HOUSE BILL REPORT HB 2784

As Reported by House Committee On:

Human Services

Title: An act relating to the intensive case management and integrated response pilot programs.

Brief Description: Regarding the intensive case management and integrated crisis response pilot programs.

Sponsors: Representatives Dickerson, Cody and Schual-Berke.

Brief History:

Committee Activity:

Human Services: 1/30/08, 1/31/08 [DPS].

Brief Summary of Substitute Bill

- Extends the expiration date for the two pilot projects for intensive case management for chemically dependent persons with histories of high utilization of crisis services from June 30, 2008 to June 30, 2009.
- Requires the Washington State Institute for Public Policy to provide an additional preliminary report by June 30, 2008 and extends the final report deadline to June 30, 2010.
- Extends to June 30, 2009, the expiration date for laws creating the Integrated Crisis Response and Involuntary Treatment Pilot Programs.

HOUSE COMMITTEE ON HUMAN SERVICES

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 7 members: Representatives Dickerson, Chair; Roberts, Vice Chair; Ahern, Ranking Minority Member; Walsh, Assistant Ranking Minority Member; Darneille, McCoy and O'Brien.

Minority Report: Do not pass. Signed by 1 member: Representative Bailey.

Staff: Linda Merelle (786-7092).

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Background:

The Joint Legislative and Executive Task Force on Mental Health Services and Funding (Task Force) reviewed reports and recommendations made by the Cross-System Crisis Response Initiative (Initiative), the Department of Social and Health Services (DSHS), and the Public Consulting Group Inpatient and Residential Capacity Report.

The Initiative was a comprehensive proposal which addressed how to help individuals who, as a result of a severe mental illness, developmental disabilities, chemical dependency, or other organic mental disorders and behavioral problems, are gravely disabled and a danger to themselves or others, to receive prompt and appropriate services.

The Initiative made, among others, the following policy recommendations: (1) create a combined crisis response that is available 24 hours per day, seven days per week for all identified populations; (2) establish safe, secure detoxification capacity; (3) implement intensive case management for persons with chemical dependency; (4) create hospital diversion beds for adults with medical and behavioral issues, persons with developmental disabilities, and provide in-home stabilization; and (5) develop cross-system crisis plans for persons under court-ordered treatment, under supervision by the Department of Corrections, and other persons at risk.

Pilot Projects

Intensive Case Management for Chemically Dependent/High Utilization of Crisis Services

In addition, the Secretary of the DSHS was required to contract with counties to provide intensive case management for chemically dependent persons with a history of high utilization of crisis services at two sites. These sites were to be separate from the two pilot involuntary treatment sites. The pilot programs began providing services by March 1, 2006, and were to end on June 30, 2008.

Involuntary Treatment - Chemical Dependency and/or Mental Disorder

As a result of the recommendations of the Initiative, legislation was enacted to develop involuntary treatment pilot projects for adults with chemical dependency, mental disorder, or both. These pilot projects, with training, staff, and resources, would be sufficient to provide 24-hour services, seven days per week, for both integrated services and secure detoxification services in two pilot areas, one urban and one rural. The Washington Institute for Public Policy (Institute) was tasked with evaluation of the two pilot programs, to provide an interim report, and a final report. The two pilot involuntary treatment programs were to expire on July 1, 2008.

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Summary of Substitute B	ill:	

This bill extends time for operation of the pilot programs that were developed to provide intensive case management to persons with histories of high utilization of crisis services at two sites from June 30, 2008, until June 30, 2009.

The bill requires the Washington State Institute for Public Policy to make a preliminary report to the appropriate committees of the Legislature by June 30, 2008, in addition to the preliminary report which was due by December 1, 2007. The final report, originally due by September 30, 2008, will be due on June 30, 2010.

The legislation, which created the pilot programs for the integrated crisis response, expires on June 30, 2009, rather than July 1, 2008.

Substitute Bill Compared to Original Bill:

The substitute bill removes the requirement that a county that operates an intensive case management pilot must agree to act as a regional support network and thus alleviates any requirement that the DSHS seek a new contract with a different county at the end of Fiscal Year 2008.

Appropriation: None.

Fiscal Note: Requested on January 28, 2008.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony:

(In support with amendment) The pilot programs sponsored by this bill enhance the safety of the community and save jail space. There is not enough room in the jails and Western State Hospital costs more money. The pilot is working very well in Pierce County which has the commitment, heart, and passion to provide integrated services. Persons participating in the integrated services pilot program are constantly deflected from the jail and the emergency room when they are placed in secure detox instead.

(Information only) This item is in the Governor's budget.

(Opposed) None.

Persons Testifying: (In support with amendment) Representative Dickerson, prime sponsor; Paul Pastor, Pierce County Sheriff; Gregory Robinson, Washington Community Mental Health Council; David Dula, Pierce County; Jill Rogers; and David Stewart, Pierce County Human Services.

(Information only) Doug Allen, Department of Social and Health Services, Division of Alcohol and Substance Abuse.

Persons Signed In To Testify But Not Testifying: None.