# HOUSE BILL REPORT HB 1819

# As Reported by House Committee On:

Early Learning & Human Services Appropriations

**Title**: An act relating to paperwork reduction in order to improve the availability of mental health services to protect children and families.

**Brief Description**: Reducing certain documentation and paperwork requirements in order to improve children's mental health and safety.

Sponsors: Representatives Dent, Senn, Kagi, Griffey, Johnson and McBride.

## **Brief History:**

#### **Committee Activity:**

Early Learning & Human Services: 2/1/17, 2/8/17 [DPS]; Appropriations: 2/21/17 [DP2S(w/o sub ELHS)].

## **Brief Summary of Second Substitute Bill**

• Requires the Department of Social and Health Services to reduce documentation and paperwork requirements for behavioral health services.

# HOUSE COMMITTEE ON EARLY LEARNING & HUMAN SERVICES

**Majority Report**: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 13 members: Representatives Kagi, Chair; Senn, Vice Chair; Dent, Ranking Minority Member; McDonald, Assistant Ranking Minority Member; Frame, Goodman, Griffey, Kilduff, Klippert, Lovick, McCaslin, Muri and Ortiz-Self.

Staff: Dawn Eychaner (786-7135).

# Background:

The Department of Social and Health Services (DSHS) licenses and contracts with behavioral health organizations (BHOs) for the provision of community-based mental health and substance use disorder treatment. Contracts between the DSHS and BHOs must include performance measures linked to client outcomes, standards related to financial integrity of

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the organization and the quality of services provided, and mechanisms for monitoring contract performance. The DSHS adopts rules related to the operation of BHOs, and BHOs must comply with all applicable local, state, and federal rules and laws.

# Summary of Substitute Bill:

The DSHS must immediately review its rules, policies, and procedures related to documentation and paperwork requirements for behavioral health services with regard to individual assessments. The review must identify areas where duplicative or inefficient requirements can be eliminated or streamlined. The review must be completed by November 1, 2017. The DSHS must take immediate steps to amend department rules according to the results of the review. This provision expires December 31, 2018.

## Substitute Bill Compared to Original Bill:

The following requirements for the DSHS are removed:

- providing a single set of regulations for providers concerning mental health, substance use disorder, and co-occurring disorder treatments by October 1, 2017;
- conducting audits for the provision of behavioral health services according to specified criteria; and
- reviewing documentation and paperwork requirements for social workers serving children in order to eliminate or streamline duplicative or inefficient requirements.

The requirement for the DSHS to review its documentation and paperwork requirements for behavioral health services is added.

# Appropriation: None.

Fiscal Note: Available.

**Effective Date of Substitute Bill**: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

#### **Staff Summary of Public Testimony:**

(In support) Time spent by mental health professionals and children's case workers on paperwork requirements takes away from time available for patients and clients. Duplicative paperwork is a major burden for providers, sometimes creating nearly a 50-50 split between paperwork time and patient care time. The specific audit practices required by the bill are helpful, particularly the use of sampling methodology and treating multiple locations as one entity. The state has good intentions when making regulations to improve services, but the number of regulations has the opposite effect and gets in the way of providing the intended service. (Opposed) None.

**Persons Testifying**: Representative Dent, prime sponsor; Mary Stone-Smith, Catholic Community Services Western Washington; Mike Hatchett, Washington Council for Behavioral Health; Margaret Amara; and Alicia Ferris, Community Youth Services.

Persons Signed In To Testify But Not Testifying: None.

## HOUSE COMMITTEE ON APPROPRIATIONS

**Majority Report**: The second substitute bill be substituted therefor and the second substitute bill do pass and do not pass the substitute bill by Committee on Early Learning & Human Services. Signed by 33 members: Representatives Ormsby, Chair; Robinson, Vice Chair; Chandler, Ranking Minority Member; MacEwen, Assistant Ranking Minority Member; Stokesbary, Assistant Ranking Minority Member; Bergquist, Buys, Caldier, Cody, Condotta, Fitzgibbon, Haler, Hansen, Harris, Hudgins, Jinkins, Kagi, Lytton, Manweller, Nealey, Pettigrew, Pollet, Sawyer, Schmick, Senn, Springer, Stanford, Sullivan, Taylor, Tharinger, Vick, Volz and Wilcox.

Staff: Andy Toulon (786-7178).

## Summary of Recommendation of Committee On Appropriations Compared to Recommendation of Committee On Early Learning & Human Services:

A null and void clause is added, making the bill null and void if specific funding is not provided in the budget.

#### Appropriation: None.

Fiscal Note: Available.

**Effective Date of Second Substitute Bill**: The bill takes effect 90 days after adjournment of the session in which the bill is passed. However, the bill is null and void unless funded in the budget.

#### **Staff Summary of Public Testimony:**

(In support) This bill originates from the recommendations of the Children's Mental Health Workgroup. Providers are spending as much or more time on paperwork than they are with clients. Reducing paperwork would allow clinicians to be more efficient and see more clients.

The original bill is preferred over the substitute version. The original bill was based on recommendations from three different workgroups that met over the interim to study workforce shortages. Each group recommended reducing paperwork and streamlining audits as ways to improve staff morale and productivity. The provisions of the original bill requiring that audits use sample methodology and prohibiting annual visits at every location

operated by a single entity should be restored. This will reduce the burden on providers so they can focus on services.

This bill is focused on reducing regulations that have not been shown to improve services at agencies. Passing an audit does not mean that there are quality services being provided. Some guidance should be included about what the reductions in regulations should be focused on, such as access to care, determination of medical necessity, eligibility for services, and ensuring that the services are related to the diagnosis being treated.

(Opposed) None.

**Persons Testifying**: Representative Dent, prime sponsor; Joan Miller, Washington Council for Behavioral Health; and Alicia Ferris, Community Youth Services.

Persons Signed In To Testify But Not Testifying: None.