

2024 Priority Admissions Recommendations & Legislation



Priority Admissions Task Force Report Recommendations

- 1. Immediately begin to increase DCT capacity and access
- 2. Joint Incident Collaboration
- Approve exception to priority admissions law for 10 civilly committed individuals waiting in a hospital to be added to the waitlist
- 4. Create and implement new priority admissions criteria to DCT facilities

Priority Admissions Task Force Report Recommendations

- 5. Increase access to services provided in the community
- 6. Administer medications in jails
- 7. Relieve counties of certain DNMC costs
- 8. Expedite section 1115 waiver application for individuals in custody
- 9. Increase forensic examiner accessibility

- 1. Immediately begin to increase DCT capacity and access
 - Repurposing of CARE St. Peter to psychiatric beds in the Forensic Mental Health Program
- 2. Joint Incident Collaboration
 - Legislation not required to implement
- 3. Approve exception to priority admissions law for 10 civilly committed individuals waiting in a hospital to be added to the waitlist
 - Enacted
- 4. Create and implement new priority admissions criteria to DCT facilities
 - Enacted

- 5. Increase access to services provided in the community
 - MA payment for Assertive Community Treatment (ACT) and Intensive Residential Treatment Services (IRTS)
 - Engagement Services Pilot Grants
- 6. Administer medications in jails
 - County correctional facility long-acting injectable antipsychotic medication pilot -
 - 2-year county correctional support pilot
- 7. Relieve counties of certain DNMC costs
 - Cost of care changes for Anoka Regional Treatment Center (AMRTC) and Community Behavioral Health Hospitals (CBHHs)
 - Debt forgiveness and reimbursements for Beltrami and Todd Counties

- 8. Expedite section 1115 waiver application for individuals in custody
 - DHS is required to apply to federal HHS to implement a medical assistance reentry demonstration
- 9. Increase forensic examiner accessibility
 - No legislation

- Other related legislative action:
 - Mentally III and Dangerous Civil Commitment Reform Task Force
 - Report on Inpatient Substance Use Disorder (SUD) Beds
 - Legislative approval for DCT facility closures in certain circumstances
 - Priority admissions review panel



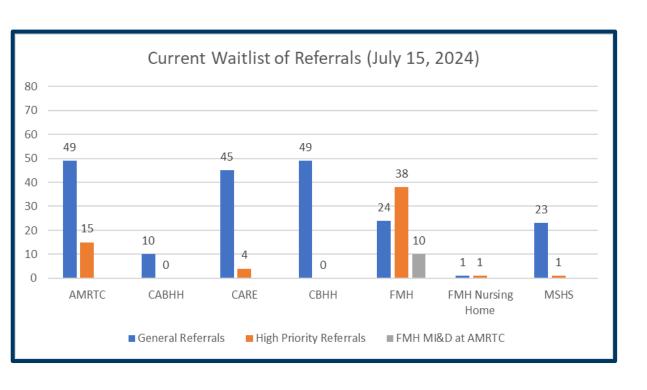
DHS/DCT Progress to Date

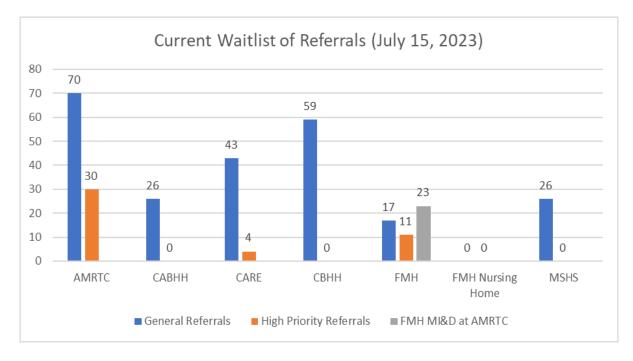


Access to Care

- Opening of Ironwood Unit at Forensic Mental Health
 - Unit re-opened on June 3.
 - Census as of this week is 12. Hope to increase by 2 next week.
 - Forensic Mental Health has accepted 14 patients from AMRTC since January; 7 since June.
 - 11 remain at AMRTC and 2 at CBHHs.

DCT Waitlist Update





Executed Strategies and Achieved Results

- Standardizing best practices in treatment planning and agency wide training
- Improving cohesion of the treatment team which includes focus on tribal and county partners
- Enhancing county reports to include barriers to discharge
- Increasing diversion efforts and pre-admission review to ensure effective utilization of bed
- Leveraging relationships with community providers to improve referral effectiveness
- Increased ability to get microgrants to community providers through ADSA to remove barriers to discharge
- Percentage of patients who do not meet criteria continue to trend down (see chart)
- CY25 YTD AMRTC admissions +12% over LY





Key Ongoing Continuous Improvement Strategies

- Development of a standardized training on DNMC practices for DCT staff and county partners
- Clarification of roles and responsibilities between state and county staff
- Ongoing PSDA to increase efficiencies in the referral process
- Weekly performance improvement meeting meetings with Hennepin and Ramsey counties--focused on two key initiatives:
 - 1. Standardizing and streamlining funding and eligibility processes to reduce timelines and assure everybody was working efficiently and collaboratively together to support discharge.
 - 2. Assuring alignment between DCT and the county on the discharge plan and refinement of escalation processes

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Admissions Framework Implementation

- New factor prioritization
- Notification processes
- Future steps and needs
- 10 patient exception
- Recent examples (2 recent admissions from hospitals)

County Correctional Facility Support

- Mental Health Medication Pilot Program
- DCT County Correctional Facility Support Pilot Program
 - Working on getting positions posted and hired.
 - Survey and pilot site selection

Requirements of this Panel

- Evaluate the 48-hour timeline for priority admissions and submit a report to the Legislature by February 1, 2025 (new this legislative session)
- Advise the DHS Commissioner on the effectiveness of the new framework and about priority admissions generally (Task Force Recommendation)
- For one year following the implementation of the new framework, the panel must review deidentified data quarterly to ensure the framework is implemented and applied equitably (task force recommendation)



Questions?