404	\$386,742	\$583,990	\$383,082
ES Preadmission Screening Evaluation	8.14	1,158 hours	643	\$139,010	\$155,495	\$97,191
ES Independent Examination	0.00	0 hours	0	\$5,953	\$5,953	\$0
ES Commitment Hearing Attendance	11.91	2,720 hours	1,561	\$223,721	\$274,531	\$220,171
ES Post Hearing Follow Up/Discharge Planning	8.89	912 hours	1,119	\$61,489	\$61,489	\$30,836
ES Mandatory Outpatient Treatment	1.47	344 hours	84	\$29,348	\$29,348	\$21,268
Total for Emergency Services (ES)	47.57	8,610 hours	4,811	\$846,263	\$1,110,806	\$752,548
Outpatient (OP) Services	7.85	1,316 hours	225	\$245,926	\$247,963	\$77,727
OP Medication Management Services	2.69	904 hours	447	\$137,830	\$139,708	\$85,850
OP Mandatory Outpatient Treatment ¹	0.25	0 hours	0	\$34,120	\$349,129	\$334,071
Total for Outpatient (OP) Services	10.79	2,220 hours	672	\$417,876	\$736,800	\$497,648
Case Management Services (CM)	10.34	1,641 hours	488	\$200,141	\$202,115	\$74,520
CM Mandatory Outpatient Treatment	0.64	7 hours	1	\$13,125	\$13,125	\$4,496
Total for Case Management (CM) Services	10.98	1,648 hours	489	\$213,266	\$215,240	\$79,016
Grand Totals	69.34	12,478 hours	5,972	\$1,477,405	\$2,062,846	\$1,329,212

¹ The CSB reporting the large amount of funds spent for OP Mandatory Outpatient Treatment indicated that it reserved these funds in anticipation of receiving orders for mandatory outpatient treatment; but the CSB had received no orders as of the date of the report.

Report On Item 316.LL of the 2008 Appropriation Act for the First Quarter of FY 2009

FY 2009 Community Services Performance Contract Exhibit B Reporting Process

In addition to the Item 316.KK reporting process, the Department instituted a stand-alone paper reporting process to collect data about the participation of CSBs in the civil commitment process contained in Exhibit B of the FY 2009 community services performance contract, including the following performance measures:

Performance measure I.B.3 will provide some information about the number of involuntary adult commitment hearings attended by CSBs. This goal for this measure states that:

Pursuant to subsection B of § 37.2-815 of the *Code of Virginia*, a preadmission screening evaluator or, through a mutual arrangement, an evaluator from another Board, shall attend each commitment hearing for adults, original (up to 30 days) or recommitment (up to 180 days), held in the Board's service area or for a Board's consumer outside of its service area in person, or if that is not possible, the preadmission screening evaluator shall participate in the hearing through two-way electronic video and audio or telephonic communication systems, as authorized by subsection B of § 37.2-804.1 of the *Code of Virginia*, for the purposes of presenting preadmission screening reports and recommended treatment plans and facilitating least restrictive dispositions.

CSBs report the following data for this measure about CSB attendance at commitment hearings for a one month period each quarter.

- Number of commitment hearings for adults attended by the Board's preadmission screening evaluators in its service area for its own consumers or on behalf of other Boards.
- Number of commitment hearings for adults attended by the Board's preadmission screening evaluators outside of its service area for Board consumers.
- Number of commitment hearings for adults attended by the Board's preadmission screening evaluators outside of its service area on behalf of other Boards.

Performance measure I.C.1 also will provide some information related to the civil commitment process. This goal for this measure states that:

Initial telephone responders in emergency services shall triage calls and, for callers with emergency needs, shall be able to link the caller with a preadmission screening evaluator within 15 minutes of their initial calls.

CSBs will report data from a two week sample of its emergency services each quarter on the total number of callers with emergency needs and the number of callers linked with a preadmission screening evaluator within 15 minutes of their initial calls.

Performance measure I.C.2 also will provide some information related to the civil commitment process. This goal for this measure states that:

When an immediate face-to-face intervention by a certified preadmission screening evaluator is appropriate to determine the need for involuntary hospitalization, the intervention shall be completed by a certified preadmission screening evaluator who shall be available within one hour of initial contact for urban Boards and within two hours of initial contact for rural Boards.

A summary of data for these performance measures submitted by CSBs for the first quarter of FY 2009 is displayed in the table on the next page.

Report On Item 316.LL of the 2008 Appropriation Act For the First Quarter of FY 2009

FY 2009 Performance Contract Exhibit B Required Measures First Quarter Report			
Exh. B	Expectation or Goal Measure	Data	Data Reported
I.B.3	Pursuant to subsection B of § 37.2-815 of the Code of Virginia, a preadmission screening evaluator or, through a mutual arrangement, an evaluator from another Board, shall attend each commitment hearing for adults, original (up to 30 days) or recommitment (up to 180 days), held in the Board's service area or for a Board's consumer outside of its service area in person, or if that is not possible, the preadmission screening evaluator shall participate in the hearing through two-way electronic video and audio or telephonic communication systems, as authorized by subsection B of § 37.2-804.1 of the Code of Virginia, for the purposes of presenting preadmission screening reports and recommended treatment plans and facilitating least restrictive dispositions.	3,067	Number of commitment hearings for adults attended by the Board's preadmission screening evaluators in its service area for its own consumers or on behalf of other Boards. (Reported for one month during the quarter.)
		284	Number of commitment hearings for adults attended by the Board's preadmission screening evaluators outside of its service area for Board consumers. (Reported for one month during the quarter.)
		394	Number of commitment hearings for adults attended by the Board's preadmission screening evaluators outside of its service area on behalf of other Boards. (Reported for one month during the quarter.)
I.C.1	Initial telephone responders in emergency services shall triage calls and, for callers with emergency needs, shall be able to link the caller with a preadmission screening evaluator within 15 minutes of their initial calls. Attach the summary and analysis of the quarter's two-week sample of the CSB's emergency services to this report.	1,176	Number of callers with emergency needs linked with a preadmission screening evaluator within 15 minutes of their initial calls during the quarterly two-week sample of emergency services.
		1,255	Total number of callers with emergency needs during the two-week sample of emergency services each quarter.
		96.00%	Enter first number ÷ by second number x 100
I.C.2	When an immediate face-to-face intervention by a certified preadmission screening evaluator is appropriate to determine the need for involuntary hospitalization, the intervention shall be completed by a certified preadmission screening evaluator who shall be available within one hour of initial contact for urban Boards and within two hours of initial contact for rural Boards. Attach the summary and analysis of the quarter's two-week sample of the CSB's emergency services to this report.	948	Number of individuals who required a face-to-face evaluation for possible involuntary hospitalization who saw a certified preadmission screening evaluator face-to-face within one (urban) or two (rural) hours of initial contact during the two-week sample of emergency services.
		1,067	The total number of individuals who saw a certified preadmission screening evaluator for evaluation of possible involuntary hospitalization during the two week sample of emergency services each quarter.
		88.85%	Enter first number ÷ by second number x 100.