

CERTIFICATION OF ENROLLMENT

SECOND SUBSTITUTE SENATE BILL 5903

Chapter 360, Laws of 2019

66th Legislature
2019 Regular Session

CHILDREN'S MENTAL HEALTH--VARIOUS PROVISIONS

EFFECTIVE DATE: July 28, 2019—Except for section 4, which becomes effective July 1, 2020; and section 5, which becomes effective July 1, 2022.

Passed by the Senate April 18, 2019
Yeas 48 Nays 1

KAREN KEISER

President of the Senate

Passed by the House April 12, 2019
Yeas 87 Nays 9

FRANK CHOPP

Speaker of the House of Representatives

Approved May 9, 2019 3:45 PM

JAY INSLEE

Governor of the State of Washington

CERTIFICATE

I, Brad Hendrickson, Secretary of the Senate of the State of Washington, do hereby certify that the attached is **SECOND SUBSTITUTE SENATE BILL 5903** as passed by the Senate and the House of Representatives on the dates hereon set forth.

BRAD HENDRICKSON

Secretary

FILED

May 13, 2019

**Secretary of State
State of Washington**

SECOND SUBSTITUTE SENATE BILL 5903

AS AMENDED BY THE HOUSE

Passed Legislature - 2019 Regular Session

State of Washington 66th Legislature 2019 Regular Session

By Senate Ways & Means (originally sponsored by Senators Darneille, Warnick, Das, Nguyen, and O'Ban)

READ FIRST TIME 03/01/19.

1 AN ACT Relating to implementing policies related to children's
2 mental health as reviewed and recommended by the children's mental
3 health work group; amending RCW 28B.30.357 and 28B.20.445; amending
4 2018 c 175 s 2 (uncodified); adding a new section to chapter 28A.415
5 RCW; adding new sections to chapter 74.09 RCW; adding a new section
6 to chapter 43.216 RCW; creating new sections; providing effective
7 dates; and providing an expiration date.

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

9 NEW SECTION. **Sec. 1.** (1) The legislature finds that the
10 children's mental health work group established in chapter 96, Laws
11 of 2016 reported recommendations related to increasing access to
12 mental health services for children and youth and that many of those
13 recommendations were adopted by the 2017 and 2018 legislatures. The
14 legislature further finds that additional work is needed to improve
15 mental health support for children and families and that the
16 children's mental health work group was reestablished for this
17 purpose in chapter 175, Laws of 2018.

18 (2) The legislature finds that there is a workforce shortage of
19 behavioral health professionals and that increasing medicaid rates to
20 a level that is equal to medicare rates will increase the number of
21 providers who will serve children and families on medicaid. Further,

1 the legislature finds that there is a need to increase the cultural
2 and linguistic diversity among children's behavioral health
3 professionals and that hiring practices, professional training, and
4 high-quality translations of accreditation and licensing exams should
5 be implemented to incentivize this diversity in the workforce.

6 (3) Therefore, the legislature intends to implement the
7 recommendations adopted by the children's mental health work group in
8 January 2019, in order to improve mental health care access for
9 children and their families.

10 **Sec. 2.** 2018 c 175 s 2 (uncodified) is amended to read as
11 follows:

12 (1) A children's mental health work group is established to
13 identify barriers to and opportunities for accessing mental health
14 services for children and families and to advise the legislature on
15 statewide mental health services for this population.

16 (2) The work group shall consist of members and alternates as
17 provided in this subsection. Members must represent the regional,
18 racial, and cultural diversity of all children and families in the
19 state. Members of the children's mental health work group created in
20 chapter 96, Laws of 2016, and serving on the work group as of
21 December 1, 2017, may continue to serve as members of the work group
22 without reappointment.

23 (a) The president of the senate shall appoint one member and one
24 alternate from each of the two largest caucuses in the senate.

25 (b) The speaker of the house of representatives shall appoint one
26 member and one alternate from each of the two largest caucuses in the
27 house of representatives.

28 (c) The governor shall appoint six members representing the
29 following state agencies and offices: The department of children,
30 youth, and families; the department of social and health services;
31 the health care authority; the department of health; the office of
32 homeless youth prevention and protection programs; and the office of
33 the governor.

34 (d) The governor shall appoint one member representing each of
35 the following:

- 36 (i) Behavioral health organizations;
- 37 (ii) Community mental health agencies;
- 38 (iii) Medicaid managed care organizations;
- 39 (iv) A regional provider of co-occurring disorder services;

1 (v) Pediatricians or primary care providers;
2 (vi) Providers specializing in infant or early childhood mental
3 health;
4 (vii) Child health advocacy groups;
5 (viii) Early learning and child care providers;
6 (ix) The evidence-based practice institute;
7 (x) Parents or caregivers who have been the recipient of early
8 childhood mental health services;
9 (xi) An education or teaching institution that provides training
10 for mental health professionals;
11 (xii) Foster parents;
12 (xiii) Providers of culturally and linguistically appropriate
13 health services to traditionally underserved communities;
14 (xiv) Pediatricians located east of the crest of the Cascade
15 mountains; and
16 (xv) Child psychiatrists.
17 (e) The governor shall request participation by a representative
18 of tribal governments.
19 (f) The superintendent of public instruction shall appoint one
20 representative from the office of the superintendent of public
21 instruction.
22 (g) The insurance commissioner shall appoint one representative
23 from the office of the insurance commissioner.
24 (h) The work group shall choose its cochairs, one from among its
25 legislative members and one from among the executive branch members.
26 The representative from the health care authority shall convene at
27 least two, but not more than four, meetings of the work group each
28 year.
29 (i) The cochairs may invite additional members of the house of
30 representatives and the senate to participate in work group
31 activities, including as leaders of advisory groups to the work
32 group. These legislators are not required to be formally appointed
33 members of the work group in order to participate in or lead advisory
34 groups.
35 (3) The work group shall:
36 (a) Monitor the implementation of enacted legislation, programs,
37 and policies related to children's mental health, including provider
38 payment for depression screenings for youth and new mothers,
39 consultation services for child care providers caring for children

1 with symptoms of trauma, home visiting services, and streamlining
2 agency rules for providers of behavioral health services;

3 (b) Consider system strategies to improve coordination and remove
4 barriers between the early learning, K-12 education, and health care
5 systems; and

6 (c) Identify opportunities to remove barriers to treatment and
7 strengthen mental health service delivery for children and youth.

8 (4) At the direction of the cochairs, the work group may convene
9 advisory groups to evaluate specific issues and report related
10 findings and recommendations to the full work group.

11 (5)(a) The work group shall convene an advisory group to develop
12 a funding model for:

13 (i) The partnership access line activities described in RCW
14 71.24.061, including the partnership access line for moms and kids
15 and community referral facilitation;

16 (ii) Delivering partnership access line services to educational
17 service districts for the training and support of school staff
18 managing children with challenging behaviors; and

19 (iii) Expanding partnership access line consultation services to
20 include consultation for health care professionals serving adults.

21 (b) The work group cochairs shall invite representatives from the
22 following organizations and interests to participate as advisory
23 group members under this subsection:

24 (i) Private insurance carriers;

25 (ii) Medicaid managed care plans;

26 (iii) Self-insured organizations;

27 (iv) Seattle children's hospital;

28 (v) The partnership access line;

29 (vi) The office of the insurance commissioner;

30 (vii) The University of Washington school of medicine; and

31 (viii) Other organizations and individuals, as determined by the
32 cochairs.

33 (c) The funding model must build upon previous funding model
34 efforts by the health care authority, including work completed
35 pursuant to chapter 288, Laws of 2018. The funding model must:

36 (i) Determine the annual cost of operating the partnership access
37 line and its various components and collect a proportional share of
38 program cost from each health insurance carrier; and

1 (ii) Differentiate between partnership access line activities
2 eligible for medicaid funding and activities that are nonmedicaid
3 eligible.

4 (d) By December 1, 2019, the advisory group formed under this
5 subsection must deliver the funding model and any associated
6 recommendations to the work group.

7 (6) Staff support for the work group, including administration of
8 work group meetings and preparation of the updated report required
9 under subsection ((+6+)) (8) of this section, must be provided by the
10 health care authority. Additional staff support for legislative
11 members of the work group may be provided by senate committee
12 services and the house of representatives office of program research.

13 ((+5+)) (7) Legislative members of the work group are reimbursed
14 for travel expenses in accordance with RCW 44.04.120. Nonlegislative
15 members are not entitled to be reimbursed for travel expenses if they
16 are elected officials or are participating on behalf of an employer,
17 governmental entity, or other organization. Any reimbursement for
18 other nonlegislative members is subject to chapter 43.03 RCW.
19 Advisory group members who are not members of the work group are not
20 entitled to reimbursement.

21 ((+6+)) (8) The work group shall update the findings and
22 recommendations reported to the legislature by the children's mental
23 health work group in December 2016 pursuant to chapter 96, Laws of
24 2016. The work group must submit the updated report to the governor
25 and the appropriate committees of the legislature by December 1,
26 2020.

27 ((+7+)) (9) This section expires December 30, 2020.

28 NEW SECTION. Sec. 3. A new section is added to chapter 28A.415
29 RCW to read as follows:

30 Beginning in the 2020-21 school year, and every other school year
31 thereafter, school districts must use one of the professional
32 learning days funded under RCW 28A.150.415 to train school district
33 staff in one or more of the following topics: Social-emotional
34 learning, trauma-informed practices, using the model plan developed
35 under RCW 28A.320.1271 related to recognition and response to
36 emotional or behavioral distress, consideration of adverse childhood
37 experiences, mental health literacy, antibullying strategies, or
38 culturally sustaining practices.

1 **Sec. 4.** RCW 28B.30.357 and 2017 c 202 s 9 are each amended to
2 read as follows:

3 Subject to the availability of amounts appropriated for this
4 specific purpose, Washington State University shall offer ~~((one))~~ two
5 twenty-four month residency positions that ~~((is))~~ are approved by the
6 accreditation council for graduate medical education to ~~((one))~~ two
7 residents specializing in child and adolescent psychiatry. The
8 ~~((residency))~~ positions must each include a minimum of ~~((twelve))~~
9 eighteen months of training in settings where children's mental
10 health services are provided under the supervision of experienced
11 psychiatric consultants and must be located east of the crest of the
12 Cascade mountains.

13 **Sec. 5.** RCW 28B.20.445 and 2018 c 175 s 11 are each amended to
14 read as follows:

15 Subject to the availability of amounts appropriated for this
16 specific purpose, the child and adolescent psychiatry residency
17 program at the University of Washington shall offer ~~((one))~~ two
18 additional twenty-four month residency positions that ~~((is))~~ are
19 approved by the accreditation council for graduate medical education
20 to ~~((one))~~ two residents specializing in child and adolescent
21 psychiatry. The ~~((residency))~~ positions must each include a minimum
22 of ~~((twelve))~~ eighteen months of training in settings where
23 children's mental health services are provided under the supervision
24 of experienced psychiatric consultants and must be located west of
25 the crest of the Cascade mountains.

26 NEW SECTION. **Sec. 6.** A new section is added to chapter 74.09
27 RCW to read as follows:

28 (1) Subject to the availability of amounts appropriated for this
29 specific purpose, the authority shall collaborate with the University
30 of Washington and a professional association of licensed community
31 behavioral health agencies to develop a statewide plan to implement
32 evidence-based coordinated specialty care programs that provide early
33 identification and intervention for psychosis in licensed and
34 certified community behavioral health agencies. The authority must
35 submit the statewide plan to the governor and the legislature by
36 March 1, 2020. The statewide plan must include:

37 (a) Analysis of existing benefit packages, payment rates, and
38 resource gaps, including needs for nonmedicaid resources;

1 (b) Development of a discrete benefit package and case rate for
2 coordinated specialty care;

3 (c) Identification of costs for statewide start-up, training, and
4 community outreach;

5 (d) Determination of the number of coordinated specialty care
6 teams needed in each regional service area; and

7 (e) A timeline for statewide implementation.

8 (2) The authority shall ensure that:

9 (a) At least one coordinated specialty care team is starting up
10 or in operation in each regional service area by October 1, 2020; and

11 (b) Each regional service area has an adequate number of
12 coordinated specialty care teams based on incidence and population
13 across the state by December 31, 2023.

14 (3) This section expires June 30, 2024.

15 NEW SECTION. **Sec. 7.** A new section is added to chapter 43.216
16 RCW to read as follows:

17 The department of children, youth, and families must enter into a
18 contractual agreement with an organization providing coaching
19 services to early achievers program participants to hire one
20 qualified mental health consultant for each of the six department-
21 designated regions. The consultants must support early achievers
22 program coaches and child care providers by providing resources,
23 information, and guidance regarding challenging behavior and
24 expulsions and may travel to assist providers in serving families and
25 children with severe behavioral needs. In coordination with the
26 contractor, the department of children, youth, and families must
27 report on the services provided and the outcomes of the consultant
28 activities to the governor and the appropriate policy and fiscal
29 committees of the legislature by June 30, 2021.

30 NEW SECTION. **Sec. 8.** Section 2 of this act is added to chapter
31 74.09 RCW.

32 NEW SECTION. **Sec. 9.** Section 4 of this act takes effect July 1,
33 2020.

34 NEW SECTION. **Sec. 10.** Section 5 of this act takes effect July
35 1, 2022.

1 NEW SECTION. **Sec. 11.** If specific funding for the purposes of
2 this act, referencing this act by bill or chapter number, is not
3 provided by June 30, 2019, in the omnibus appropriations act, this
4 act is null and void.

Passed by the Senate April 18, 2019.

Passed by the House April 12, 2019.

Approved by the Governor May 9, 2019.

Filed in Office of Secretary of State May 13, 2019.

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