## Department of Planning and Budget 2020 Fiscal Impact Statement

1.	Bill Number: HB1351						
	House of Orig	in 🖂	Introduced		Substitute		Engrossed
	Second House		In Committee		Substitute		Enrolled
2.	Patron: Watts						
3.	Committee: Health, Welfare, and Institutions						
4.	<b>Title:</b> Temporary detention; evaluation; who may perform.						

- **5. Summary:** Expands the category of individuals who may evaluate a person who is the subject of an emergency custody order to determine whether the person meets the criteria for temporary detention to include any person described in the definition of "mental health professional" in § 54.1-2400.1 who (i) is skilled in the diagnosis and treatment of mental illness, (ii) has completed a certification program approved by the Department of Behavioral Health and Developmental Services, and (iii) complies with regulations of the Board of Behavioral Health and Developmental Services related to performance of such evaluations.
- **6. Budget Amendment Necessary**: No.
- 7. Fiscal Impact Estimates: Indeterminate. See Item 8.
- **8. Fiscal Implications:** This legislation would allow any person described in the definition of mental health service provider to to conduct pre-admission screenings for temporary detention for those individuals for whom an Emergency Custody Order (ECO) has been issued. Any individual providing this evaluation must be skilled in the diagnosis and treatment of mental illness, complete a certification program approved by the Department of Behavioral Health and Developmental Services, and comply with regulations related to performance of evaluations. Currently, only individuals designated by a Community Services Board may provide such evaluations.

As this bill is written, individuals who are certified substance abuse counselors, registered peer recovery specialists, school psychologists, registered nurses, physicians, psychologists, and social workers would be eligible to perform these evauations. While the bill would require them to complete a certification program, it is unclear whether all of the listed disciplines would have the requisite professional training to truly complete the tasks.

The impact on the total number of temporary detention orders ultimately recommended by adding additional categories of evaluators to the ECO process is unknown. If adding a wider variety of evaluators to the process results in a change in the number of TDOs issued, there would be an impact on state mental health facilities, the Medicaid program, and the level of needed funding provided at the Department of Medicaid Assistance Services for the

involuntary civil commitment of individuals without insurance. While this legislation appears to only address the evaluations of those individuals who are under an ECO, it is not clear if the intent is to allow the expanded list of evaluators to provide emergency screenings for individuals who are not under ECOs. Approximately 11,678 ECOs were issued in the first half of FY 2019, but 43,508 emergency evaluations were performed, and 12,646 TDOs were issued. If the expanded list of evaluators is applied to all emergency evaluations, then the impact of any change in TDO recommendations would be proportionately more significant.

The bill does not address who will pay for the cost of any evaluation services not provided by a CSB, nor does it clarify who would then be responsible for the other duties associated with the temporary detention process (i.e. finding an available bed, attending the commitment hearing, etc.). The Commonwealth currently provides CSBs with general fund dollars for a portion of the expenses that are required to complete this Code-mandated function (preadmission screening).

Additionally, while the legislation does not speak to the who is responsible for the costs of certification, if Community Services Boards are required to train and/or certify additional pre-screeners, they would incur additional costs.

- **9. Specific Agency or Political Subdivisions Affected:** Department of Behavioral Health and Developmental Services, CSBs, State and Private Psychiatric Hospitals
- 10. Technical Amendment Necessary: No.
- 11. Other Comments: None.