

CERTIFICATION OF ENROLLMENT

SUBSTITUTE HOUSE BILL 2883

66th Legislature
2020 Regular Session

Passed by the House February 14, 2020
Yeas 98 Nays 0

**Speaker of the House of
Representatives**

Passed by the Senate March 3, 2020
Yeas 49 Nays 0

President of the Senate

Approved

Governor of the State of Washington

CERTIFICATE

I, Bernard Dean, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **SUBSTITUTE HOUSE BILL 2883** as passed by the House of Representatives and the Senate on the dates hereon set forth.

Chief Clerk

FILED

**Secretary of State
State of Washington**

SUBSTITUTE HOUSE BILL 2883

Passed Legislature - 2020 Regular Session

State of Washington

66th Legislature

2020 Regular Session

By House Human Services & Early Learning (originally sponsored by Representatives Eslick, Frame, and Davis)

READ FIRST TIME 02/07/20.

1 AN ACT Relating to implementing policies related to expanding
2 adolescent behavioral health care access as reviewed and recommended
3 by the children's mental health work group; amending RCW 71.34.010,
4 71.34.610, 71.34.630, and 71.34.730; reenacting and amending RCW
5 71.34.020, 71.34.750, and 71.34.750; adding a new section to chapter
6 71.34 RCW; providing an effective date; and providing an expiration
7 date.

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

9 **Sec. 1.** RCW 71.34.010 and 2019 c 381 s 1 are each amended to
10 read as follows:

11 It is the purpose of this chapter to assure that minors in need
12 of mental health care and treatment receive an appropriate continuum
13 of culturally relevant care and treatment, including prevention and
14 early intervention, self-directed care, parent-directed care, and
15 involuntary treatment. To facilitate the continuum of care and
16 treatment to minors in out-of-home placements, all divisions of the
17 authority and the department that provide mental health services to
18 minors shall jointly plan and deliver those services.

19 It is also the purpose of this chapter to protect the rights of
20 adolescents to confidentiality and to independently seek services for
21 mental health and substance use disorders. Mental health and

1 ((~~chemical dependency~~)) substance use disorder professionals shall
2 guard against needless hospitalization and deprivations of liberty,
3 enable treatment decisions to be made in response to clinical needs
4 in accordance with sound professional judgment, and encourage the use
5 of voluntary services. Mental health and ((~~chemical dependency~~))
6 substance use disorder professionals shall, whenever clinically
7 appropriate, offer less restrictive alternatives to inpatient
8 treatment. Additionally, all mental health care and treatment
9 providers shall assure that minors' parents are given an opportunity
10 to participate in the treatment decisions for their minor children.
11 The mental health care and treatment providers shall, to the extent
12 possible, offer services that involve minors' parents or family.

13 It is also the purpose of this chapter to assure the ability of
14 parents to exercise reasonable, compassionate care and control of
15 their minor children when there is a medical necessity for treatment
16 and without the requirement of filing a petition under this chapter,
17 including the ability to request and receive medically necessary
18 treatment for their adolescent children without the consent of the
19 adolescent.

20 **Sec. 2.** RCW 71.34.020 and 2019 c 446 s 24, 2019 c 444 s 17, 2019
21 c 381 s 2, and 2019 c 325 s 2001 are each reenacted and amended to
22 read as follows:

23 Unless the context clearly requires otherwise, the definitions in
24 this section apply throughout this chapter.

25 (1) "Adolescent" means a minor thirteen years of age or older.

26 (2) "Alcoholism" means a disease, characterized by a dependency
27 on alcoholic beverages, loss of control over the amount and
28 circumstances of use, symptoms of tolerance, physiological or
29 psychological withdrawal, or both, if use is reduced or discontinued,
30 and impairment of health or disruption of social or economic
31 functioning.

32 (3) "Approved substance use disorder treatment program" means a
33 program for minors with substance use disorders provided by a
34 treatment program licensed or certified by the department of health
35 as meeting standards adopted under chapter 71.24 RCW.

36 (4) "Authority" means the Washington state health care authority.

37 (5) "Behavioral health administrative services organization" has
38 the same meaning as provided in RCW 71.24.025.

1 (6) "Child psychiatrist" means a person having a license as a
2 physician and surgeon in this state, who has had graduate training in
3 child psychiatry in a program approved by the American Medical
4 Association or the American Osteopathic Association, and who is board
5 eligible or board certified in child psychiatry.

6 (7) "Children's mental health specialist" means:

7 (a) A mental health professional who has completed a minimum of
8 one hundred actual hours, not quarter or semester hours, of
9 specialized training devoted to the study of child development and
10 the treatment of children; and

11 (b) A mental health professional who has the equivalent of one
12 year of full-time experience in the treatment of children under the
13 supervision of a children's mental health specialist.

14 (8) "Commitment" means a determination by a judge or court
15 commissioner, made after a commitment hearing, that the minor is in
16 need of inpatient diagnosis, evaluation, or treatment or that the
17 minor is in need of less restrictive alternative treatment.

18 (9) "Co-occurring disorder specialist" means an individual
19 possessing an enhancement granted by the department of health under
20 chapter 18.205 RCW that certifies the individual to provide substance
21 use disorder counseling subject to the practice limitations under RCW
22 18.205.105.

23 (10) "Department" means the department of social and health
24 services.

25 (11) "Designated crisis responder" has the same meaning as
26 provided in RCW 71.05.020.

27 (12) "Director" means the director of the authority.

28 (13) "Evaluation and treatment facility" means a public or
29 private facility or unit that is licensed or certified by the
30 department of health to provide emergency, inpatient, residential, or
31 outpatient mental health evaluation and treatment services for
32 minors. A physically separate and separately operated portion of a
33 state hospital may be designated as an evaluation and treatment
34 facility for minors. A facility which is part of or operated by the
35 state or federal agency does not require licensure or certification.
36 No correctional institution or facility, juvenile court detention
37 facility, or jail may be an evaluation and treatment facility within
38 the meaning of this chapter.

39 (14) "Evaluation and treatment program" means the total system of
40 services and facilities coordinated and approved by a county or

1 combination of counties for the evaluation and treatment of minors
2 under this chapter.

3 (15) "Gravely disabled minor" means a minor who, as a result of a
4 mental disorder, or as a result of the use of alcohol or other
5 psychoactive chemicals, is in danger of serious physical harm
6 resulting from a failure to provide for his or her essential human
7 needs of health or safety, or manifests severe deterioration in
8 routine functioning evidenced by repeated and escalating loss of
9 cognitive or volitional control over his or her actions and is not
10 receiving such care as is essential for his or her health or safety.

11 (16) (a) "Inpatient treatment" means twenty-four-hour-per-day
12 mental health care provided within a general hospital, psychiatric
13 hospital, residential treatment facility licensed or certified by the
14 department of health as an evaluation and treatment facility for
15 minors, secure withdrawal management and stabilization facility for
16 minors, or approved substance use disorder treatment program for
17 minors.

18 (b) For purposes of family-initiated treatment under RCW
19 71.34.600 through 71.34.670, "inpatient treatment" has the meaning
20 included in (a) of this subsection and any other residential
21 treatment facility licensed under chapter 71.12 RCW.

22 (17) "Intoxicated minor" means a minor whose mental or physical
23 functioning is substantially impaired as a result of the use of
24 alcohol or other psychoactive chemicals.

25 (18) "Kinship caregiver" has the same meaning as in RCW
26 74.13.031(19) (a).

27 (19) "Less restrictive alternative" or "less restrictive setting"
28 means outpatient treatment provided to a minor who is not residing in
29 a facility providing inpatient treatment as defined in this chapter.

30 (20) "Likelihood of serious harm" means either: (a) A substantial
31 risk that physical harm will be inflicted by an individual upon his
32 or her own person, as evidenced by threats or attempts to commit
33 suicide or inflict physical harm on oneself; (b) a substantial risk
34 that physical harm will be inflicted by an individual upon another,
35 as evidenced by behavior which has caused such harm or which places
36 another person or persons in reasonable fear of sustaining such harm;
37 or (c) a substantial risk that physical harm will be inflicted by an
38 individual upon the property of others, as evidenced by behavior
39 which has caused substantial loss or damage to the property of
40 others.

1 (21) "Managed care organization" has the same meaning as provided
2 in RCW 71.24.025.

3 (22) "Medical necessity" for inpatient care means a requested
4 service which is reasonably calculated to: (a) Diagnose, correct,
5 cure, or alleviate a mental disorder or substance use disorder; or
6 (b) prevent the progression of a mental disorder or substance use
7 disorder that endangers life or causes suffering and pain, or results
8 in illness or infirmity or threatens to cause or aggravate a
9 handicap, or causes physical deformity or malfunction, and there is
10 no adequate less restrictive alternative available.

11 (23) "Mental disorder" means any organic, mental, or emotional
12 impairment that has substantial adverse effects on an individual's
13 cognitive or volitional functions. The presence of alcohol abuse,
14 drug abuse, juvenile criminal history, antisocial behavior, or
15 intellectual disabilities alone is insufficient to justify a finding
16 of "mental disorder" within the meaning of this section.

17 (24) "Mental health professional" means a psychiatrist,
18 psychiatric advanced registered nurse practitioner, physician
19 assistant working with a supervising psychiatrist, psychologist,
20 psychiatric nurse, social worker, and such other mental health
21 professionals as defined by rules adopted by the secretary of the
22 department of health under this chapter.

23 (25) "Minor" means any person under the age of eighteen years.

24 (26) "Outpatient treatment" means any of the nonresidential
25 services mandated under chapter 71.24 RCW and provided by licensed or
26 certified behavioral health agencies as identified by RCW 71.24.025.

27 (27)(a) "Parent" has the same meaning as defined in RCW
28 26.26A.010, including either parent if custody is shared under a
29 joint custody agreement, or a person or agency judicially appointed
30 as legal guardian or custodian of the child.

31 (b) For purposes of family-initiated treatment under RCW
32 71.34.600 through 71.34.670, "parent" also includes a person to whom
33 a parent defined in (a) of this subsection has given a signed
34 authorization to make health care decisions for the adolescent, a
35 stepparent who is involved in caring for the adolescent, a kinship
36 caregiver who is involved in caring for the adolescent, or another
37 relative who is responsible for the health care of the adolescent,
38 who may be required to provide a declaration under penalty of perjury
39 stating that he or she is a relative responsible for the health care
40 of the adolescent pursuant to (~~RCW 9A.72.085~~) chapter 5.50 RCW. If

1 a dispute arises between individuals authorized to act as a parent
2 for the purpose of RCW 71.34.600 through 71.34.670, the disagreement
3 must be resolved according to the priority established under RCW
4 7.70.065(2) (a).

5 (28) "Physician assistant" means a person licensed as a physician
6 assistant under chapter 18.57A or 18.71A RCW.

7 (29) "Private agency" means any person, partnership, corporation,
8 or association that is not a public agency, whether or not financed
9 in whole or in part by public funds, that constitutes an evaluation
10 and treatment facility or private institution, or hospital, or
11 approved substance use disorder treatment program, that is conducted
12 for, or includes a distinct unit, floor, or ward conducted for, the
13 care and treatment of persons with mental illness, substance use
14 disorders, or both mental illness and substance use disorders.

15 (30) "Professional person in charge" or "professional person"
16 means a physician, other mental health professional, or other person
17 empowered by an evaluation and treatment facility, secure withdrawal
18 management and stabilization facility, or approved substance use
19 disorder treatment program with authority to make admission and
20 discharge decisions on behalf of that facility.

21 (31) "Psychiatric nurse" means a registered nurse who has
22 experience in the direct treatment of persons who have a mental
23 illness or who are emotionally disturbed, such experience gained
24 under the supervision of a mental health professional.

25 (32) "Psychiatrist" means a person having a license as a
26 physician in this state who has completed residency training in
27 psychiatry in a program approved by the American Medical Association
28 or the American Osteopathic Association, and is board eligible or
29 board certified in psychiatry.

30 (33) "Psychologist" means a person licensed as a psychologist
31 under chapter 18.83 RCW.

32 (34) "Public agency" means any evaluation and treatment facility
33 or institution, or hospital, or approved substance use disorder
34 treatment program that is conducted for, or includes a distinct unit,
35 floor, or ward conducted for, the care and treatment of persons with
36 mental illness, substance use disorders, or both mental illness and
37 substance use disorders if the agency is operated directly by
38 federal, state, county, or municipal government, or a combination of
39 such governments.

1 (35) "Responsible other" means the minor, the minor's parent or
2 estate, or any other person legally responsible for support of the
3 minor.

4 (36) "Secretary" means the secretary of the department or
5 secretary's designee.

6 (37) "Secure withdrawal management and stabilization facility"
7 means a facility operated by either a public or private agency or by
8 the program of an agency which provides care to voluntary individuals
9 and individuals involuntarily detained and committed under this
10 chapter for whom there is a likelihood of serious harm or who are
11 gravely disabled due to the presence of a substance use disorder.
12 Secure withdrawal management and stabilization facilities must:

13 (a) Provide the following services:

14 (i) Assessment and treatment, provided by certified substance use
15 disorder professionals or co-occurring disorder specialists;

16 (ii) Clinical stabilization services;

17 (iii) Acute or subacute detoxification services for intoxicated
18 individuals; and

19 (iv) Discharge assistance provided by certified substance use
20 disorder professionals or co-occurring disorder specialists,
21 including facilitating transitions to appropriate voluntary or
22 involuntary inpatient services or to less restrictive alternatives as
23 appropriate for the individual;

24 (b) Include security measures sufficient to protect the patients,
25 staff, and community; and

26 (c) Be licensed or certified as such by the department of health.

27 (38) "Social worker" means a person with a master's or further
28 advanced degree from a social work educational program accredited and
29 approved as provided in RCW 18.320.010.

30 (39) "Start of initial detention" means the time of arrival of
31 the minor at the first evaluation and treatment facility, secure
32 withdrawal management and stabilization facility, or approved
33 substance use disorder treatment program offering inpatient treatment
34 if the minor is being involuntarily detained at the time. With regard
35 to voluntary patients, "start of initial detention" means the time at
36 which the minor gives notice of intent to leave under the provisions
37 of this chapter.

38 (40) "Substance use disorder" means a cluster of cognitive,
39 behavioral, and physiological symptoms indicating that an individual
40 continues using the substance despite significant substance-related

1 problems. The diagnosis of a substance use disorder is based on a
2 pathological pattern of behaviors related to the use of the
3 substances.

4 (41) "Substance use disorder professional" means a person
5 certified as a substance use disorder professional by the department
6 of health under chapter 18.205 RCW, or a person certified as a
7 (~~chemical dependency~~) substance use disorder professional trainee
8 under RCW 18.205.095 working under the direct supervision of a
9 certified (~~chemical dependency~~) substance use disorder
10 professional.

11 **Sec. 3.** RCW 71.34.610 and 2019 c 381 s 8 are each amended to
12 read as follows:

13 (1) The authority shall assure that, for any adolescent admitted
14 to inpatient treatment under RCW 71.34.600, a review is conducted by
15 a physician or other mental health professional who is employed by
16 the authority, or an agency under contract with the authority, and
17 who neither has a financial interest in continued inpatient treatment
18 of the adolescent nor is affiliated with the facility providing the
19 treatment. (~~The~~)

20 (a) For adolescents receiving inpatient treatment, the physician
21 or other mental health professional shall conduct the review not less
22 than seven nor more than fourteen days following the date the
23 adolescent was brought to the facility under RCW 71.34.600 to
24 determine whether it is a medical necessity to continue the
25 adolescent's treatment on an inpatient basis.

26 (b) For adolescents receiving inpatient treatment in a
27 residential treatment facility, the physician or other mental health
28 professional shall conduct an additional medical necessity review
29 every thirty days after the initial review while the adolescent
30 remains in treatment under RCW 71.34.600.

31 (2) In making a determination under subsection (1) of this
32 section, the authority shall consider the opinion of the treatment
33 provider, the safety of the adolescent, and the likelihood the
34 adolescent's mental health will deteriorate if released from
35 inpatient treatment. The authority shall consult with the parent in
36 advance of making its determination.

37 (3) If, after any review conducted by the authority under this
38 section, the authority determines it is no longer a medical necessity
39 for an adolescent to receive inpatient treatment, the authority shall

1 immediately notify the parents and the facility. The facility shall
2 release the adolescent to the parents within twenty-four hours of
3 receiving notice. If the professional person in charge and the parent
4 believe that it is a medical necessity for the adolescent to remain
5 in inpatient treatment, the adolescent shall be released to the
6 parent on the second judicial day following the authority's
7 determination in order to allow the parent time to file an at-risk
8 youth petition under chapter 13.32A RCW. If the authority determines
9 it is a medical necessity for the adolescent to receive outpatient
10 treatment and the adolescent declines to obtain such treatment, such
11 refusal shall be grounds for the parent to file an at-risk youth
12 petition.

13 (4) If the evaluation conducted under RCW 71.34.600 is done by
14 the authority, the reviews required by subsection (1) of this section
15 shall be done by contract with an independent agency.

16 (5) The authority may, subject to available funds, contract with
17 other governmental agencies to conduct the reviews under this
18 section. The authority may seek reimbursement from the parents, their
19 insurance, or medicaid for the expense of any review conducted by an
20 agency under contract.

21 (6) In addition to the review required under this section, the
22 authority may periodically determine and redetermine the medical
23 necessity of treatment for purposes of payment with public funds.

24 (7) The authority shall communicate review findings under this
25 section with the appropriate medicaid managed care organization
26 contracted by the authority.

27 (8) Nothing in this section prohibits a managed care organization
28 from conducting medical necessity reviews according to appropriate
29 guidelines based on the level of care being referred to and
30 consistent with the billing guide from the authority.

31 **Sec. 4.** RCW 71.34.630 and 2019 c 381 s 10 are each amended to
32 read as follows:

33 (1) If the adolescent is receiving inpatient treatment in a
34 hospital setting and is not released as a result of the petition
35 filed under RCW 71.34.620, he or she shall be released not later than
36 thirty days following the later of: ((+1)) (a) The date of the
37 authority's determination under RCW 71.34.610(2); or ((+2)) (b) the
38 filing of a petition for judicial review under RCW 71.34.620, unless

1 a professional person or the designated crisis responder initiates
2 proceedings under this chapter.

3 (2) If the adolescent receiving treatment in a residential
4 treatment facility is not released as a result of the petition filed
5 under RCW 71.34.620, he or she may remain in a residential treatment
6 facility so long as it continues to be a medical necessity for the
7 adolescent to receive such treatment.

8 **Sec. 5.** RCW 71.34.730 and 2019 c 446 s 36 are each amended to
9 read as follows:

10 (1) The professional person in charge of an evaluation and
11 treatment facility, secure withdrawal management and stabilization
12 facility, or approved substance use disorder treatment program where
13 a minor has been admitted involuntarily for the initial seventy-two
14 hour treatment period under this chapter may petition to have a minor
15 committed to an evaluation and treatment facility or, in the case of
16 a minor with a substance use disorder, to a secure withdrawal
17 management and stabilization facility or approved substance use
18 disorder treatment program for fourteen-day diagnosis, evaluation,
19 and treatment.

20 If the professional person in charge of the facility does not
21 petition to have the minor committed, the parent who has custody of
22 the minor may seek review of that decision in court. The parent shall
23 file notice with the court and provide a copy of the treatment and
24 evaluation facility's report.

25 (2) A petition for commitment of a minor under this section shall
26 be filed with the superior court in the county where the minor is
27 residing or being detained.

28 (a) A petition for a fourteen-day commitment shall be signed by:

29 (i) One physician, physician assistant, or psychiatric advanced
30 registered nurse practitioner; and

31 (ii) One physician, physician assistant, psychiatric advanced
32 registered nurse practitioner, or mental health professional.

33 (b) If the petition is for substance use disorder treatment, the
34 petition may be signed by a ~~((chemical dependency))~~ substance use
35 disorder professional instead of a mental health professional and by
36 an advanced registered nurse practitioner instead of a psychiatric
37 advanced registered nurse practitioner. The person signing the
38 petition must have examined the minor, and the petition must contain
39 the following:

- 1 (i) The name and address of the petitioner;
- 2 (ii) The name of the minor alleged to meet the criteria for
3 fourteen-day commitment;
- 4 (iii) The name, telephone number, and address if known of every
5 person believed by the petitioner to be legally responsible for the
6 minor;
- 7 (iv) A statement that the petitioner has examined the minor and
8 finds that the minor's condition meets required criteria for
9 fourteen-day commitment and the supporting facts therefor;
- 10 (v) A statement that the minor has been advised of the need for
11 voluntary treatment but has been unwilling or unable to consent to
12 necessary treatment;
- 13 (vi) If the petition is for mental health treatment, a statement
14 that the minor has been advised of the loss of firearm rights if
15 involuntarily committed;
- 16 (vii) A statement recommending the appropriate facility or
17 facilities to provide the necessary treatment; and
- 18 (viii) A statement concerning whether a less restrictive
19 alternative to inpatient treatment is in the best interests of the
20 minor.
- 21 (c) A copy of the petition shall be personally delivered to the
22 minor by the petitioner or petitioner's designee. A copy of the
23 petition shall be sent to the minor's attorney and the minor's
24 parent.

25 **Sec. 6.** RCW 71.34.750 and 2019 c 446 s 39 and 2019 c 325 s 2008
26 are each reenacted and amended to read as follows:

27 (1) At any time during the minor's period of fourteen-day
28 commitment, the professional person in charge may petition the court
29 for an order requiring the minor to undergo an additional one hundred
30 eighty-day period of treatment. The evidence in support of the
31 petition shall be presented by the county prosecutor unless the
32 petition is filed by the professional person in charge of a state-
33 operated facility in which case the evidence shall be presented by
34 the attorney general.

35 (2) The petition for one hundred eighty-day commitment shall
36 contain the following:

37 (a) The name and address of the petitioner or petitioners;

38 (b) The name of the minor alleged to meet the criteria for one
39 hundred eighty-day commitment;

1 (c) A statement that the petitioner is the professional person in
2 charge of the evaluation and treatment facility, secure withdrawal
3 management and stabilization facility, or approved substance use
4 disorder treatment program responsible for the treatment of the
5 minor;

6 (d) The date of the fourteen-day commitment order; and

7 (e) A summary of the facts supporting the petition.

8 (3) The petition shall be supported by accompanying affidavits
9 signed by: (a) Two examining physicians, one of whom shall be a child
10 psychiatrist, or two psychiatric advanced registered nurse
11 practitioners, one of whom shall be a child and adolescent or family
12 psychiatric advanced registered nurse practitioner. If the petition
13 is for substance use disorder treatment, the petition may be signed
14 by a (~~chemical dependency~~) substance use disorder professional
15 instead of a mental health professional and by an advanced registered
16 nurse practitioner instead of a psychiatric advanced registered nurse
17 practitioner, or two physician assistants, one of whom must be
18 supervised by a child psychiatrist; (b) one children's mental health
19 specialist and either an examining physician, physician assistant, or
20 a psychiatric advanced registered nurse practitioner; or (c) two
21 among an examining physician, physician assistant, and a psychiatric
22 advanced registered nurse practitioner, one of which needs to be a
23 child psychiatrist, a physician assistant supervised by a child
24 psychiatrist, or a child and adolescent psychiatric nurse
25 practitioner. The affidavits shall describe in detail the behavior of
26 the detained minor which supports the petition and shall state
27 whether a less restrictive alternative to inpatient treatment is in
28 the best interests of the minor.

29 (4) The petition for one hundred eighty-day commitment shall be
30 filed with the clerk of the court at least three days before the
31 expiration of the fourteen-day commitment period. The petitioner or
32 the petitioner's designee shall within twenty-four hours of filing
33 serve a copy of the petition on the minor and notify the minor's
34 attorney and the minor's parent. A copy of the petition shall be
35 provided to such persons at least twenty-four hours prior to the
36 hearing.

37 (5) At the time of filing, the court shall set a date within
38 seven days for the hearing on the petition. The court may continue
39 the hearing upon the written request of the minor or the minor's
40 attorney for not more than ten days. The minor or the parents shall

1 be afforded the same rights as in a fourteen-day commitment hearing.
2 Treatment of the minor shall continue pending the proceeding.

3 (6) For one hundred eighty-day commitment:

4 (a) The court must find by clear, cogent, and convincing evidence
5 that the minor:

6 (i) Is suffering from a mental disorder or substance use
7 disorder;

8 (ii) Presents a likelihood of serious harm or is gravely
9 disabled; and

10 (iii) Is in need of further treatment that only can be provided
11 in a one hundred eighty-day commitment.

12 (b) If commitment is for a substance use disorder, the court must
13 find that there is an available approved substance use disorder
14 treatment program that has adequate space for the minor.

15 (7) If the court finds that the criteria for commitment are met
16 and that less restrictive treatment in a community setting is not
17 appropriate or available, the court shall order the minor committed
18 to the custody of the director for further inpatient mental health
19 treatment, to an approved substance use disorder treatment program
20 for further substance use disorder treatment, or to a private
21 treatment and evaluation facility for inpatient mental health or
22 substance use disorder treatment if the minor's parents have assumed
23 responsibility for payment for the treatment. If the court finds that
24 a less restrictive alternative is in the best interest of the minor,
25 the court shall order less restrictive alternative treatment upon
26 such conditions as necessary.

27 If the court determines that the minor does not meet the criteria
28 for one hundred eighty-day commitment, the minor shall be released.

29 (8) Successive one hundred eighty-day commitments are permissible
30 on the same grounds and under the same procedures as the original one
31 hundred eighty-day commitment. Such petitions shall be filed at least
32 five days prior to the expiration of the previous one hundred eighty-
33 day commitment order.

34 **Sec. 7.** RCW 71.34.750 and 2019 c 446 s 40 and 2019 c 325 s 2009
35 are each reenacted and amended to read as follows:

36 (1) At any time during the minor's period of fourteen-day
37 commitment, the professional person in charge may petition the court
38 for an order requiring the minor to undergo an additional one hundred
39 eighty-day period of treatment. The evidence in support of the

1 petition shall be presented by the county prosecutor unless the
2 petition is filed by the professional person in charge of a state-
3 operated facility in which case the evidence shall be presented by
4 the attorney general.

5 (2) The petition for one hundred eighty-day commitment shall
6 contain the following:

7 (a) The name and address of the petitioner or petitioners;

8 (b) The name of the minor alleged to meet the criteria for one
9 hundred eighty-day commitment;

10 (c) A statement that the petitioner is the professional person in
11 charge of the evaluation and treatment facility, secure withdrawal
12 management and stabilization facility, or approved substance use
13 disorder treatment program responsible for the treatment of the
14 minor;

15 (d) The date of the fourteen-day commitment order; and

16 (e) A summary of the facts supporting the petition.

17 (3) The petition shall be supported by accompanying affidavits
18 signed by: (a) Two examining physicians, one of whom shall be a child
19 psychiatrist, or two psychiatric advanced registered nurse
20 practitioners, one of whom shall be a child and adolescent or family
21 psychiatric advanced registered nurse practitioner. If the petition
22 is for substance use disorder treatment, the petition may be signed
23 by a (~~chemical dependency~~) substance use disorder professional
24 instead of a mental health professional and by an advanced registered
25 nurse practitioner instead of a psychiatric advanced registered nurse
26 practitioner, or two physician assistants, one of whom must be
27 supervised by a child psychiatrist; (b) one children's mental health
28 specialist and either an examining physician, physician assistant, or
29 a psychiatric advanced registered nurse practitioner; or (c) two
30 among an examining physician, physician assistant, and a psychiatric
31 advanced registered nurse practitioner, one of which needs to be a
32 child psychiatrist, a physician assistant supervised by a child
33 psychiatrist, or a child and adolescent psychiatric nurse
34 practitioner. The affidavits shall describe in detail the behavior of
35 the detained minor which supports the petition and shall state
36 whether a less restrictive alternative to inpatient treatment is in
37 the best interests of the minor.

38 (4) The petition for one hundred eighty-day commitment shall be
39 filed with the clerk of the court at least three days before the
40 expiration of the fourteen-day commitment period. The petitioner or

1 the petitioner's designee shall within twenty-four hours of filing
2 serve a copy of the petition on the minor and notify the minor's
3 attorney and the minor's parent. A copy of the petition shall be
4 provided to such persons at least twenty-four hours prior to the
5 hearing.

6 (5) At the time of filing, the court shall set a date within
7 seven days for the hearing on the petition. The court may continue
8 the hearing upon the written request of the minor or the minor's
9 attorney for not more than ten days. The minor or the parents shall
10 be afforded the same rights as in a fourteen-day commitment hearing.
11 Treatment of the minor shall continue pending the proceeding.

12 (6) For one hundred eighty-day commitment, the court must find by
13 clear, cogent, and convincing evidence that the minor:

14 (a) Is suffering from a mental disorder or substance use
15 disorder;

16 (b) Presents a likelihood of serious harm or is gravely disabled;
17 and

18 (c) Is in need of further treatment that only can be provided in
19 a one hundred eighty-day commitment.

20 (7) If the court finds that the criteria for commitment are met
21 and that less restrictive treatment in a community setting is not
22 appropriate or available, the court shall order the minor committed
23 to the custody of the director for further inpatient mental health
24 treatment, to an approved substance use disorder treatment program
25 for further substance use disorder treatment, or to a private
26 treatment and evaluation facility for inpatient mental health or
27 substance use disorder treatment if the minor's parents have assumed
28 responsibility for payment for the treatment. If the court finds that
29 a less restrictive alternative is in the best interest of the minor,
30 the court shall order less restrictive alternative treatment upon
31 such conditions as necessary.

32 If the court determines that the minor does not meet the criteria
33 for one hundred eighty-day commitment, the minor shall be released.

34 (8) Successive one hundred eighty-day commitments are permissible
35 on the same grounds and under the same procedures as the original one
36 hundred eighty-day commitment. Such petitions shall be filed at least
37 five days prior to the expiration of the previous one hundred eighty-
38 day commitment order.

1 NEW SECTION. **Sec. 8.** A new section is added to chapter 71.34
2 RCW to read as follows:

3 The authority shall develop and operate a data collection and
4 tracking system for adolescents receiving family-initiated treatment
5 under RCW 71.34.600 through 71.34.670. In implementing this data
6 collection and tracking system, the authority shall, in collaboration
7 with the department of health, collect information from facilities
8 serving adolescents receiving family-initiated treatment under RCW
9 71.34.600 through 71.34.670 including, if possible, the following
10 information:

11 (1) The names of facilities serving adolescents receiving family-
12 initiated treatment under RCW 71.34.600 through 71.34.670;

13 (2) The number of adolescents receiving family-initiated
14 treatment under RCW 71.34.600 through 71.34.670 who are defined as
15 dependent children under chapter 13.34 RCW;

16 (3) Demographic information about the adolescents receiving
17 family-initiated treatment under RCW 71.34.600 through 71.34.670;

18 (4) The diagnosis upon entry for adolescents receiving family-
19 initiated treatment under RCW 71.34.600 through 71.34.670;

20 (5) Length of stay for adolescents receiving family-initiated
21 treatment under RCW 71.34.600 through 71.34.670; and

22 (6) Information related to the discharge summary for adolescents
23 receiving family-initiated treatment under RCW 71.34.600 through
24 71.34.670.

25 NEW SECTION. **Sec. 9.** Section 6 of this act expires July 1,
26 2026.

27 NEW SECTION. **Sec. 10.** Section 7 of this act takes effect July
28 1, 2026.

--- END ---