

**ESB 5476** - H AMD TO APP COMM AMD (H-1622.1/21) **760**

By Representative Caldier

**NOT ADOPTED 04/24/2021**

1 On page 11, after line 14 of the striking amendment, insert the  
2 following:

3

4

5 "Sec. 6. RCW 71.24.035 and 2020 c 256 s 202 are each amended to  
6 read as follows:

7 (1) The authority is designated as the state behavioral health  
8 authority which includes recognition as the single state authority  
9 for substance use disorders and state mental health authority.

10 (2) The director shall provide for public, client, tribal, and  
11 licensed or certified behavioral health agency participation in  
12 developing the state behavioral health program, developing related  
13 contracts, and any waiver request to the federal government under  
14 medicaid.

15 (3) The director shall provide for participation in developing  
16 the state behavioral health program for children and other  
17 underserved populations, by including representatives on any  
18 committee established to provide oversight to the state behavioral  
19 health program.

20 (4) The authority shall be designated as the behavioral health  
21 administrative services organization for a regional service area if  
22 a behavioral health administrative services organization fails to  
23 meet the authority's contracting requirements or refuses to exercise  
24 the responsibilities under its contract or state law, until such  
25 time as a new behavioral health administrative services organization  
26 is designated.

27 (5) The director shall:

1 (a) Assure that any behavioral health administrative services  
2 organization, managed care organization, or community behavioral  
3 health program provides medically necessary services to medicaid  
4 recipients consistent with the state's medicaid state plan or  
5 federal waiver authorities, and nonmedicaid services consistent with  
6 priorities established by the authority;

7 (b) Develop contracts in a manner to ensure an adequate network  
8 of inpatient services, evaluation and treatment services, and  
9 facilities under chapter 71.05 RCW to ensure access to treatment,  
10 resource management services, and community support services;

11 (c) Make contracts necessary or incidental to the performance of  
12 its duties and the execution of its powers, including managed care  
13 contracts for behavioral health services, contracts entered into  
14 under RCW 74.09.522, and contracts with public and private agencies,  
15 organizations, and individuals to pay them for behavioral health  
16 services;

17 (d) Define administrative costs and ensure that the behavioral  
18 health administrative services organization does not exceed an  
19 administrative cost of ten percent of available funds;

20 (e) Establish, to the extent possible, a standardized auditing  
21 procedure which is designed to assure compliance with contractual  
22 agreements authorized by this chapter and minimizes paperwork  
23 requirements. The audit procedure shall focus on the outcomes of  
24 service as provided in RCW 71.24.435, 70.320.020, and 71.36.025;

25 (f) Develop and maintain an information system to be used by the  
26 state and behavioral health administrative services organizations  
27 and managed care organizations that includes a tracking method which  
28 allows the authority to identify behavioral health clients'  
29 participation in any behavioral health service or public program on  
30 an immediate basis. The information system shall not include  
31 individual patient's case history files. Confidentiality of client  
32 information and records shall be maintained as provided in this  
33 chapter and chapter 70.02 RCW;

34

1 (g) Monitor and audit behavioral health administrative services  
2 organizations as needed to assure compliance with contractual  
3 agreements authorized by this chapter;

4 (h) Monitor and audit access to behavioral health services for  
5 individuals eligible for medicaid who are not enrolled in a managed  
6 care organization;

7 (i) Adopt such rules as are necessary to implement the  
8 authority's responsibilities under this chapter;

9 (j) Administer or supervise the administration of the provisions  
10 relating to persons with substance use disorders and intoxicated  
11 persons of any state plan submitted for federal funding pursuant to  
12 federal health, welfare, or treatment legislation;

13 (k) Require the behavioral health administrative services  
14 organizations and the managed care organizations to develop  
15 agreements with tribal, city, and county jails and the department of  
16 corrections to accept referrals for enrollment on behalf of a  
17 confined person, prior to the person's release;

18 (l) Require behavioral health administrative services  
19 organizations and managed care organizations, as applicable, to  
20 provide services as identified in RCW 71.05.585 to individuals  
21 committed for involuntary commitment under less restrictive  
22 alternative court orders when:

23 (i) The individual is enrolled in the medicaid program; or

24 (ii) The individual is not enrolled in medicaid, does not have  
25 other insurance which can pay for the services, and the behavioral  
26 health administrative services organization has adequate available  
27 resources to provide the services; (~~and~~)

28 (m) Coordinate with the centers for medicare and medicaid  
29 services to provide that behavioral health aide services are  
30 eligible for federal funding of up to one hundred percent; and

31 (n) Assure that rates paid by managed care organizations and  
32 behavioral health administrative services organizations to  
33 community-based withdrawal management providers, other than secure  
34 withdrawal management and stabilization programs, who serve low-

1 income individuals, including enrollees in medical assistance  
2 programs, at American society of addiction medicine placement  
3 criteria level 3.7 are paid at the rate that is the greater of 80  
4 percent of the daily rate paid by medicare for the same service or  
5 500 dollars, adjusted annually for inflation, per day.

6 (6) The director shall use available resources only for  
7 behavioral health administrative services organizations and managed  
8 care organizations, except:

9 (a) To the extent authorized, and in accordance with any  
10 priorities or conditions specified, in the biennial appropriations  
11 act; or

12 (b) To incentivize improved performance with respect to the  
13 client outcomes established in RCW 71.24.435, 70.320.020, and  
14 71.36.025, integration of behavioral health and medical services at  
15 the clinical level, and improved care coordination for individuals  
16 with complex care needs.

17 (7) Each behavioral health administrative services organization,  
18 managed care organization, and licensed or certified behavioral  
19 health agency shall file with the secretary of the department of  
20 health or the director, on request, such data, statistics,  
21 schedules, and information as the secretary of the department of  
22 health or the director reasonably requires. A behavioral health  
23 administrative services organization, managed care organization, or  
24 licensed or certified behavioral health agency which, without good  
25 cause, fails to furnish any data, statistics, schedules, or  
26 information as requested, or files fraudulent reports thereof, may  
27 be subject to the contractual remedies in RCW 74.09.871 or may have  
28 its service provider certification or license revoked or suspended.

29 (8) The superior court may restrain any behavioral health  
30 administrative services organization, managed care organization, or  
31 service provider from operating without a contract, certification,  
32 or a license or any other violation of this section. The court may  
33 also review, pursuant to procedures contained in chapter 34.05 RCW,  
34 any denial, suspension, limitation, restriction, or revocation of

1 certification or license, and grant other relief required to enforce  
2 the provisions of this chapter.

3 (9) Upon petition by the secretary of the department of health  
4 or the director, and after hearing held upon reasonable notice to  
5 the facility, the superior court may issue a warrant to an officer  
6 or employee of the secretary of the department of health or the  
7 director authorizing him or her to enter at reasonable times, and  
8 examine the records, books, and accounts of any behavioral health  
9 administrative services organization, managed care organization, or  
10 service provider refusing to consent to inspection or examination by  
11 the authority.

12 (10) Notwithstanding the existence or pursuit of any other  
13 remedy, the secretary of the department of health or the director  
14 may file an action for an injunction or other process against any  
15 person or governmental unit to restrain or prevent the  
16 establishment, conduct, or operation of a behavioral health  
17 administrative services organization, managed care organization, or  
18 service provider without a contract, certification, or a license  
19 under this chapter.

20 (11) The authority shall distribute appropriated state and  
21 federal funds in accordance with any priorities, terms, or  
22 conditions specified in the appropriations act.

23 (12) The authority, in cooperation with the state congressional  
24 delegation, shall actively seek waivers of federal requirements and  
25 such modifications of federal regulations as are necessary to allow  
26 federal medicaid reimbursement for services provided by freestanding  
27 evaluation and treatment facilities licensed under chapter 71.12 RCW  
28 or certified under chapter 71.05 RCW. The authority shall  
29 periodically share the results of its efforts with the appropriate  
30 committees of the senate and the house of representatives.

31 (13) The authority may:

32 (a) Plan, establish, and maintain substance use disorder  
33 prevention and substance use disorder treatment programs as  
34 necessary or desirable;

1 (b) Coordinate its activities and cooperate with behavioral  
2 programs in this and other states, and make contracts and other  
3 joint or cooperative arrangements with state, tribal, local, or  
4 private agencies in this and other states for behavioral health  
5 services and for the common advancement of substance use disorder  
6 programs;

7 (c) Solicit and accept for use any gift of money or property  
8 made by will or otherwise, and any grant of money, services, or  
9 property from the federal government, the state, or any political  
10 subdivision thereof or any private source, and do all things  
11 necessary to cooperate with the federal government or any of its  
12 agencies in making an application for any grant;

13 (d) Keep records and engage in research and the gathering of  
14 relevant statistics; and

15 (e) Acquire, hold, or dispose of real property or any interest  
16 therein, and construct, lease, or otherwise provide substance use  
17 disorder treatment programs."

18  
19 Renumber the remaining sections consecutively and correct any  
20 internal references accordingly.

21 Correct the title.

22

EFFECT: Directs the Director of the Health Care Authority to assure that rates paid by managed care organizations and behavioral health administrative services organizations to community-based voluntary withdrawal management providers who serve low-income individuals at a specified level of care are paid at the rate that is the greater of 80 percent of the daily rate paid by medicare for the same service or 500 dollars, adjusted annually for inflation, per day.

--- END ---