
ENGROSSED HOUSE BILL 2584

State of Washington

66th Legislature

2020 Regular Session

By Representatives Caldier, Frame, Leavitt, and Davis

Read first time 01/15/20. Referred to Committee on Appropriations.

1 AN ACT Relating to establishing rates for behavioral health
2 services; and adding a new section to chapter 71.24 RCW.

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

4 NEW SECTION. **Sec. 1.** A new section is added to chapter 71.24
5 RCW to read as follows:

6 (1) It is the intent of the legislature that behavioral health
7 medicaid rate increases be grounded with the rate-setting process for
8 the provider type or practice setting.

9 (2) In implementing a rate increase funded by the legislature,
10 including rate increases provided through managed care organizations,
11 the authority must work with the actuaries responsible for
12 establishing medicaid rates for behavioral health services and
13 managed care organizations responsible for distributing funds to
14 behavioral health services to assure that appropriate adjustments are
15 made to the wraparound with intensive services case rate, as well as
16 any other behavioral health services in which a case rate is used.

17 (3) (a) The authority shall establish a process for verifying that
18 funds appropriated in the omnibus operating appropriations act for
19 targeted behavioral health provider rate increases, including rate
20 increases provided through managed care organizations, are used for
21 the objectives stated in the appropriation.

1 (b) The process must: (i) Establish which behavioral health
2 provider types the funds are intended for; (ii) include transparency
3 and accountability mechanisms to demonstrate that appropriated funds
4 for targeted behavioral health provider rate increases are passed
5 through, in the manner intended, to the behavioral health providers
6 who are the subject of the funds appropriated for targeted behavioral
7 health provider rate increases; and (iii) include actuarial
8 information provided to managed care organizations to ensure the
9 funds directed to behavioral health providers have been appropriately
10 allocated and accounted for. The process must include a method for
11 determining if the funds have increased access to the behavioral
12 health services offered by the behavioral health providers who are
13 the subject of the targeted provider rate increases.

14 (c) The process may:

15 (i) Include a quantitative method for determining if the funds
16 have increased access to behavioral health services offered by the
17 behavioral health providers who received the targeted provider rate
18 increases;

19 (ii) Ensure the viability of pass-through payments in a capitated
20 rate methodology;

21 (iii) Ensure that medicaid rate increases account for the impact
22 of value-based contracting on provider reimbursements and
23 implementations of pass-through payments; and

24 (iv) Include the participation of managed care organizations,
25 behavioral health administrative services organizations, and
26 providers that are the subject of the targeted behavioral health
27 provider rate increases.

28 (4) By November 1st of each year, the authority shall report to
29 the committees of the legislature with jurisdiction over behavioral
30 health issues and fiscal matters regarding the established process
31 for each appropriation for a targeted behavioral health provider rate
32 increase, whether the funds were passed through in accordance with
33 the appropriation language, and any information about increased
34 access to behavioral health services associated with the
35 appropriation. The reporting requirement for each appropriation for a
36 targeted behavioral health provider rate increase shall continue for
37 two years following the specific appropriation.

--- END ---