



# Criminal Justice Council - Behavioral Health Subcommittee

RI International  
July 17, 2021



# Outline of Presentation



- Introduction of RI Team
- RI Experience
  - Provider
  - International Thought Leader
- RI National Outcomes
- Reimbursement Strategies
- Implications of 988 implementation
- Key Considerations
- Q&A



# RI Team



- Jamie Sellar, LPC – Chief Strategy Officer
- Tom Castellanos - Executive VP of Facilities
- Wayne Lindstrom, PhD, VP of Business Development and Consulting
- Carlos Mackall, LMSW – VP, Northeastern US



# RI Provider Experience

## 30 years



- Facility-based crisis services
- Mobile Crisis Services
- Call Center Operations
- 24/7 BH Urgent Care Centers
- FSP/ACT
- Inpatient
- Crisis Respite
- Campus of Connection
- Temporary & Permanent Supportive Housing
- Board & Care
- Supported Employment
- Peer Support
- Traditional & Non Traditional Outpatient Services
- SUD Services (Detoxification, MAT, Residential, Outpatient)





# RI Thought Leadership



- ***Crisis Now*** (2016 – National Action Alliance)
- ***SAMSHA National Guidelines for Behavioral Health Crisis Care*** (Feb 2020)
- **Interdepartmental Serious Mental Illness Coordinating Committee (ISMCC)**
- ***Zero Suicide*** (2014 – National Action Alliance)
- **National 988 Crisis Services Learning Community Jam**
- Consulting in 8 states, 2 countries and 16 counties (last 2 years)
- Seminal Research in Peer Support Services (Ashcroft)



# International Peer Leadership



- 2nd largest employer of Peer Support Specialists in the World Behind the US Federal Government (VA).
  - Approximately 50% of our 1,400 employees self-identify with lived experience
  - A pioneer in the use of peer support in crisis services and was
  - A major contributor to the seminal research that established peer support as a SAMHSA Evidence-based Best Practice.
  - Provided more than 14,000 individuals in 21 states & 4 countries in Peer Employment Training.



# Community Impact

## PEORIA CRISIS RECOVERY CENTER LAW ENFORCEMENT DROP-OFFS



**Client Satisfaction**  
**91%**

One of the largest employers of peers in the world

**50%** of employees with lived experience

**Originators** of the **living room model** in crisis care in 2002

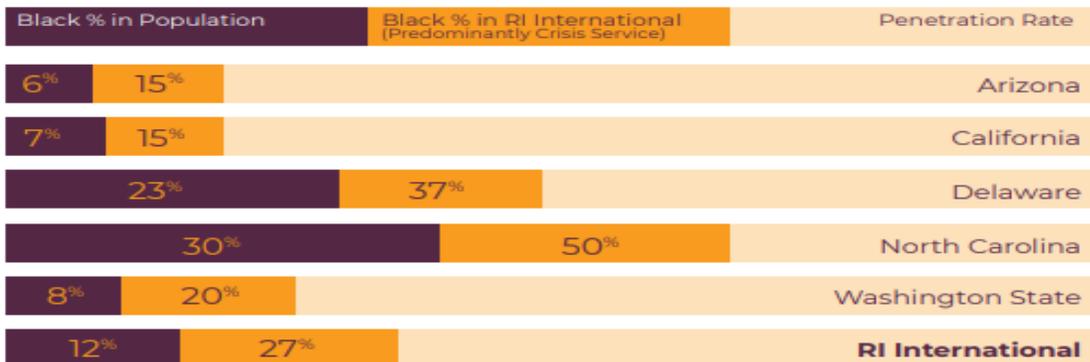
Contracted for **direct services** in **10 States** and **2 Countries**

Largest peer credentialing training provider in the world

**21 States**  
**4 Countries**

**Law Enforcement Drop-Offs:**  
**6,735**

## Providing Access for African American Clients and Communities



**913** **2020 Peer Employment Training (PET) Graduates**

**14,560** **PET Graduates Total to date**

**Lives Touched by Crisis Programs:**  
**31,809**



<b>Crisis Now Crisis System Calculator (Basic)</b>		
	No Crisis Care	Crisis Now
# of Crisis Episodes Annually (200/100,000 Monthly)	13,121	13,121
# Initially Served by Acute Inpatient	8,922	1,837
# Referred to Acute Inpatient From Crisis Facility	-	730
Total # of Episodes in Acute Inpatient	8,922	2,567
<b># of Acute Inpatient Beds Needed</b>	<b>190</b>	<b>55</b>
<b>Total Cost of Acute Inpatient Beds</b>	<b>\$ 53,086,757</b>	<b>\$ 15,274,153</b>
# Referred to Crisis Bed From Stabilization Chair	-	2,921
<b># of Short-Term Beds Needed</b>	<b>-</b>	<b>22</b>
<b>Total Cost of Short-Term Beds</b>	<b>\$ -</b>	<b>\$ 6,206,466</b>
# Initially Served by Crisis Stabilization Facility	-	7,085
# Referred to Crisis Facility by Mobile Team	-	1,260
Total # of Episodes in Crisis Facility	-	8,345
<b># of Crisis Receiving Chairs Needed</b>	<b>-</b>	<b>26</b>
<b>Total Cost of Crisis Receiving Chairs</b>	<b>\$ -</b>	<b>\$ 8,866,381</b>
# Served Per Mobile Team Daily	4	4
<b># of Mobile Teams Needed</b>	<b>-</b>	<b>4</b>
Total # of Episodes with Mobile Team	-	4,199
<b>Total Cost of Mobile Teams</b>	<b>\$ -</b>	<b>\$ 1,180,872</b>
<b># of Unique Individuals Served</b>	<b>8,922</b>	<b>13,121</b>
<b>TOTAL Inpatient and Crisis Cost</b>	<b>\$ 53,086,757</b>	<b>\$ 31,527,872</b>
<b>ED Costs (\$520 Per Acute Admit)</b>	<b>\$ 4,639,515</b>	<b>\$ 1,334,884</b>
<b>TOTAL Cost</b>	<b>\$ 57,726,272</b>	<b>\$ 32,862,756</b>
<b>TOTAL Change in Cost</b>		<b>-43%</b>

<b>State / County Contributions</b>	
Crisis Line and Technology (Core Crisis Service)	\$ 747,000
Mobile Crisis (Core Crisis Service)	\$ 536,706
Crisis Receiving Centers (Core Crisis Service)	\$ 4,029,770
Short-Term Beds (Not core crisis service)	\$ 1,269,222
<b>Total</b>	<b>\$ 6,582,699</b>

<b>Crisis Call Projections (Volume)</b>	
Projected Annual NSPL Call Volume	15,323
Projected Local Crisis Call Volume	11,326
Projected Crisis Calls to 911 Volume	39,973
Projected Total Crisis Call Volume	66,622

<b>Population Census</b>	<b>546,700</b>
<b>ALOS of Acute Inpatient</b>	<b>7</b>
<b>Avg. Cost of Acute Bed/Day</b>	<b>\$ 850</b>

Please edit these 3 variables to estimate optimal allocations

Crisis Services Task Force



## Crisis Now

Transforming Services is Within Our Reach



<b>Vibrant 988 Modeling (Avg but Varies Significantly)</b>	
9-8-8 Annual Call Volume	15,323
988 Annual Funding Projection	\$ 996,000
988 Revenue per Call	\$ 65.00

<b>Crisis Call Projections (per Capita)</b>	
Projected Annual 988 Calls Per Capita	0.028028313
Projected Local Crisis Calls Per Capita	0.020716579
Projected Crisis Calls to 911 Per Capita	0.073117338
Projected Total Crisis Calls Per Capita	0.121862229



### Projected Annual Crisis Care Costs by Payer Category

	FMAP	Crisis Line	Mobile Crisis	Crisis Receiving Center	Short-Term Beds	Total
Base Medicaid	70%	\$ 742,166	\$ 750,117	\$ 5,338,787	\$ 3,737,151	\$ 10,568,221
Enhanced Medicaid	90%	\$ 742,166	\$ 1,350,210	\$ 9,609,817	\$ 6,726,872	\$ 18,429,065
Medicare	0%	\$ 148,433	\$ 150,023	\$ 1,067,757	\$ 747,430	\$ 2,113,644
Commercial	0%	\$ 742,166	\$ 450,070	\$ 3,203,272	\$ 2,242,291	\$ 6,637,799
Uninsured	0%	\$ 593,732	\$ 300,047	\$ 2,135,515	\$ 1,494,860	\$ 4,524,155
<b>Total</b>		<b>\$ 2,968,662</b>	<b>\$ 3,000,467</b>	<b>\$ 21,355,149</b>	<b>\$ 14,948,604</b>	<b>\$ 42,272,883</b>

### Projected Annual State / County / Block Grant Funding Contribution by Category

	FMAP	Crisis Line (50% Admin FMAP)	Mobile Crisis	Crisis Receiving Center	Short-Term Beds	Total
<b>Enhanced FMAP Rate (if App)</b>	<b>N/A</b>		<b>85%</b>			<b>N/A</b>
Base Medicaid	70%	\$ 371,083	\$ 112,518	\$ 1,600,035	\$ 1,120,024	\$ 3,203,659
Enhanced Medicaid	90%	\$ 371,083	\$ 135,021	\$ 960,982	\$ 672,687	\$ 2,139,773
Medicare	0%	\$ 148,433	\$ 150,023	\$ 1,067,757	\$ -	\$ 1,366,214
Commercial	0%	\$ 742,166	\$ 450,070	\$ 3,203,272	\$ -	\$ 4,395,508
Uninsured	0%	\$ 593,732	\$ 300,047	\$ 2,135,515	\$ 1,494,860	\$ 4,524,155
<b>Total</b>		<b>\$ 2,226,497</b>	<b>\$ 1,147,679</b>	<b>\$ 8,967,561</b>	<b>\$ 3,287,572</b>	<b>\$ 15,629,308</b>

**\$ 4,871,123 Parity Opportunity**



**911**

**Medical Emergency  
or  
Immediate Danger**

**988**

**Mental Health Crisis  
&  
Suicide Hotline**

# KEY CONSIDERATIONS



## True crisis care serves anyone, anytime, & anywhere

- A “no-wrong-door” crisis center provides immediate & equitable access;
  - No medical clearance is required for admission;
  - There is no exclusionary criteria for admission;
  - Involuntary & voluntary admissions are accepted;
  - The majority of those admitted, arrive from the back of a police car; &
  - Police are back on the street in under 5 minutes.
- It consists of two components: a 23/7 observation unit with recliners & a stabilization unit with beds;
- It is where meaningful engagement with guests is the “secret sauce” for safety & stabilization;
- It is where guests are engaged first & last by peer support specialists;



# KEY CONSIDERATIONS



## True crisis care serves anyone, anytime, & anywhere

- It is one component within a optimized crisis response system with a continuum of services;
- It must be able utilize community resources to address the social determinants of health;
- It requires sustainable funding streams & appropriate bill coding & rates to support & sustain crisis care;
- It requires capitalization, start-up funding, & safety-net financing;
- It requires system alignment to support ongoing sustainability; &
- Health & criminal justice system savings can be reinvested to buildout a more robust crisis response system.

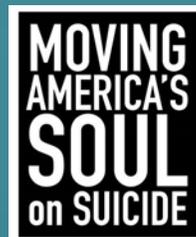


# Thank You!

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Crisis Now: Transforming Services is Within Our Reach

