BHC Behavioral Health Commission

Commission meeting

July 7, 2026

Briefing

In this presentation

BHC electronic meeting policy

BHC legislative and budget impact

FOIA statutes require public bodies to adopt policies for virtual participation

- Participation by individual members
- All-virtual meetings
- Public bodies must follow statute but can adopt more restrictive policies

Individual members can participate remotely under specific circumstances

- Four circumstances allowed
  - Member disability or medical condition
  - Member's family medical condition
  - Personal matter
  - Residence 60+ miles away from meeting
- Remote participation allowed only if quorum is physically present at the meeting site
- Members participating remotely can vote

Individual BHC members can participate remotely in up to two meetings per year, unless approved by Chair

- BHC policy limits remote participation to two meetings annually
  - Statute imposes limits only for personal matters
- BHC Chair may grant exceptions, except for personal matters
  - Send requests to BHC staff
  - If denied, member can attend remotely, but not participate

All-virtual meetings limited to twice per year

- Statute permits two all-virtual meetings (or 25% of all meetings) each year
- Virtual meetings cannot be consecutive
- BHC policy for all-virtual meetings is identical to statute

Member discussion and vote

- Individual member participation
  - Maintain current policy that limits individual members' participation to two per year?
  - Add further restrictions on the circumstances allowed?
- All-virtual meetings
  - Add restrictions on number of all-virtual meetings?

In this presentation

BHC electronic meeting policy

BHC legislative and budget impact

Impact of BHC legislative actions (2023-2026)

59%	35	$73M
staff recommendations implemented	bills enacted to improve the behavioral health system	additional funding to support behavioral health services & staff

~60% of recommendations have been implemented through BHC action since 2023

BHC recommendations implemented	2023-2025	2026	Cumulative
Recommendations adopted by BHC	66	17	83
Recommendations implemented through BHC action	39	10	49
% of BHC recommendations implemented	59%	59%	59%

Recommendations implemented through BHC legislation	2023-2025	2026	Cumulative
# Introduced through legislation	23	4	27
# Implemented through legislation	18	4	22
% of legislative recommendations implemented	78%	100%	81%

Implemented through BHC budget amendments			
# Introduced through budget	43	13	56
# Implemented through budget	21	6	27
% of budget recommendations implemented	*49%*	*46%*	*48%*

Impact of recommendations implemented through BHC actions in 2026

Purpose	Bill/Budget	BHC patron
Improve implementation and effectiveness of Marcus Alert System		
Fund the implementation of Marcus Alert for the remaining 13 Community Services Boards that have not yet begun their implementation	$7.8M/yr	Sen. Deeds Del. Willett
Provide additional flexibility to fund Marcus Alert programs based on community needs by removing language that provided a fixed $600K annual allocation	Language	Sen. Aird
Require DBHDS to convene the Marcus Alert Evaluation Task Force to assist in determining the effectiveness of the Marcus Alert system	SB 514 HB 225	Sen. Deeds Del. Hope
Provide that interjurisdictional agreements allow co-response teams staffed by law-enforcement agencies to respond to behavioral health calls in multiple jurisdictions	SB 317 HB 248	Sen. Perry Del. Watts
Provide that information may remain in Marcus Alert external databases that cannot be modified by a locality after such individual reaches 18 years of age	SB 602 HB 249	Sen. Durant Del. Watts
Allow DBHDS, in collaboration with DCJS, to amend the Marcus Alert plan to reflect changes in best practices and in the crisis system	SB 513 HB 453	Sen. Deeds Del. Willett

Impact of recommendations implemented through BHC actions in 2026

Purpose	Bill/Budget	BHC patron
Improve alignment between crisis system and civil commitment process		
Direct DBHDS to identify strategies to incentivize CSBs to serve more individuals an ECO/TDO in CRCs and CSUs, and determine changes needed to achieve "no-barrier"	Language	Sen. Favola Del. Willett
Improve performance of STEP-VA		
Direct DMAS to identify the steps needed to transition Medicaid reimbursement to a prospective payment system (PPS) in support of CCBHC model	Language	Sen. Deeds Del. Hope
Similar to BHC recommendation: Direct DBHDS to collect data on STEP-VA services and assess whether flexibility is needed to reallocate funds among STEPs to match needs	Language	Sen. Perry Del. McLaughlin
Similar to BHC recommendation: Direct DBHDS to require CSBs to maximize Medicaid billing and report Medicaid revenue annually through CSB performance contract	Language	Sen. Perry Del. McLaughlin
Maximize local match on state CSB funding		
Direct DBHDS to examine alternatives to the current 10% local match requirement on state funding for CSBs, and account for potential inequities	Language	Sen. Favola

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Next meeting

September 8, 2026

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