

Department of Planning and Budget 2024 Session Fiscal Impact Statement

1. **Bill Number:** HB515

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

2. **Patron:** Hope

3. **Committee:** Appropriations

4. **Title:** Discharge of individuals from state hospitals or training centers.

5. **Summary:** Directs the Department of Behavioral Health and Developmental Services to develop and implement a pilot program at one state hospital to allow the director of the state hospital the option to discharge individuals over the objection of the community services board or guardian after the preparation of a discharge plan and within 15 days of a determination by the treatment team that the individual is ready for discharge, if the director believes that the individual is recovered, does not have a mental illness, or is impaired or not recovered and whose discharge will not be detrimental to public welfare or the individual, as well as other conditions outlined in the bill. The bill allows the director to grant a trial or home visit to the individual receiving services pursuant to regulations adopted by the State Board of Behavioral Health and Developmental Services. The bill requires DBHDS to submit a report on its findings and recommendations to the Governor, Chairman of the House Committee on Health and Human Services, the Senate Committee on Education and Health, and the Behavioral Health Commission no later than November 1, 2025.

6. **Budget Amendment Necessary:** No.

7. **Fiscal Impact Estimates:** Indeterminate. See section 8 below.

8. **Fiscal Implications:** The legislation creates a pilot program at one facility operated by the Department of Behavioral Health and Developmental Services (DBHDS) to allow the facility director to discharge an individual over the objection of the Community Services Board or guardian. While the legislation does not specify the facility, DBHDS anticipates they would implement this pilot at Catawba Hospital. While the legislation could increase the workload on Catawba Hospital staff to develop discharge plans, the number of individuals to be discharged from the facility pursuant to this legislation is expected to be a small portion of the total number of individuals discharged from the facility. Any costs associated with discharge planning for these individuals can be absorbed by existing staff and may be offset by possible cost avoidance from a reduction in length of stay for individuals on the Extraordinary Barriers List.

The legislation specifies that the costs of the home or trial visit would be the responsibility of the guardian or the local social services department. This language is identical to existing language in § 37.2-837 related to currently allowable home and trial visits. While a cost to

local departments of social services or other state agencies is indeterminate, possible costs could be to the supplemental nutritional assistance program, the auxiliary grant program, or Medicaid for medical services. This legislation does not, however, increase eligibility for these programs, so any costs for these services are for individuals who would be otherwise eligible regardless of the legislation.

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

10. Technical Amendment Necessary: No.

11. Other Comments: None.