



Discussion of potential 2026 staff work



November 13, 2025

Executive Committee

Meeting goals

- Review results from survey of BHC members
- Discuss other potential studies and monitoring efforts
- Vote on 2026 priorities to be presented at the December meeting of full Commission

In this presentation

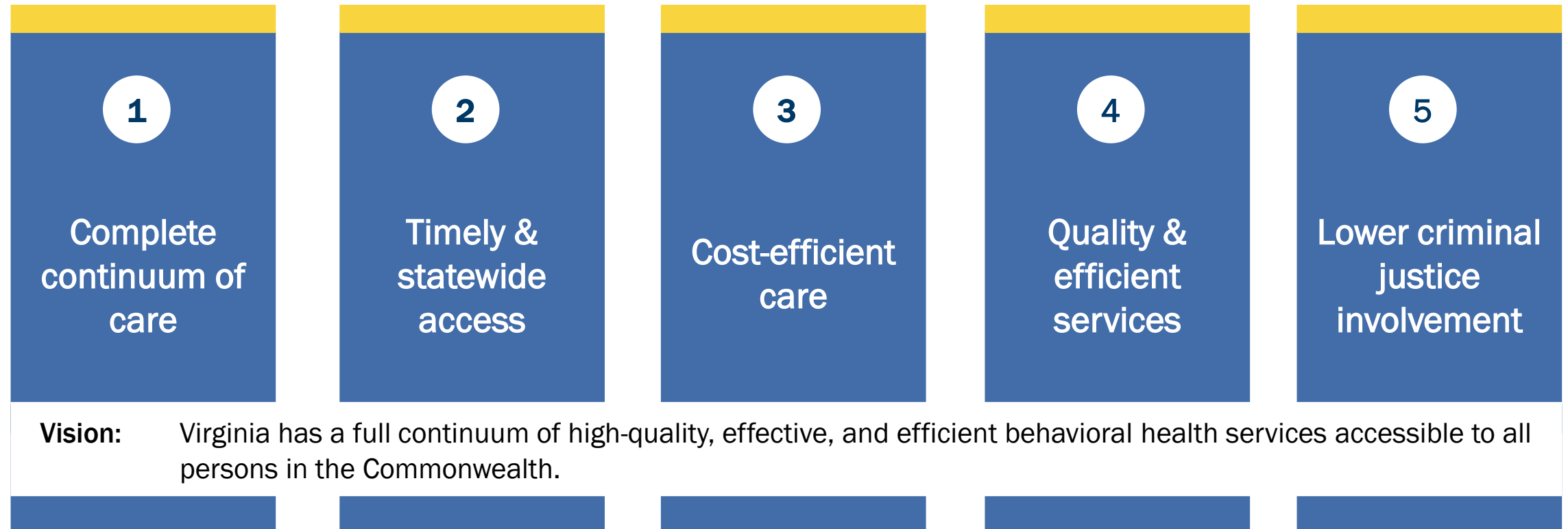
■ Topic selection framework

Results from BHC survey

Other potential topics

Discussion and prioritization

BHC strategic goals provide a framework for evaluating potential study and monitoring priorities



Purpose of selecting study and monitoring priorities

- Study and monitoring priorities adopted by the Commission annually are the foundation for its workplan
- Commission members proactively select work that
 - _ Achieves the highest impact toward its strategic goals
 - _ Addresses systemic issues impacting a large number of Virginians
 - _ Aligns with the Commission's roles
- Other work is assigned by the General Assembly through legislation or the budget
 - _ Takes precedence but may not be best aligned with BHC goals or roles
 - _ Often not finalized until April or later

BHC executive committee vets potential priorities and makes recommendations to the full Commission

- BHC members polled in October to solicit study ideas
- Other potential study topics identified by staff throughout the year based on member discussions and issues that surface during research
- Program monitoring and performance evaluation options based on past initiatives with high cost and/or high impact
- BHC Executive Committee is convened in November to discuss poll results and make recommendations
- Full Commission votes during December meeting

BHC has already assigned staff with one study and two monitoring priorities, leaving capacity for one major product

2026 activities	Timeframe	FTEs	Lead analyst
Studies			
■ Study on behavioral health services in Virginia jails	Dec '25 – Oct '26	1.0	Claire
Ongoing monitoring			
■ BRAVO / Behavioral Health Redesign	Dec '25 – May '26	0.6	Abby
■ Discharge assistance program (DAP)	May '26 – Sep '26	0.4	Abby
Remaining availability			
2026 completion	Dec '25 – Nov '26	1.0	John
TOTAL		3.0	

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Potential study topics – Rightsizing the number of psychiatric hospital beds in Virginia (Sen. Deeds)

- **Issue:** Inpatient services are currently overutilized for both the civil and forensic populations in Virginia, because less restrictive services are often not available to serve individuals in their community. As a result, it is unclear how many psychiatric hospital beds Virginia truly needs to meet demand and end lengthy waiting lists while meeting the needs of individuals in the most appropriate, least restrictive environment possible.
- **Key questions:** To what extent could individuals going to inpatient facilities be served in the community if appropriate services were available? What additional steps could be taken to reduce census in state hospitals? How many beds should be available to meet demand? How much state funding could be reinvested in community-based services if the number of hospital beds was rightsized?
- **Priority:** High - issue is critical, should be addressed through full-scale study in 2026.

Potential study – How to implement CCBHC best practice model in Virginia (Sen. Deeds)

- **Issue:** CCBHC is the best practice model around which STEP-VA is modeled, and Virginia should implement it statewide. Despite earlier efforts to adopt CCBHC in 2017 and 2023, the shift has not occurred.
- **Key questions:** What steps does Virginia have to take to become CCBHC-certified? How can Virginia adopt the Prospective Payment System? How much would the adoption of CCBHC cost the state?

Potential study – Impact of rising number of mental health professionals who accept only self-pay clients (Del. Willett)

- **Issue:** Many mental health providers are transitioning to self-pay models and no longer accept insurance as a form of payment. This means that many people seeking mental health services must pay out of pocket or forgo treatment. Providers are making this shift, at least in part because of the low reimbursements they receive from commercial insurers, Medicaid, and Medicare.
- **Key questions:** What percentage of Virginia mental health care providers are making this shift? Is that happening across the state or only in certain geographic areas? What are the actual impacts of this trend on Virginians? How many Virginians are forgoing coverage? Have other states been able to address this issue, and how?
- **Priority level:** High - issue is critical, should be addressed through full-scale study in 2026.

Potential study – Benefits of mandatory outpatient treatment in Virginia (Sen. Favola)

- **Issue:** Families want an easier process for obtaining mandatory outpatient services (standard is imminent danger and prior hospitalization). Hospitalization can be very traumatic and individuals with developmental disabilities and mental health conditions are not well served in many hospital settings.
- **Key questions:** Can mandatory outpatient orders prevent hospitalizations? Can mandatory outpatient orders result in better patient outcomes? Can mandatory outpatient services be reviewed after a certain period of time, e.g., 90 days and consider other patient rights issues? Is there evaluation data on the New York model?
- **Priority:** Medium - issue is important, but some flexibility around the timing of a study or how much work might be needed.

Potential study – Sustainability and expansion of recovery high school model (Del. Coyner)

- **Issue:** Chesterfield has one recovery high school and several others starting this year, but they are lacking a standard model and sustainable funding.
- **Key questions:** What organizational structure should be used across recovery high schools? How can funding be made sustainable for the program and the continuum of care needed after high school graduation, with a strong handoff?
- **Priority:** Medium - issue is important, but some flexibility around the timing of a study or how much work might be needed.

Potential study – Permanent and transparent solution to recovery housing (Del. Coyner)

- **Issue:** Need a permanent solution to provide transparency to public for services provided and quality of services.
- **Key questions:** What long-term solution for recovery housing could reduce discrimination and provide quality assurance and transparency to public?
- **Priority:** Medium - issue is important, but some flexibility around the timing of a study or how much work might be needed.

Potential study – Use of CSUs and other strategies to divert individuals on the autism spectrum who come into contact with LEOs (Sen. Favola)

- **Issue:** Ability of Crisis Stabilization Units (CSUs) to serve individuals on the Autism spectrum.
- **Key questions:** What strategies and programs increase diversion for individuals on the Autism spectrum who come in contact with law enforcement?
- **Priority:** High - issue is critical, should be addressed through full-scale study in 2026.

Potential study – Approaches for handling individuals with neurodevelopmental and neurocognitive disorders (Del. Watts)

- **Issue:** Not stated.
- **Key questions:** How do other states handle adults in crisis who are neurologically impaired (i.e., autism spectrum, Alzheimer's) when law enforcement has become involved? What is the process for determining danger to self or others? What options are used upon such a determination?
- **Priority:** High - issue is critical, should be addressed through full-scale study in 2026.

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Potential study – Efficiency of the competency restoration process

- **Scope:**
 - Review current inpatient and outpatient competency restoration practices
 - Analyze impact of current restoration practices on the state behavioral health system
 - Identify other states' approaches to judicial discretion and automatic dismissal for certain charges
 - Provide options and recommendations for improving the effectiveness and efficiency of competency restoration
- **BHC strategic goals:** lower criminal justice involvement

Potential study: Use and effectiveness of mandatory/assisted outpatient treatment

- **Scope:**

- Analyze the utilization of mandatory outpatient treatment (MOT) and outcomes statewide, if available
- Explore models of MOT and Assisted Outpatient Treatment (AOT) in other states and their feasibility in Virginia
- Compare the benefits and challenges associated with MOT and AOT
- Identify the steps that would be necessary to implement AOT in Virginia
- Identify strategies to maximize utilization and effectiveness

- **BHC strategic goals:** lower criminal justice involvement

Potential study: Availability and effectiveness of programs and services for substance use disorders (SUDs) in Virginia schools

- **Scope:**

- Review types and availability of SUD prevention programs and interventions in Virginia public schools
- Examine impact of available programs and services on students' substance use
- Compare Virginia's approach to other states' and to best practices
- Examine barriers to scaling evidence-based SUD prevention and intervention practices
- Provide options and recommendations to address barriers

- **BHC strategic goal:** complete continuum of care

Program monitoring schedule

Program	Budget			Review cycle		
	FY23-24 (\$M)	FY25-26 (\$M)	% Change	Frequency	First time	Most recent
1. STEP-VA	237.9	266.2	11%	Biennial	2023	2025
2. Project BRAVO / Behavioral Health Redesign	538.4	n/a	n/a	Biennial	2023	2026
3. Permanent Supportive Housing (PSH)	113.4	175.0	54%	Periodic	2024	2024
4. Crisis system build out	98.0	148.6	52%	Periodic	2024	2025
5. Dropoff centers / CITACs	24.6	24.6	0%	Periodic	2025	2025
6. Marcus Alert	13.5	29.0	115%	Periodic	2025	2025
7. Discharge Assistance Planning (DAP)	71.0	71.0	0%	Periodic	2026	2026
8. Others ¹						

Note: More details about each program available in handout

¹For details about other programs, see handout

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Topic selection framework

Results from BHC survey

 Discussion and prioritization



Next meeting
December 2, 2025 at 2:00

General Assembly Building
Senate Room A - 305

Visit bhc.virginia.gov for meeting materials