



CHANGING  
**Maryland**  
*for the Better*

Presentation  
to  
Justice Reinvestment Oversight Board

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April 24, 2017



MARYLAND  
DEPARTMENT OF HEALTH

# History/Background of 8-505 and 8-507 Services

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- **Health-General § 8-505 and Health-General § 8-507 was initially enacted in 1989; revised in 2007** to ensure that DHMH gave notice to the court that the defendant was receiving appropriate treatment and that he/she could benefit from treatment as a condition of his/her release after conviction or at any other time that the defendant voluntarily agreed to participate.
- **Effective October 1, 2017**, as a part of the 2016 Justice Reinvestment Act, **DHMH will be required to place individuals in court-ordered treatment within 21 days.**
- **H-G § 8-505** was designed as a structured approach for the court to divert individuals with a substance use disorder from jail/prison to treatment. This was especially important in cases where it appeared the crime committed was a result of the person's addiction.
- **H-G § 8-507** requires DHMH to facilitate treatment services for those who have been assessed as needing treatment.



## Health-General § 8-505

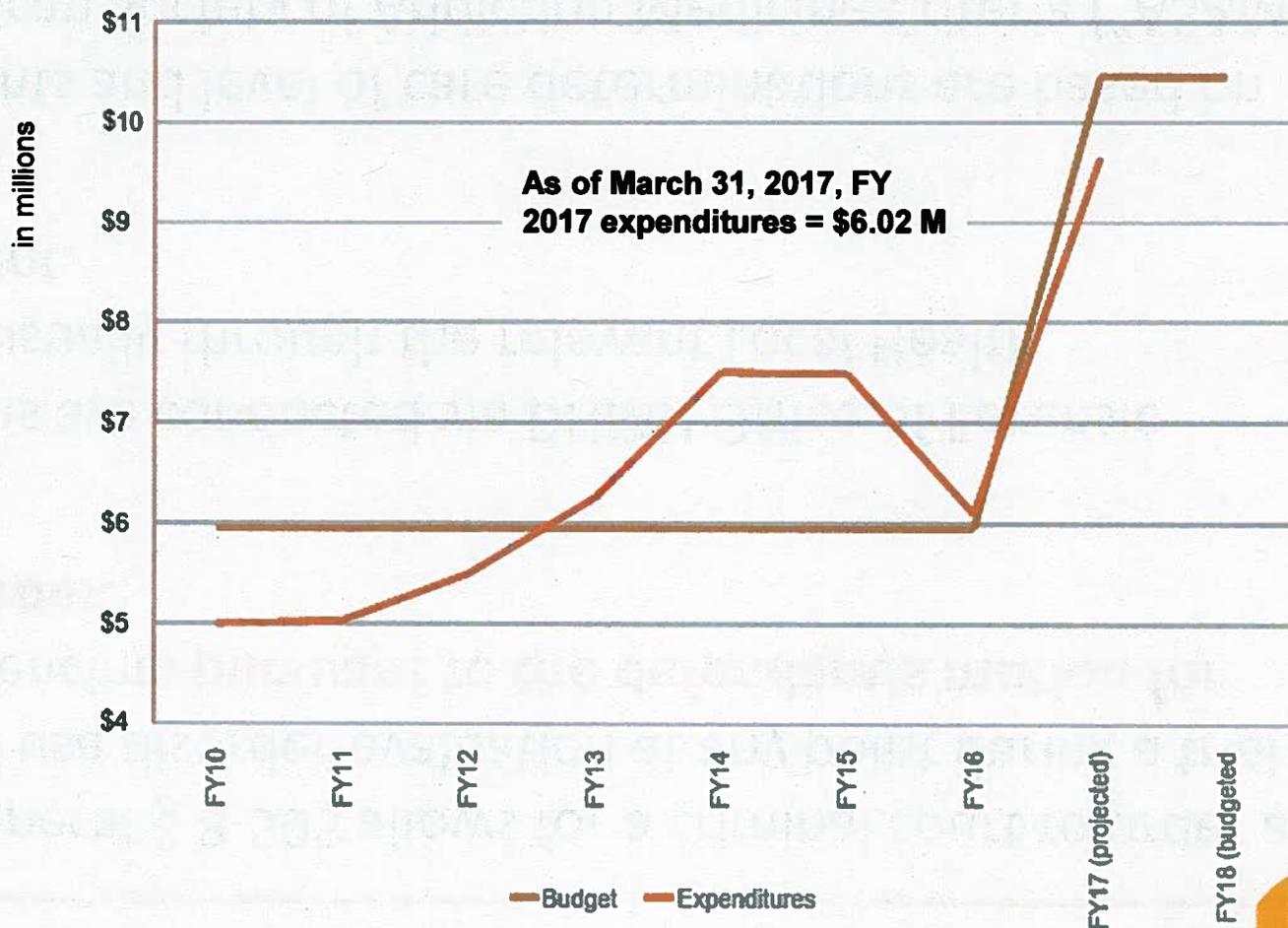
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- Health-General § 8-505 allows for a criminal court to order a substance use disorder evaluation at any point during a trial or after sentencing, **pursuant to the defendant's motion for such an order.**
- Evaluations are conducted via DHMH Office of Forensic Services, usually through the relevant Local Health Department.
- Assessments and level of care determinations are based on the American Society of Addiction Medicine Criteria (“ASAM Criteria”).



# Funding for residential placements under 8-507

A total of **\$10.5M** is available **FY 2017** to support this service. The **FY 2018 appropriation** is **\$10.5 M.**



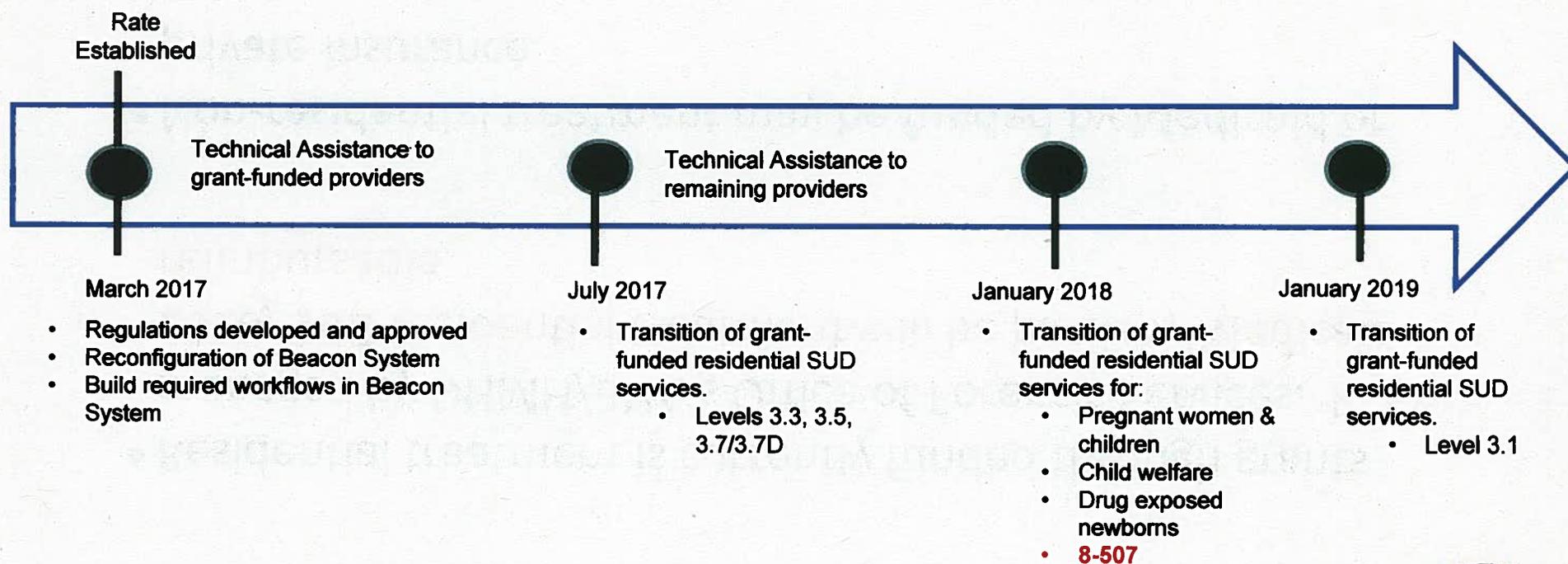
## Health-General § 8-507 Funding

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- Residential treatment is currently funded through grants managed by DHMH/BHA's Office of Forensic Services. **In FY 2018, SUD residential treatment will be partially Medicaid reimbursable.**
- Non-residential treatment may be funded by Medicaid or private insurance.



# Transition of Residential Substance Use Disorder Services to Fee-for-Service



# 1115 Waiver Requirements for Reimbursement for Residential Services

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- **ASAM medical necessity criteria must be met** to obtain reimbursement.
- Medicaid will reimburse providers for **clinical services** rendered during a maximum of **two 30-day stays** within one year.
- Costs of **clinical care beyond reimbursable 30 day span will be funded through the BHA's State budget.**
- **Room and board costs are not reimbursable.** Those costs will be funded through BHA's State budget.



# Substance Use Disorder Services Available for Individuals Receiving § 8-505 Evaluations

- Inpatient detoxification
- Alcohol and/or drug assessment
- Individual therapy
- Group therapy
- Intensive outpatient program services
- Partial hospitalization
- Ambulatory detoxification
- Opioid maintenance therapy for individuals 18 and over
- Laboratory services

**Medicaid-eligible Services**

- **Supported employment**
- **Respite care**
- **Crisis services**
- **Peer support**
- **Recovery services**
- **Residential rehabilitation programs**

**Non-Medicaid-eligible Services**



# Current Residential Treatment Program Capacity

- Existing Capacity. BHA Contracts with 3 programs for **245 available residential treatment slots**
  - Gaudenzia - 135
  - Jude House - 45
  - New Horizons -65

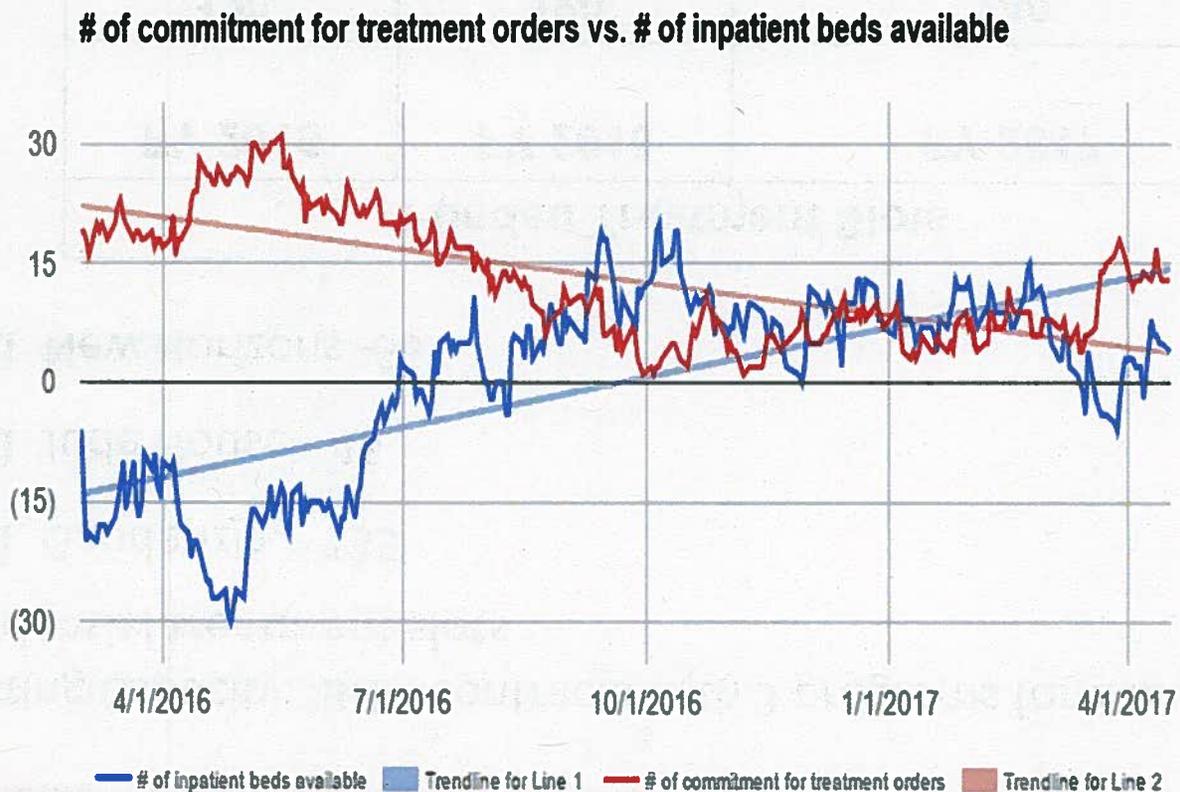
<b>Funded Treatment Slots</b>		
<b>FY 2015</b>	<b>FY 2016</b>	<b>FY 2017</b>
<b>120</b> (\$6M from base budget)	<b>180</b> (\$3M from JRA – July 2016)	<b>240</b> (\$1.5M from Governor's Budget – January 2017)



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# State Psychiatric Hospital Bed Capacity Issue

## Census versus criminal commitments, waiting for admission for all five state hospitals:



April 17, 2014



MARYLAND  
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& MENTAL HYGIENE

## Number of Forensically-Involved Individuals Served Annually

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- Individuals Receiving Health-General § 8-505 Assessments – 1,200
- Individuals Receiving Health-General § 8-507 Assessments - 400
- **Wait time for placement** can be **from 1 week to 6 months** depending upon the defendants' willingness to enter treatment and clearance for warrants, detainers and other court orders.



# Number of Individuals with H-G § 8-507 Orders Served

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<b>Residential Services Render to Date in FY 2017</b>		
<b>Number in Treatment</b>	<b>Number Scheduled for Placement</b>	<b>Total</b>
<b>174</b>	<b>34</b>	<b>208</b>



## Forensically-Involved Individuals Served This Quarter

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- From January through March 2017, **162** individuals were committed to DHMH pursuant to 8-507 to be placed in residential SUD treatment programs by the Office of Forensic Services.
- As of April 13, 2017, **105** individuals were awaiting residential placement pursuant to 8-507.



# Average Wait Time for § 8-507 Placements

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- The estimated average wait times for § 8-507 placement in **FY12-14 was 167 days, with a median of 133 days** (N=1,276 cases).
- **January 2017-April 2017** - 133 admissions. For these 133 cases, the **average wait time to admission was 91 days, and the median was 85 days.**
  - Wait time has been reduced by 56% in FY 17 when compared to FY 2012-14.
  - The average LOS is about 4 months.



## Factors that Affect Wait Time include....

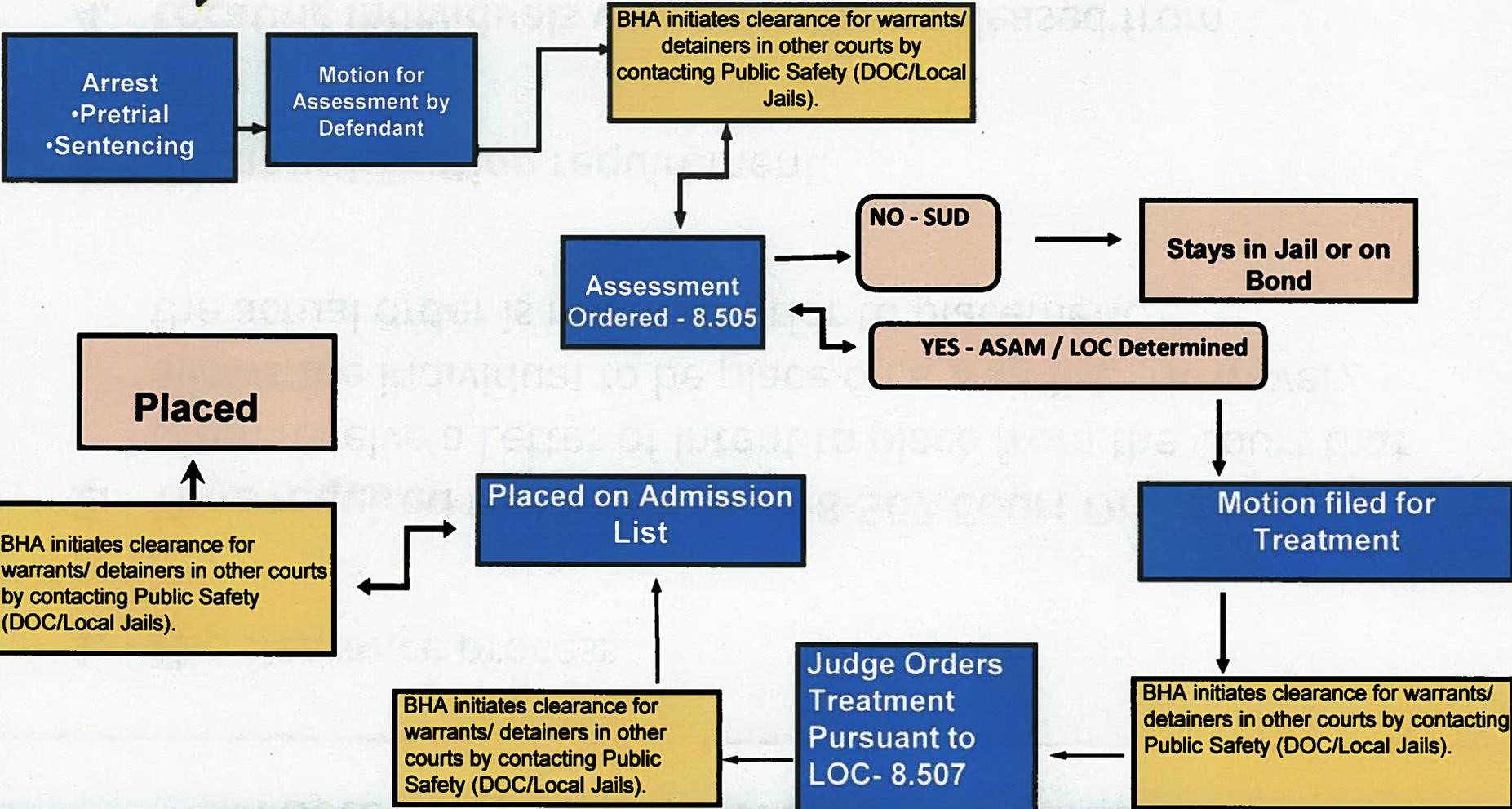
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1. The **clearance** process.
2. **Time required to receive the § 8-507 Court Order.** Clients often receive a Letter of Intent to place from the Court that allows the individual to be placed on a wait list. However, the actual order is required prior to placement.
3. **Client notification** requirement.
4. **Locating individuals** who have been released from incarceration who have been placed on the wait list for residential services.



# § 8-505 and § 8-507 Process

**Defendant Driven**



# Contact Us

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**BHA Office of Forensic Services Webpage**

**<http://bha.dhmh.maryland.gov/Pages/Forensics.aspx>**



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# Questions?

