Help people transition to community from state facilities

Issues:

- The Transition to Community initiative helps individuals leave Anoka-Metro Regional Treatment Center and the Minnesota Security Hospital after they no longer need their services. The initiative has helped people with extremely significant barriers successfully return to their communities. From July 2016 to July 2018, 302 people received services and support through the initiative.
- However, the initiative is not available to people at other facilities. People in state-operated Community Behavioral Health Hospitals face similar barriers. Some people waiting in community hospitals for a bed at Anoka-Metro Regional Treatment Center could return to their community with the right supports.
- Programs often can’t meet the needs of people age 65 and up, creating another barrier to discharge.
- In 2017, 410 people remained in state-operated facilities, including Anoka-Metro Regional Treatment Center, Minnesota Security Hospital or a Community Behavioral Health Hospital, when they no longer required that level of care. This resulted in 13,133 total bed days.
  - Of these, 24 people were over the age of 65, accounting for a total of 1,636 bed days.
- Counties pay up to 100 percent of the treatment costs for people who no longer meet medical necessity for care in state-operated facilities.

Proposal:

Governor Tim Walz proposes to:

- Expand eligibility for Transition to Community to people at Community Behavioral Health Hospitals.
- Expand eligibility to people state-operated Community Behavioral Health Hospitals and are hospitalized, civilly committed and on the waiting list for Anoka-Metro Regional Treatment Center.
- Allow people age 65 and older to transition to the community through the Elderly Waiver program.

Benefits:

- The state will help 110 more people transition to their communities by 2021.
- More people will have the resources, services and supports to leave state-operated facilities and return to their community, or avoid an institutional stay altogether.
- Fewer people will remain in state-operated programs when they no longer require the level of care those programs provide.
- Counties will get relief from paying the entire cost of treatment for people who no longer meet medical necessity for care in a state-operated facility.
More people in Transition to Community will access home and community-based waiver services.

**Fiscal impact:**

- Invests $2.4 million in FY 2020-21 and $4.6 million in FY 2022-23

**Related information:**


*DHS Communications: March 2019*