

Department of Planning and Budget 2024 Session Fiscal Impact Statement

1. Bill Number: HB50

House of Origin ☒ Introduced ☐ Substitute ☐ Engrossed
Second House ☐ In Committee ☐ Substitute ☐ Enrolled

2. Patron: Jones

3. Committee: Health and Human Services

4. Title: Central State Hospital; designation of additional beds as forensic and psychiatric beds.

5. Summary: Directs Central State Hospital to designate additional beds as forensic and psychiatric beds.

6. Budget Amendment Necessary: Yes, Items 300 and 301.

7. Fiscal Impact Estimates: Preliminary. See Item 8.

7a. Expenditure Impact:

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Positions</i>	<i>Fund</i>
2024			
2025	\$85,000,000		GF
2026	\$0		
2027	\$2,182,402		GF
2028	\$4,364,804		GF
2029	\$4,364,804		GF
2030	\$4,364,804		GF

8. Fiscal Implications: This legislation would require the Department of Behavioral Health and Developmental Services (DBHDS) to designate additional beds at Central State Hospital (CSH) as “forensic” or “psychiatric”. Currently, all beds at CSH are forensic/psychiatric beds, thus to meet the requirements of this legislation, additional funding would be needed to expand capacity at the facility. The legislation does not provide a date by which the additional beds must be designated. For this fiscal impact statement, it is assumed that the additional beds would be added as part of the new facility.

CSH will be moving to a new facility on the Petersburg campus, with substantial completion of the capital project expected by January 2027. The new footprint will have a reduced bed capacity from the current 277 beds (166 civil/forensic, 111 maximum security), with 25 fewer civil beds for a total of 252 beds (141 civil/forensic beds, 111 maximum security).

It is possible to expand the new facility by adding an additional wing of 48 beds. The current estimated cost to construct the additional wing is \$85.0 million, which includes construction

costs as well as the cost of furniture, fixtures, and equipment needed to operate additional beds. This estimate may increase over the duration of the project as construction costs continue to increase. In addition to design and construction costs, additional funds would be needed to operate the additional beds. As the current project is planned to reduce CSH capacity by 25 beds, expansion of the project to include an additional wing would result in a net bed increase of 23 beds. This fiscal impact statement assumes half year costs beginning in FY 2027 as the beds come online, with full costs beginning in FY 2028.

Given the current staffing challenges at CSH, DBHDS anticipates that contract staff will be needed to support the operation of 23 additional beds. The additional staffing cost is estimated at \$3.9 million annually, broken out by positions in the table below.

Position	Day	Evening	Night	Total/ Day	Hours By Week	Contract Cost	Contract Cost Annualized
RNCA	2	2	2	6	336	\$110	\$1,921,920
PT III	5	5	5	15	840	\$43	\$1,878,240
RNC	1			1		\$120,000	\$120,000
							\$3,920,160

In addition to staffing costs, additional funding is needed for supplies, utilities, and pharmaceuticals. Based on estimates for a similar expansion at Western State Hospital, DBHDS estimates an additional need of \$444,644 per year for those costs.

This legislation also requires DBHDS to prioritize beds for individuals from the Central State Hospital catchment areas. As of January 2024, 93 percent (155/166) of the forensic/civil CSH patient census is from the central Virginia, region IV catchment areas. This percentage is largely a result of the increased number of forensic patients at CSH. 83 percent (141) of patients at CSH are forensic and 17 percent (28) are civil admissions. However, the maximum-security units operated at CSH serve patients from across the Commonwealth, as CSH is the only facility with beds of this type. If the intent of the legislation is to provide for additional beds for civil and forensic temporary detention order admissions for individuals in the central Virginia region, then the requirement that beds be prioritized for individuals from the central Virginia region would already be met through existing DBHDS policy. The maximum security unit will continue to serve individuals from across the state.

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

10. Technical Amendment Necessary: No.

11. Other Comments: None.