Policy Issue #1

**Fact:** Pathway Homes provides mental health skill building (MHSB) that keeps individuals in permanent housing.

**The Issue:** Proposed changes to the eligibility criteria will eliminate many individuals from qualifying for this service. Additional cuts in state funding would further impact Pathway’s ability to serve those in need; individuals that would otherwise benefit from these services.

**State Agency:** Virginia Department of Behavioral Health and Developmental Services- Office of Mental Health Services (DBHDS)

**Our Position:** DBHDS should make no changes to the current levels of funding or rate structure for service reimbursement DBHDS should postpone any changes to MHSB eligibility criteria until additional data collected and analyzed in order to document the harmful impact of the proposed changes.

Policy Issue #2

**Fact:** The Commonwealth of Virginia, as part of the biannual budget process, provides funding for Case Management Services as part of the community mental health care process.

**The Issue:** Pathway Homes and other non-governmental service providers are not reimbursed for services directly by the Commonwealth of Virginia. Instead, current law requires a middle-man bureaucracy that delays services and increases costs. Reimbursement for community Case Management Services are currently funneled to Community Service Boards (CSBs).

Private providers across Virginia are able perform these case management services at a cheaper rate, and with more face-to-face time with the clients. Currently a CSB case manager will see a client once a month, and will bill the state $326 for that visit. Changing the policy will allow the state to reimburse private providers an average of $240 per month for four visits with the client. The result is better service to the individual with mental illness AND significant savings to the Virginia taxpayer.

**State Agency:** Virginia Department of Behavioral Health and Developmental Services- Office of Mental Health Services (DBHDS)

**Our Position:** A) Revise public policy to allow private providers to receive direct reimbursement for case management services for rehabilitative mental health. B) Conduct a state-wide case management services study to explore current effectiveness and efficiency and recommend best practices among all service providing agencies.