

Department of Planning and Budget 2023 Fiscal Impact Statement

1. Bill Number: SB1465

House of Origin ☐ Introduced ☐ Substitute ☐ Engrossed

Second House ☐ In Committee ☐ Substitute ☒ Enrolled

2. Patron: Hanger

3. Committee: Passed Both Houses

4. Title: Community services boards; behavioral health authorities; purpose; performance contracts.

5. Summary: Provides that the purpose of behavioral health services provided by community services boards and behavioral health authorities is to enable individuals who have a mental illness or substance use disorder that significantly impairs their functioning to access effective, timely, and cost-efficient services that help them (i) overcome or manage functional impairments caused by the mental illness or substance use disorder and (ii) remain in the community to the greatest extent possible, consistent with the individual's well-being and public safety. The bill also requires that performance contracts entered into by the Department of Behavioral Health and Developmental Services with community services boards and behavioral health authorities include certain information, as specified in the bill. The bill reorganizes certain other provisions related to community services boards and behavioral health authorities. The substitute version of this legislation delays the effective date of changes to performance contracts until July 1, 2025.

6. Budget Amendment Necessary: No.

7. Fiscal Impact Estimates: See Item 8 below.

8. Fiscal Implications: This legislation clarifies requirements for Community Services Boards (CSB) performance contracts to include specific goals and objectives and measurable outcomes. Currently, code requires that performance contracts contain: "specific outcome measures for individuals receiving services, provider performance measures, satisfaction measures for individuals receiving services, and participation and involvement measures for individuals receiving services and their family members". This legislation would specify that a performance contract include goals and measures, benchmarks, and appropriate monitoring activities. The substitute version of this legislation delays the effective date of changes to performance contracts until July 1, 2025.

Currently, the Department of Behavioral Health and Developmental Services (DBHDS) dedicates staff to negotiating, renewing, and other administrative functions of running the CSB performance contracts. If this legislation is interpreted to require significant additional

duties for DBHDS staff, including the development and monitoring of new benchmarks, DBHDS would either have to redirect staff time or resources, or hire additional staff. This legislation, does not, however change the permissive language that DBHDS “may provide for performance monitoring to determine whether behavioral health authorities are in substantial compliance with their performance contracts”.

The successful measurement of specific goals and objectives of CSBs will be dependent on the completion and rollout of a data exchange system. The process of developing a new platform and standardizing the report format is underway. Funding in Chapter 2, 2022 Acts of Assembly, Special Session I, provides funding for a critical interface between the CSBs and DBHDS central office by dedicating resources to address system interoperability. DBHDS projects it will be at least 18 months until a new data platform and reports are finalized.

There is no fiscal impact in this biennium, and any fiscal impact in future biennia is determinate on overall requirements for CSB monitoring. If multiple bills become law that require additional duties for the DBHDS central office in relation to management, monitoring, and enforcement of CSB performance contracts, DBHDS indicates it will need additional resources. Each additional program specialist is estimated to cost \$122,730. The cost to CSBs for adherence to any new goals or objectives developed as a result of this legislation is unknown.

9. Specific Agency or Political Subdivisions Affected: Department of Behavioral Health and Developmental Services, Community Services Boards.

10. Technical Amendment Necessary: No.

11. Other Comments: No.