

Substance Use Disorder, ICF/IID, and Medical-Rehabilitation Services  
Committee Meeting  
April 24, 2025 at 10:30 a.m.  
VIA WEBEX

**Task Force Members in Attendance (alphabetical by last name):** Dr. Kathy Baker; Carrie Davis; Paul Dreyer; Deepak Madala; Tom Orsini; Dr. Marilyn West

**Staff in Attendance:** Erik O. Bodin, COPN Director, VDH OLC; Geoff Garner, Senior Policy Analyst, VDH OLC; Val Hornsby, Policy Analyst, VDH OLC, Kay Feagin, VDH Policy Specialist, VDH OLC

\* VDH staff experienced a slight delay at the outset due to an unannounced fire drill.

1. Call to Order and Welcome – Paul Dreyer, Chair

The meeting was called to order.

2. Roll Call

Mr. Hornsby took the role. Ms. Bell was absent from the meeting.

3. Review of Agenda – Val Hornsby, Policy Analyst

Mr. Hornsby reviewed the agenda with the Task Force members.

4. Approval of Previous Meeting Minutes

Ms. Carrie Davis moved to accept the minutes.

Mr. Orsini seconded, and the committee approved the minutes unanimously.

5. Public Comment

No members of the public signed up for public comment.

6. Review of Committee Recommendations to the State Health Services Plan Task Force

Mr. Hornsby began reviewing the recommendations for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID). The recommendations pertain to facilities with more than 12 beds. The recommendation is to maintain current standards with one change,

which is a new facility will have a maximum of 12 beds as consistent with the Department of Behavioral Health Developmental Services (DBHDS). Mr. Hornsby reminded the committee members that currently, ICF/IIDs are not issued a license by DBHDS for a facility with more than 13 beds.

a. Discussion

Dr. Baker moved to accept these recommendations to present to the State Health Services Plan Task Force.

Dr. West seconded, and the committee approved unanimously.

Dr. West requested clarification that acronyms will be defined.

Mr. Hornsby affirmed there will be a definition section consistent with existing regulatory language that includes defining acronyms.

Mr. Madala wanted to confirm the term MR (mental retardation) will be updated to intellectual disability.

Mr. Hornsby confirmed that the change will be reflected in the updated regulatory language. Mr. Hornsby presented the recommendations on Medical-Rehabilitation services as discussed previously.

Dr. Baker moved the recommendations which Ms. Davis seconded.

The committee approved unanimously.

Mr. Hornsby presented the committee's substance use disorder services recommendations.

Ms. Davis asked for an update regarding recent General Assembly actions regarding recommended psychiatric services and the expedited review process.

Mr. Hornsby clarified that the legislative recommendations the full SHSP Task Force gave to the General Assembly regarding psychiatric services and expedited review became legislation sponsored by Senator Hashmi during the 2025 General Assembly session. This legislation passed

the General Assembly and becomes effective July 1, 2025. The SHSP Task Force more recently provided recommendations on the criteria for the State Health Services Plan regarding psychiatric services. Mr. Hornsby also clarified the change in terminology from substance abuse services to substance use disorder services.

Dr. Baker expressed full support, as it is consistent with contemporary practice. It further advances our ability to provide the community services needed for effective substance use treatment.

Dr. Baker made a motion to accept the recommendations.

Ms. Davis seconded, and the committee approved unanimously.

#### 7. Discussion of HB 2119 / SB 1203

Mr. Hornsby reviewed these bills with the committee.

Dr. West asked whether the committee needed to further discuss indigent care requirements.

Mr. Bodin explained indigent care is addressed and embodied in other COPN processes.

In addition, the topic of medical deserts was discussed by Dr. Baker, Mr. Orsini, and Mr. Bodin.

Dr. Baker wanted to ensure that there is access and that guardrails are put in place without sacrificing the quality of services. Therefore, she was not inclined to relax requirements at this time.

Mr. Orsini mentioned that planning districts are able to define the needs of the areas and staffing requirements should be considered. He further stated that medical deserts are subject to change in the future and that a criterion addressing whether it satisfies or solves a problem of medical service should be considered.

Mr. Dreyer stated that drive time must remain a factor during the decision-making process.

Ms. Davis concurred, stating guidelines regarding services may need to remain the same.

Mr. Bodin stated that VDH staff will explore analyzing and mapping poverty levels, location of existing services, and populations where medical deserts exist.

Mr. Garner stated procedurally, proponents will understand whether a new or expanded facility is needed in what may be deemed a medical desert based on multiple factors. He further stated that Mr. Orsini's point is valid, as circumstances can change in the future, so standards need to be crafted in a way that takes this into consideration.

Mr. Orsini stated a medical desert status may be a consideration (later clarified as a criterion by Mr. Garner), however, not a requirement.

Ms. Davis motioned that the criterion of this committee is for medical deserts to abide by the same standards for ICF/IID services, medical-rehabilitation services, and substance use disorder services as all areas of the Commonwealth when applying for a Certificate of Public Need (COPN).

Dr. West seconded, and the committee approved unanimously.

#### 8. Wrap-Up and Next Steps

Mr. Hornsby outlined that the next steps include VDH policy staff formatting these recommendations into a report for the committee chair to deliver to the State Health Services Plan Task Force and for VDH staff to schedule a meeting with the Chair to discuss the presentation of the recommendations to the full Taskforce. Mr. Hornsby stated that the committee will receive an email asking for approval of the minutes for this meeting.

Mr. Garner introduced Ms. Feagin to the Committee.

#### 9. Meeting Adjournment

The committee adjourned at 11:41 AM.