

Department of Planning and Budget 2008 Fiscal Impact Statement

1. Bill Number: SB220

House of Origin X Introduced Substitute Engrossed
Second House In Committee Substitute Enrolled

2. Patron: Edwards

3. Committee: Courts of Justice

4. Title: Outpatient treatment order; community services board to monitor person's compliance with order.

5. Summary: Monitoring of compliance with outpatient treatment order. Provides that the community services board or behavioral health authority that serves the city or county in which a person subject to an outpatient treatment order resides shall develop an outpatient treatment plan, which shall identify the community services board, behavioral health authority, or other provider designated to monitor the person's compliance with the order. This bill also provides that upon receiving notification of noncompliance with the order, the court shall issue a show cause order regarding the person's noncompliance with the order and may amend the involuntary outpatient treatment order or revoke the outpatient treatment order.

6. Fiscal Impact Estimates: Tentative

7. Budget Amendment Necessary: Item 316, Grants to Localities

8. Fiscal Implications: While these provisions may increase costs for Community Services Boards, the proposed language, similar to HB499/SB246, generally provides clarity about what is to happen when someone is ordered into outpatient treatment, with the focus being on preparation of the treatment plan, identification of providers, monitoring responsibilities, and obligations when there is non-compliance. There is wide consensus among all stakeholders including the Commission on Mental Health Law Reform and the Virginia Tech Review panel that §37.2-817 needs to be amended to clearly outline the duties and responsibilities of CSBs for monitoring compliance of persons subject to involuntary outpatient treatment orders.

Approximately five percent of hearings result in involuntary outpatient treatment orders. It can be assumed that each CSB will need .25 FTE case managers at a cost of \$12,500 to effectively monitor the compliance of individuals committed to involuntary outpatient treatment orders. The annual cost is therefore \$500,000 system-wide.

The Office of the Inspector General's investigation of community mental health services after the Virginia Tech critical incident determined that an additional 230 mental health adult case managers at a cost of \$11,500,000 are needed to achieve recommended ratios for caseload, however this would address issues beyond monitoring outpatient commitment. The

Governor's introduced budget added \$8.8 million for 106 case managers to phase in increased case management capacity. The intent of this proposed language would begin to be addressed with funds provided in the Governor's introduced budget. However, other procedural details concerning the 'show cause' order could add unknown costs to the Court.

9. Specific Agency or Political Subdivisions Affected: Community Services Boards, Courts

10. Technical Amendment Necessary: No.

11. Other Comments: This bill contains similar provisions to HB499/SB246, the comprehensive mental health reform bill

Date: 1/24/2008 dpb

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cc: Secretary of Health and Human Resources