

## Department of Planning and Budget 2011 Fiscal Impact Statement

1. **Bill Number:** SB 1418  

|                 |  |                                     |                                    |
|-----------------|--|-------------------------------------|------------------------------------|
| House of Origin | <input checked="" type="checkbox"/> Introduced | <input type="checkbox"/> Substitute | <input type="checkbox"/> Engrossed |
| Second House    | <input type="checkbox"/> In Committee          | <input type="checkbox"/> Substitute | <input type="checkbox"/> Enrolled  |
2. **Patron:** Edwards
3. **Committee:** Education and Health
4. **Title:** Closure of state training centers
5. **Summary:** This bill would amend 37.2-316 to provide that the requirements for closure of state hospitals for persons with mental illness shall also apply to closure of state training centers for people with intellectual disabilities, including requirements for establishment of state and community consensus and planning teams, development of plans for the closure of the facility and provision of community-based services for residents of training centers, review by the Joint Commission on Health Care, and approval by the General Assembly.
6. **Fiscal Impact Estimates:** Indeterminate. See Fiscal Implications.
7. **Budget Amendment Necessary:** No
8. **Fiscal Implications:** While there is not currently a plan to close a specific training center, there may be implications in the future. In response to the recent investigation of Virginia's training centers, the U.S. Department of Justice (DOJ) may require the discharge of large numbers of residents from the five training centers to the community and the closure of some or all of these facilities. A report from DOJ is expected to be released shortly, at which point, Virginia's Office of the Attorney General (OAG) will enter into negotiation of a settlement agreement with the federal government in an effort to avoid litigation against the state. Any legislation, like this proposed bill, that creates barriers to or slows the process of discharge from training centers will complicate the ability of the OAG to reach an acceptable agreement.

Additionally, the census of the five training centers is dropping steadily and at a fairly rapid pace due to natural attrition. As a result, the cost per resident is increasing annually. It is already significantly more expensive to care for individuals in the training centers than in the community. Any legislative action like this bill that creates an open-ended planning process will complicate and prolong the process of restructuring the network of training centers and will result in higher operational costs for the state.

If this legislation were passed, it is plausible there would need to be as many as five state and community consensus and planning teams formed, with a large number of participants due to the bill's requirements for representation. Coordination of the composition of these planning teams would be time consuming and complex, to ensure equal contribution by all those

required to be involved in the planning process. Significant budget decreases over the past few years have resulted in considerable decreases in staffing, leaving DBHDS without sufficient resources to manage this complex process.

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

**10. Technical Amendment Necessary:** No

**Date:** 01/24/2011

**Document:** G:\FY2011\FIS\DBHDS Finished\SB1418.Doc

cc: Secretary of Health and Human Resources