Why Redesign? Why Now?

Medicaid is the largest payer of behavioral health services in Virginia.

- 28% of Medicaid members had either a primary or secondary behavioral health diagnoses.
- 40th in the country for overall access to mental health care.
- 41st in the country for mental health workforce supply.

(mentalhealthamerica.net)
The Vision for Redesign

*Develop an evidence-based, trauma-informed, cost-effective continuum of care*

- Keep Virginians well and thriving in their communities
- Improve behavioral health services and outcomes for members in current and expansion populations
- Meet people’s needs in environments where they already seek support such as schools and physical health care settings
- **Invest in prevention and early intervention services that promote resiliency and buffer against the effects of adverse childhood experiences**
STEP VA: A Foundation for Redesign

STEP-VA has paved the way forward in creating a path for BH system change in the 21st century.

Strong Public Behavioral Health System

Redesign of the Medicaid-funded system supports long term sustainability
Alignment & Momentum for Redesign

MEDICAID BEHAVIORAL HEALTH REDESIGN

- Project AWARE / Tiered System of Supports (DOE)
- VMAP (AAP/VDH)
- High Fidelity Wraparound (DBHDS/OCS)
- ARTS (DMAS)
- Family First Prevention Act (DSS/OCS)
- STEP-VA (DBHDS)
- Governor's Children's Cabinet on Trauma Informed Care
- Juvenile Justice EBP Implementation (DJJ)
Current Medicaid-funded Behavioral Health Services

<table>
<thead>
<tr>
<th>Prevention</th>
<th>Recovery</th>
<th>Outpatient</th>
<th>Community Mental Health Rehabilitation Services</th>
<th>Inpatient / Residential</th>
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<tr>
<td>Early intervention Part C • Screening • EPSDT services</td>
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<td>Peer and family support partners</td>
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<td>Outpatient psychotherapy • Psychiatric medical services</td>
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<td>Crisis intervention &amp; stabilization</td>
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<td>Psychosocial rehabilitation</td>
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<td>Partial hospitalization / Day treatment</td>
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<td>Mental health case management</td>
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<td>Treatment foster care case management</td>
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<td>Inpatient hospitalization</td>
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<td>Psychiatric residential treatment</td>
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<td>Therapeutic group home</td>
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Continuum of Behavioral Health Services Across the Life Span

Promotion & Prevention | Recovery Services | Outpatient & Integrated Care | Intensive Community Based Support | Intensive Clinic-Facility Based Support | Comprehensive Crisis Services | Group Home & Residential Services | Inpatient Hospitalization

Behavioral Therapy Supports: Home visitation • Comprehensive family programs • Early childhood education screening & assessment* • Early intervention Part C

Case Management*: Permanent supportive housing • Supported employment • Psychosocial rehabilitation* • Peer and family support services* • Independent living and recovery/resiliency services

Recovery & Rehabilitation Support Services*: Outpatient psychotherapy* • Tiered school-based behavioral health services • Integrated physical & behavioral health* • Psychiatric medical services*

INTEGRATED PRINCIPLES/MODALITIES

- Trauma informed care
- Universal prevention / early intervention
- Seamless care transitions
- Telemental health

*Key STEP-VA service alignment

Intensive outpatient programs • Partial hospitalization programs

Mobile crisis* • Crisis intervention* • Crisis stabilization* • Peer crisis support*

Therapeutic group homes • Psychiatric residential treatment

Psychiatric inpatient hospitalization
Continuum of Behavioral Health Services Across the Life Span

**Phase 1**

**Integrated Principles/Modalities**
- Trauma informed care
- Universal prevention / early intervention
- Seamless care transitions
- Telemental health

*Key STEP-VA service alignment*
Child & Adolescent Continuum of Behavioral Health Services

- Promotion & Prevention
- Recovery Services
- Outpatient & Integrated Care
- Intensive Community Based Support
- Intensive Clinic-Facility Based Support
- Tiered Crisis Services
- Group Home & Residential Services
- Inpatient Hospitalization

Behavioral Therapy Supports
- Home visitation
- Comprehensive family programs
- Early childhood education screening & assessment
- Early intervention Part C

Peer and family support services
- Outpatient psychotherapy
- Tiered school-based behavioral health
- Integrated physical & behavioral health
- Psychiatric medical services

Intermediate/Ancillary home-based service
- Multisystemic therapy
- Functional family therapy
- High fidelity wraparound
- Therapeutic foster care

Intensive outpatient programs
- Partial hospitalization programs

INTEGRATED PRINCIPLES/MODALITIES
- Trauma informed care
- Universal prevention / early intervention
- Seamless care transitions
- Telemental health

Mobile crisis services
- Crisis intervention
- Crisis stabilization

Therapeutic group homes
- Psychiatric residential treatment
- Psychiatric inpatient hospitalization
Child & Adolescent Continuum of Behavioral Health Services

Phase 1

INTEGRATED PRINCIPLES/MODALITIES
- Trauma informed care
- Universal prevention / early intervention
- Seamless care transitions
- Telemental health

Behavioral Therapy Supports
- Home visitation
- Comprehensive family programs
- Early childhood education
- Screening & assessment
- Early intervention Part C

Peer and family support services
- Outpatient psychotherapy
- Tiered school-based behavioral health
- Integrated physical & behavioral health
- Psychiatric medical services

Case Management
- Intermediate/Ancillary home-based service
- Multisystemic therapy
- Functional family therapy
- High fidelity wraparound
- Therapeutic foster care

Recovery & Rehabilitation Support Services
- Intensive outpatient programs
- Partial hospitalization programs
- Mobile crisis services
- Crisis intervention
- Crisis stabilization

Therapeutic group homes
Psychiatric residential treatment
Psychiatric inpatient hospitalization
## Redesigned Behavioral Health Continuum

<table>
<thead>
<tr>
<th>Promotion &amp; Prevention</th>
<th>Recovery Services</th>
<th>Outpatient &amp; Integrated Care</th>
<th>Intensive Community Based Support</th>
<th>Intensive Clinic-Facility Based Support</th>
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<th>Inpatient Hospitalization</th>
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<td>Behavioral Therapy Supports</td>
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<td>Case Management*</td>
<td>&gt;&gt;&gt;&gt;&gt; &lt;&lt;&lt; &lt; &lt; &lt; &lt; &lt;</td>
<td>Recovery &amp; Rehabilitation Support Services*</td>
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These services are emphasized for delivery across all levels of care to promote integrated the principles of trauma informed care, Universal Prevention / Early Intervention and Seamless Care Transitions.
Changes in New Continuum

Key Overall Changes

- Outpatient behavioral health services will be more robust and integrated into schools and primary care
- Community Mental Health and Rehabilitation Services will become Intensive Community-Based Supports that are tiered based on the intensity of an individual’s needs and include evidence-based best practices
- Medicaid will fully fund comprehensive crisis services
- System will focus on trauma-informed care
- System will promote telemental health across levels of care
Changes in New Continuum

Key Changes to Specific Services

• Therapeutic Day Treatment will become Tiered School-Based Behavioral Health Services - Medicaid will fund and support licensed mental health clinicians in schools

• Mental Health Skill Building will be redesigned into a targeted Independent Living and Recovery service with evidence-based practices for a focused number of people with SMI

• Community Based services will include intermediate level of support and Assertive Community Treatment (PACT) teams to provide intensive supports

• New Partial Hospitalization and Intensive Outpatient Programs will provide alternatives to TDOs and inpatient hospitalization

• **1115 IMD Waiver would fund new residential options for adults that are alternatives to TDOs and inpatient hospitalization**
School-Based Behavioral Health

Multi-Tiered System of Supports (MTSS)

- Tier 1: 80-90%
- Tier 2: 5-10%
- Tier 3: 1-5%

Recommended Service Model

- Expand Medicaid funding for all school-based behavioral health services.
- Remove requirement that the service be in IEP to be reimbursed by Medicaid.
- Request State General Funds as matching funds instead of requiring localities to pay 55% of the costs.
- Add coverage for 3 tiers of the Virginia Tiered System, add Applied Behavior Analysis services and leverage telehealth.
- Offer extended therapeutic afterschool programs to youth who need more intensive interventions.

Project AWARE schools in Virginia have seen:
- Increase in students served by school-based mental health professionals
- Increase in # students referred to community-based behavioral health services actually receiving services
- Decreases in office discipline referrals, in-school suspensions, and out of school suspensions
<table>
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<tr>
<th>CURRENT SERVICES</th>
<th>REDESIGNED SERVICES</th>
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<tr>
<td><strong>Prevention</strong></td>
<td><strong>Universal Prevention/ Early Intervention</strong></td>
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<td>• Early Intervention/Part C</td>
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<td>• Psychosocial Rehabilitation (EBPs)</td>
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<td>• Intermediate/Ancillary Home-Based Services</td>
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<td>• Mental Health Skill Building Services</td>
<td>• MST, FFT, High Fidelity Wraparound</td>
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<td>• Psychosocial Rehabilitation</td>
<td><strong>Intensive Clinic/Facility Based</strong></td>
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<td>• Intensive In-home Services</td>
<td>• Intensive Outpatient Programs</td>
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<td>• Partial Hospitalization/Day Treatment</td>
<td>• Partial Hospitalization Programs</td>
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<td>• Mental Health Case Management*</td>
<td><strong>Comprehensive Crisis</strong></td>
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<td>• Treatment Foster Care Case Management*</td>
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<td>• Intensive Community Treatment</td>
<td>• Crisis Stabilization</td>
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<td>• Psychiatric Residential Treatment Facilities</td>
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<td>• Inpatient Psychiatric Treatment</td>
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Implementation Planning

- Leadership and Oversight of Process
- Management of resources and priorities

Interagency Steering Committee

- Development of state-system readiness for changes

Agency Project Teams

- Collaborative planning and problem solving specific to impacts on service delivery system

Stakeholder Workgroups
Recent Developments and Actions

• Stakeholder Implementation Workgroup Survey
  ▪ Brief Results
• Presentations to Stakeholder Groups
• Initiative Alignment Efforts
• Data gathering on service definitions, provider qualifications and training involved in Phase 1 Services
• Rate Study and Fiscal Impact Analysis
• Interagency Project Teams
Proposed Phased Implementation

Timeline

Phase 1
Summer 2020
- Partial Hospitalization Program
- Intensive Outpatient Program
- Program of Assertive Community Treatment
- Comprehensive Crisis Services
- Multisystemic Therapy
- Functional Family Therapy

Phase 2
Spring 2021
- Behavioral Therapy
- Home Visitation
- Comprehensive Family Programs
- High Fidelity Wraparound Case Management

Phase 3
Summer 2021
- School Based Behavioral Health Services
- Independent Living and Recovery/Resiliency Services
- Integrated Primary Care/Behavioral Health Outpatient Psychotherapy

Phase 4
Spring 2022
- Psychosocial Rehabilitation Services
- Intermediate Ancillary Home Based Services
- Intensive Community Treatment
Phase 1 – Summer 2020

- High intensity services for both adult and child
- Services that have an short/medium term impact on the State Psychiatric Facilities census
- Considers services with existing framework that can be expanded in scope, workforce, or contribute to sustainability. For example:
  - PHP and IOP network and rates may model ARTS
  - PACT is not at every CSB and not fully covered by DMAS
  - MST and FFT providers:
    - Have been trained however only accessible for DJJ / CSA referral
    - Have been identified by the FFPSA team as an EBP
  - Considers including services that align with STEP-VA initiatives (outpatient, crisis services)

Partial Hospitalization Program
Intensive Outpatient Program
Program of Assertive Community Treatment
Comprehensive Crisis Services
Multisystemic Therapy
Functional Family Therapy
Youth-Focused Service System Alignment

Phase 1

MEDICAID BEHAVIORAL HEALTH REDESIGN

- Project AWARE / Tiered System of Supports (DOE)
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- STEP-VA (DBHDS)
- Family First Prevention Act (DSS/OCS)
- Virginia Department of Behavioral Health & Developmental Services
The Future for the Commonwealth:

A comprehensive spectrum of behavioral health services

• Bring the Commonwealth into the Top 10 in national rankings for behavioral health outcomes

• Shift from working with a reactive, crisis-driven, high-cost system reliant on intensive services to one that is proactive/preventive, cost-efficient, and focused on providing services in the least restrictive environments

• Build upon existing statewide behavioral health transformative initiatives and create sustainability and expansion for evidence based services

• Integration of trauma-informed care principles across the continuum to empower individuals to build resiliency and overcome the impact of adverse experiences so that they can lead meaningful, productive lives in our communities

• Build a robust children’s behavioral health system to address prevention and early intervention of mental health problems to allow each child the chance to reach their full developmental potential