A Detailed Look at Virginia's Plan for Crisis System Transformation

National Models to know:

The Crisis Now Model:

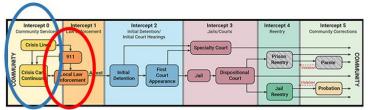


grams use technology for real-time across a system of care and leverag or performance improvement and ity across systems. At the same time, de high-touch support to individuals Mobile crisis offers outreach and support where people in crisis are. Programs should include contractually required response times and medical backup. These programs offer short-term "sub-acute" care for individuals who need support and observation, but not ED holds or medical inpatient stay, at lower costs and without the overhead of hospital-based acute care.

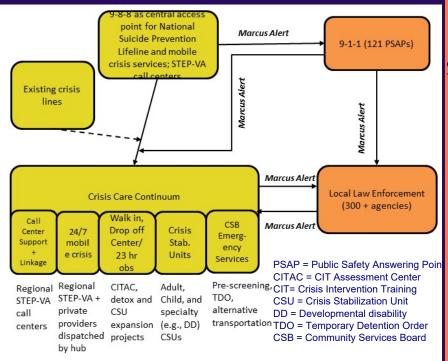
These must include a recovery orienta trauma-informed care, significant use of staff, a commitment to Zero Suicide/Suicide Care, strong commitments to safety i consumers and staff, and collaboration w enforcement.

The Sequential Intercept Model:





Understanding Virginia's Projects and Plans at Intercept 0 and 1:



Across system:

(1) Shared triage levels across STEP-VA, Marcus Alert, and 9-1-1 (2) Shared data, reporting, and quality improvement requirements

Marcus Alert

The Marcus-David Peters Act was signed into law in late 2020 and is complementary to other plans and investments. The Crisis Now model is primarily an Intercept 0 Model, in terms of the Sequential Intercept Model,

whereas the Marcus Alert focuses specifically on Intercept 1 and the intersection of Intercept 1 and 0. Both are necessary investments to build a coordinated, health-focused continuum of crisis services that are equitably accessible and supportive to all Virginians.

9-8-8 Federal Requirements

A new federal law requires that all states use the three digit code 9-8-8 as a single access point to the National Suicide Prevention Lifeline and the crisis care continuum. Virginia will use this as the access point for mobile crisis services. This is required of all states by July 16, 2022.

Behavioral Health Enhancements

This refers to new Medicaid reimbursement rates. Four crisis rates for mobile crisis response, follow-up stabilization, 23-hour observation, and per diem for Crisis Stabilization Units are planned for December, 2021.