

### **September 23, 2019 F&HS Comments—Douglas Dunn**

My comments focus on the “downstream” effects of the lack of lower cost locked facility beds and the resultant lack of appropriate community step down programs and housing for persons discharged from these facilities, referenced on page 6 of this report. In the Mental Health Commission’s ad hoc Data Committee report efforts, we’ve been made aware that Adult locked facility costs are currently running \$10M above projected budget. We’re aware the total \$225M Behavioral Health budget is not “over” because the Children and Adolescent (C&A) budget of approx. \$59M is running “under” by \$10M. When the new C&A programs get fully up and running, this particular under budget situation will disappear.

From what we know, the current \$10M adult locked facility “overage” is driven by lack of available Institute of Mental Diseases (IMD) beds for persons who really need them. We’re aware 10-11 persons in the Contra Costa Regional Medical Center Psychiatric Ward (4C) have been there for 100-180 days there because there are no LPS Conservatorship or State Hospital beds available, despite their very high acuity needs. The “cascading” financial effect is as follows:

- Daily census of 40-45 persons in Psychiatric Emergency Services (PES)..
- 4C: Approx. \$1,500/day covered approx. 75-85% by Medicare/\$1,150/day, or Medi-Cal/\$1,250/day for 47 days (5151+5250+5270). After 47 days, covered costs drop to approx. \$400 or less Administrative Day rate.
- 6 Contracted hospitals in-patient psychiatric care: Approx. \$1,500/day because of the IMD Medi-Cal reimbursement exclusion for persons 21-64 years of age.
- Non-contract in-patient psychiatric care: +\$1,500/day to \$3,200/day—same IMD Medi-Cal reimbursement exclusion issue.

By contrast, LPS Conservatorship:

- 120-150 persons/year at \$300-\$600/day, depending on level of program care at each of the 13 out-of-county contracted facilities.
- Annual state Realignment cost: Approx. \$5.5M

State Hospitals

- 20 beds (14 Napa, 6 Metropolitan in Norwalk)—Mainly forensic (criminal justice) patients
- Annual state Realignment cost: \$5.5M or \$754/day/bed

The federal Health & Human Services dept. (HHS) currently has an up to 30 day IMD reimbursement waiver available to the states. However, there have been very few “takers.” The National Association of State Attorney’s General (NAAG), has written a letter signed by 39 AG’s (including Xavier Becerra, CA) urging Congress to completely repeal the IMD Medicaid (Medi-Cal) reimbursement exclusion. Repeal would mean at least \$25M annual additional available to this county primarily for badly needed community step-down programs and some additional lower cost locked facility beds.

The Commission and its MHSA-Finance Committee are taking a “deep dive” into this issue and will be seeking Board support for complete repeal of the IMD Medi-Cal reimbursement exclusion. The California State Assn. of Counties (CSAC) is in favor.