Community Mental Health Agreement

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Raymond S. Perry, Attorney
NH Department of Health and Human Services
January 26, 2015
Background

1980s National Institute for Mental Health praises New Hampshire’s community integration efforts.

1990 Americans with Disabilities Act adopted.

1999 U.S. Supreme Court rules in Olmstead v. L.C. that the ADA requires that services be provided in the least restrictive setting.

2008 NH DHHS releases “A Strategy for Restoration” (“Ten Year Plan”)

2010-2011 U.S. DOJ and advocacy groups file class action in Federal District Court

2014 Agreement to settle lawsuit approved by Federal District Court
Major Components of Agreement

1. Mobile Crisis Response
2. Crisis Apartments
3. Assertive Community Treatment
4. Supported Housing
5. Community Residence Beds
6. Supported Employment
Incremental Cost of Agreement with U.S. Department of Justice

Implementation dates reflect start-up dates necessary to meet deadlines specified in the Community Mental Health Agreement. Estimated costs reflect Incremental Costs in addition to programs already funded in DHHS budget.

<table>
<thead>
<tr>
<th>Item</th>
<th>Short Title</th>
<th>Implementation Begins</th>
<th>SFY14</th>
<th>SFY15</th>
<th>SFY16</th>
<th>SFY17</th>
<th>SFY18</th>
<th>SFY14 - SFY18</th>
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State General Funds

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<th>SFY15</th>
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<td>1</td>
<td>Housing Bridge Subsidy Program</td>
<td>7/1/2014</td>
<td>$0</td>
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Requested Appropriations for Fiscal Years 16-17

Class 102 Contracts for Operational Services
FY 16 $ 444,250 FY 17 $800,000
OMBP Medicaid
FY 16 $ 609,700 FY 17 $1,098,800

Mobile Crisis Teams

Mobile Crisis Teams are composed of clinicians trained to provide behavioral health emergency services and crisis intervention services 24 hours/day, 7 days/week.

- By June 30, 2015, the State will add mobile crisis capacity in Mental Health Region 4 (Concord) with funds for FY 16 and FY 17 included in the BBH change budget
- By June 30, 2016, the State will add mobile crisis capacity in Mental Health Region 7 (Manchester) with funds for 3 months in FY 16 and FY 17 included in the BBH change budget
- By June 30, 2017, the State will add mobile crisis capacity in Mental Health Region 6 (Nashua) with funds for 3 months in FY 17 included in the BBH change budget

The department has issued an RFP for Concord Region 4 with a projected start-up April 1, 2015 with full capacity reached on or about July 1, 2015.
Requested Appropriations for Fiscal Years 16-17
Class 102 Contracts for Operational Services
FY 16 $1,244,850 FY 17 $2,232,750
OMBP Medicaid
FY 16 $273,600 FY 17 $492,600

Crisis Apartments
Crisis apartments provide short-term, intensive services as an alternative to hospitalization.

- By June 30, 2015, the State will add 4 crisis apartment beds in Mental Health Region 4 (Concord) with funds for FY 16 and FY 17 included in the BBH change budget
- By June 30, 2016, the State will add 4 crisis apartment beds in Mental Health Region 7 (Manchester) with funds for 3 months in FY 16 and 12 months in FY 17 included in the BBH change budget
- By June 30, 2017, the State will add crisis apartment beds in Mental Health Region 6 (Nashua) with funds for 3 months in FY 17 included in the BBH change budget

The RFP for Concord Region 4 Mobile Crisis Response includes the four Crisis Apartment beds with a projected start-up April 1, 2015 with full capacity reached on or about July 1, 2015.
Requested Appropriations for Fiscal Years 16-17
Class 102 Contracts for Operational Services
FY 16 $1,843,500 FY 17 $2,181,000
OMBP Medicaid
FY 16 $4,508,357 FY 17 $5,513,357

Assertive Community Treatment Teams
ACT teams reach out to people in the community to provide stabilization and support.

- To meet the CMHA requirements, two additional ACT teams will be established to increase capacity to serve at least 1,300 individuals by June 30, 2015. Funds for FY 16 and FY 17 included in the BBH change budget.
- To meet the CMHA requirements, two additional ACT teams will be established to increase capacity to serve at least 1,500 individuals by June 30, 2016. Funds for 3 months in FY 16 and FY 17 included in the BBH change budget.
Requested Appropriations for Fiscal Years 16-17
Class 102 Contracts for Operational Services
FY 16 $1,689,500  FY 17 $2,289,000

Supported Housing (Bridge Program)
Supported housing combines a rental subsidy with services that will help people maintain community tenure.

- There are 240 supported housing units included in the BBH maintenance budget for FY 16-17.
- The FY 16-17 Change Budget contains funding to sustain 100 new units being added in FY 15 plus 110 units to be added in FY 16.
- 450 supported housing units will be available for the entirety of FY 17 (240 units in maintenance budget and 210 units in the change budget).
- Budgeted at $10,900 per unit per year including administrative expense.
Community Residence Beds
Community Residence Beds will enable individuals with mental illness and complex health care needs who currently reside at the Glencliff Home to live in their own communities. (Budgeted at $100,000 per person per year.)

- By June 30, 2015, there will be capacity to serve four individuals in the community, with funds for FY 16 included in the BBH change budget
- By June 30, 2016, there will be capacity to serve an additional six individuals in the community, with funds for FY 16 included in the BBH change budget (4 individuals for all of FY 16 with a phase in for the additional 6 beginning April 1, 2016)
- By June 30, 2017, there will be capacity to serve an additional six in the community, with funds for FY 17 included in the BBH change budget. (10 individuals for all of FY 17 with a phase in for the additional 6 beginning April 1, 2017)
Requested Appropriations for Fiscal Years 16-17
OMBP Medicaid
FY 16 $3,000,000 FY 17 $3,250,000

Supported Employment

Supported Employment services are an evidence-based practice intended to offer the opportunity for individuals to work the maximum number of hours in integrated community settings consistent with their individual treatment plans.

- By June 30, 2015, the penetration rate of individuals with SMI (serious mental illness) receiving supported employment services shall be 16.1 percent of eligible individuals with SMI.
- By June 30, 2016, the penetration rate of individuals with SMI receiving supported employment services shall be 18.1 percent of eligible individuals with SMI.
- By June 30, 2017, the penetration rate of individuals with SMI receiving supported employment services shall be 18.5 percent of eligible individuals with SMI.

Projected FY 16-17 budget assumes $5,000 per individual per year with Medicaid being the sole source of funds.
Consequences for Failure to Implement Agreement

1. Negative impact on our citizens who have mental illness and their families
   - Restrictions on freedom and independence
   - Emergency Room waiting for admission to NH Hospital
   - Delays in treatment

2. Negative impact on other systems
   - Hospitals
   - Corrections, state and county
   - Law enforcement, state, county and local

3. Risk and cost of litigation
   - Outcome uncertain
   - Substantial diversion of energy and talent
   - Legal fees and costs exceed 4M; case resolved while in discovery phase
Contact Information

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Community Mental Health Agreement and Expert Reviewer’s Report available at:
http://www.dhhs.nh.gov/dcbcs/bbh/settlement.htm