



Commonwealth of Virginia

Virginia Department of Medical Assistance Services

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Virginia Launches Enhanced Behavioral Health Services for Medicaid Members

New services build on more proactive strategies and greater access to community-based care

Richmond – Governor Ralph Northam today announced the launch of new behavioral health services giving Medicaid members greater access to community-based care.

“These new services for Medicaid members, paired with other investments in community behavioral health services, will help Virginians get the care they need in their own communities,” Governor Northam said. “We know that when we can reach people before they are in crisis, they have better outcomes. And that’s what we all want for our family, friends, and neighbors.”

The new services, which began on July 1, 2021, are funded in the state budget approved earlier this year and are part of a multi-phase initiative to improve the quality of behavioral health care in the Commonwealth and reduce strain on state psychiatric facilities. The new services

give Medicaid members alternatives to inpatient hospitalizations and offer supports for those discharged from an inpatient facility to reduce readmissions.

“We welcome the beginning of a new and transformative approach to behavioral health care that offers more responsive and effective services to our Medicaid members while ensuring a cost-efficient and quality system for our taxpayers,” said Secretary of Health and Human Resources Daniel Carey, MD. “I am pleased that these new services include increased support for young people working to overcome adverse childhood experiences.”

The innovative services were developed through a collaboration between the Department of Behavioral Health and Developmental Services (DBHDS) and the Department of Medical Assistance Services (DMAS) with support from hundreds of stakeholders.

“More than one in four of our 1.8 million Virginia Medicaid members has a behavioral health diagnosis, making our agency the largest payer for these critical services in the Commonwealth,” said Karen Kimsey, DMAS Director. “These service enhancements allow us to confront the devastating effects of the pandemic on Virginians’ mental health. We are proud to partner with our DBHDS colleagues to develop a system focused on prevention and earlier intervention strategies that enable our members to find their path to recovery and resilience.”

The initiative is named Project BRAVO in honor of former DBHDS Commissioner Hughes Melton and references the call name he used as a pilot.

“Project BRAVO is a fitting honor for Commissioner Melton, who devoted himself to providing a continuum of evidence-based, trauma-informed and prevention-oriented services essential for whole person health,” said Alison Land, DBHDS Commissioner. “We are pleased to join with DMAS to give Virginians greater access to care in the least restrictive environment, and are committed to ensuring high quality behavioral health services will be available to all Virginians, through both STEP-VA and Project BRAVO.”

New services covered by Medicaid:

Assertive Community Treatment (ACT): Adults with serious mental illness receive care through a single team that works closely together to support the individual and is available 24/7.

Mental health partial hospitalization program: Adults and youth receive intensive services during daytime hours for five or six days per week while continuing to live in their homes.

Mental health intensive outpatient program: Adults and youth receive short-term, focused therapy and counseling both individually and with members of their support system two to three times weekly.

“The Virginia Association of Community-Based Providers (VACBP) and our members have been grateful for the opportunity to participate in the development of the first phase of Project

BRAVO services, which are being launched this year,” said Mindy Carlin, VACBP Executive Director. “Implementation of these services represents an important first step toward ensuring that Virginia’s behavioral health system can better meet the increasing needs of Medicaid members throughout Virginia, and we look forward to next steps to integrate prevention and early intervention services, as well as services focused on recovery, into our continuum of care.”

"When fully implemented, Project BRAVO will transform Virginia's mental health service system, creating a continuum of evidence-based and trauma-informed care," said Anna Mendez, Executive Director, Partner for Mental Health. "Evidence-based community interventions should be the foundation of all service systems and are proven to reduce the need for more intensive treatment. Avoiding hospitalization whenever possible is always an important goal, even more so now as Virginia is experiencing overutilization of its state hospital system."

"The Virginia Association of Community Services Boards and its members appreciate the state's sustained attention to individuals with behavioral health and developmental disability service needs through these initiatives," said Jennifer Faison, Executive Director, Virginia Association of Community Services Boards.

Implementation of these three new services will continue over the next several months as the two agencies work together to improve accessibility across geographic regions. Virginia Medicaid members interested in the new services should contact their managed care organization or their behavioral health provider for more information. An additional set of six new services will launch in December 2021.

July 1 was also the implementation date for the next phase of Virginia’s Behavioral Health System Transformation Excellence and Performance, known as STEP-VA. This new phase, which is focused on Peer & Family Services and Military Services, will also see the start of funding for adult mobile crisis and Virginia’s new Marcus Alert system. STEP-VA is a multi-year project intended to foster wellness among individuals with behavioral health disorders in everyday life to prevent crises before they arise. Anticipated outcomes upon full implementation would include fewer admissions to state and private hospitals, decreased emergency room visits, and reduced involvement of individuals with behavioral health disorders with the criminal justice system.