
Health Care & Wellness Committee

HB 1522

Brief Description: Improving behavioral health services provided to adults in Washington state.

Sponsors: Representatives Green, Ryu and Morrell; by request of Department of Social and Health Services.

Brief Summary of Bill

- Directs the Department of Social and Health Services (Department) to develop a strategy for the improvement of the adult behavioral health system.
- Requires the Department to issue a request for proposals for enhanced services facilities.
- Requires regional support networks to develop an individualized discharge plan for a patient and arrange for his or her transition to the community within 21 days of the determination that he or she no longer needs inpatient, active psychiatric treatment.

Hearing Date: 2/14/13

Staff: Chris Blake (786-7392).

Background:

Community Mental Health System.

The Department of Social and Health Services (Department) contracts with Regional Support Networks (RSNs) to oversee the delivery of mental health services for adults and children who suffer from mental illness or severe emotional disturbance. The RSNs contract with local providers to provide an array of mental health services, monitor the activities of local providers, and oversee the distribution of funds under the state managed care plan. A RSN may be a county, group of counties, or a nonprofit or for-profit entity.

The declared intent of the community mental health system is to help people with mental illness through programs that focus on resilience and recovery and practices that are evidence-based, research-based, consensus-based, or promising or emerging practices. It is further intended that

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.

RSNs have flexibility in designing services for people within their geographic boundaries and they are encouraged to use evidence-based practices to reduce or eliminate the use of institutions for mental diseases.

Enhanced Services Facilities.

Enhanced services facilities are facilities that provide treatment and services to persons who do not need acute inpatient treatment and have been determined by the Department to be inappropriate for placement in other facilities due to complex needs that present a behavioral and security issue. These facilities were established in statute in 2005, but were never funded. These facilities are intended to serve individuals with: (1) complex needs; (2) certain qualifying behaviors; and (3) a mental disorder, chemical dependency disorder, organic or traumatic brain disorder, or cognitive impairment requiring supervision and facility services.

Discharge Planning.

Regional support networks must establish discharge procedures for transitioning eligible individuals out of community support services, residential services, and inpatient evaluation and treatment services. When a patient has received community mental health services and state mental hospital services, the RSN and the state mental hospital must establish a mutually agreed upon discharge plan to transition the patient into the community.

Summary of Bill:

The Department of Social and Health Services (Department) must implement a strategy for the improvement of the adult behavioral health system. To develop the strategy, the Department must establish a steering committee consisting of a broad group of stakeholders including recipients of behavioral health services, local governments, regional support networks (RSNs), law enforcement, city and county jails, tribes, behavioral health service providers, housing providers, hospitals, Medicaid managed care plans, and long-term care service providers. The strategy must:

- assess the capacity of the current publicly-funded behavioral health services system to provide evidence-based practices, research-based practices, and promising practices;
- identify, develop, and increase the use of evidence-based practices, research-based practices, and promising practices;
- design and implement a transparent quality management system; and
- identify behavioral health services delivery and financing mechanisms to improve the behavioral health system.

The Department must seek private and federal funding to support the strategy. By August 1, 2014, the Department must report to the Governor and Legislature on the status of implementing the strategy.

The Department must contract with an independent consultant to review the provision of forensic mental health services. The consultant must provide recommendations regarding whether or not the forensic mental health system should be modified to provide an appropriate treatment environment for people with mental disorders who have been charged with a crime while enhancing the safety and security of the public, other patients, and staff at forensic treatment facilities.

To the extent that funds are specifically appropriated, the Department must issue a request for a proposal for enhanced services facility services by June 1, 2014. The procurement must be completed by January 1, 2015.

A RSN must develop an individualized discharge plan and arrange for the transition to the community within 21 days of a determination that inpatient, active psychiatric treatment is no longer needed for an individual who was involuntarily committed for 90 or 180 days.

The definition of the term "evidence-based" is expanded to include one large multiple site randomized or statistically controlled evaluation where the evidence demonstrates sustained improvements in an outcome. The term "research-based" is specified to mean a practice that has been tested with a single randomized or statistically controlled evaluation demonstrating sustained desirable outcomes or where the evidence from a systematic review supports sustained outcomes but does not meet the standard of "evidence-based." The definition of "promising practices" is clarified to refer to practices that may become evidence-based or research-based based on statistical analysis or a well-established theory rather than preliminary information.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after the adjournment of the session in which the bill is passed, except for section 3, relating to discharge plans and community transitions for individuals receiving inpatient active psychiatric treatment, which takes effect July 1, 2018.