

AHS Facilities Report Overview

Glossary of Terms

- I. **Forensics** – psychiatric care for individuals with criminal justice involvement. There are considered to be four categories of individuals who receive “forensics” psychiatric care:
1. Individuals who are awaiting a psychiatric evaluation as part of a trial
 2. Individuals who have been found incompetent to stand trial
 3. Individuals who were tried and found not guilty by reason of insanity
 4. Individuals who have been convicted and are in DOC custody who develop the need for acute psychiatric care on either a voluntary or involuntary basis
- Forensic psychiatric care is provided by either DOC or DMH, depending on the level of care required for the individual. In this proposal, 30 beds would be designated for DOC acute psychiatric care (non-hospital level). Hospital level of care is provided by DMH (20 beds in proposal and the 12 beds in temporary forensic unit).
- II. **Institutions of Mental Disease (IMD)** – a hospital, nursing facility, or other institution of more than 16 beds that is primary engaged in providing diagnosis, treatment, or care of persons with mental diseases, including medical attention, nursing care, and related services. *See pages 6-7 of the report.*
- III. **IMD Exclusion** – The IMD exclusion prohibits the use of federal Medicaid funding for care provided to patients aged 22-64 in mental health and substance use disorder residential treatment facilities larger than 16 beds. *Page 6 in the report.*
- IV. **Centers for Medicare and Medicaid Services (CMS)** – Part of the U.S. Department of Health and Human Services, CMS oversees many federal health care programs, including those that involve health information technology. Medicare is the federal health insurance program for the elderly and Medicaid is the federal needs-based program that helps with medical costs.
- V. **Decentralized System of Inpatient Care** – People in need of hospitalization are provided treatment at either the state-run inpatient facility, or one of the six Designated Hospitals throughout the state. Designated hospitals provide treatment to both voluntary and involuntary patients:
1. Level 1 Involuntary – Involuntary hospitalization stays paid at-cost to contracted and state providers for people who are the most acutely distressed who require additional services.
 2. Non-Level 1 Involuntary – Involuntary hospitalization stays for individuals who do not require additional resources.
 3. Voluntary – Voluntary hospitalization stays.
- VI. **Designated Agency (DA)** – A community mental health (and developmental disabilities) agency designated through a contract with the state for the provision of mental health services to those in need of care.
- **Designated Qualified Mental Health Professional (QMHP)** – is an individual designated by the Department of Mental Health and employed by a DA or DOC to assess individuals experiencing a mental health crisis for their need for involuntary hospitalization. Such persons may also be referred to as crisis clinicians or screeners.
- VII. **Designated Hospital** – A hospital or part thereof that is designated by the Department of Mental Health to provide psychiatric services to individuals on an involuntary basis.

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Current Bed Capacity – DMH

	Pre-Irene	FY 2017	Dept. Funding	Dept. Conducting UR
Non Level 1	130	146	DMH/DVHA	DMH/DVHA
Level 1	54	45	DMH	DMH
Total Inpatient Beds	184	191		
Crisis Beds	29	40	DMH	provider
Secure Residential	0	7	DMH	DMH/Judiciary
Peer Supported Intensive Residential	0	5	DMH	provider
Intensive Residential	20	42	DMH	provider
Total Inpatient, Crisis and Residential Beds	233	285	~20% increase in bed capacity	
<i>Definitions: Utilization Review (UR) involves clinical review of medical care to assure medically necessary care is being provided.</i>				

Non Level 1	Pre-Irene	FY 2017
Brattleboro Retreat	62	75
University of Vermont Medical Center	28	28
Rutland Regional Medical Center	16	17
Central Vermont Med Center	14	14
Windham Center	10	10
White River Junction VA Medical Center	0	2

Level 1	Pre-Irene	FY 2017
Vermont State Hospital	54	
Brattleboro Retreat		14
Berlin (VPCH)		25
Rutland Regional Medical Center		6

	Pre-Irene	FY 2017
Adult Crisis Beds	29	40
Secure Residential	0	7
MTCR	0	7
Peer Supported Residential	0	5
Soteria House	0	5
Intensive Residential	14	16
Second Spring	0	8
Westford	6	6
Meadowview	0	8
Hilltop	0	4
Maplewood		

	FY 2017
Inpatient Children/Adolescent (invol/vol)	30
Crisis Beds Howard Center	6
Hospital Diversion NFI North	6
TOTAL	42
Hospital Diversion NFI South (in development)	6
Projected mid CY 2017	48
All voluntary and involuntary inpatient admissions and children's are paid for and managed by DVHA	
There are several children's residential programs but DMH does not contract for a particular number	