SENATE BILL REPORT E2SHB 1819

As of March 20, 2017

- **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**: House Committee on Appropriations (originally sponsored by Representatives Dent, Senn, Kagi, Griffey, Johnson and McBride).

Brief History: Passed House: 3/01/17, 98-0. **Committee Activity:** Human Services, Mental Health & Housing: 3/14/17.

Brief Summary of Bill

• Requires the Department of Social and Health Services or Health Care Authority to review initial assessment documentation rules for behavioral health treatment providers by November 1, 2017, and eliminate duplicative or inefficient documentation requirements.

SENATE COMMITTEE ON HUMAN SERVICES, MENTAL HEALTH & HOUSING

Staff: Kevin Black (786-7747)

Background: The Department of Social and Health Services (DSHS) licenses and certifies providers of behavioral health services. This includes establishing rules for providers, including documentation requirements for initial assessment, and auditing to monitor compliance with regulatory requirements. Two bills proposed this session would transfer oversight functions of DSHS to the Health Care Authority (HCA) and Department of Health.

The Children's Mental Health Work Group (CMHWG) is a workgroup that convened in 2016 pursuant to E2SHB 2439 (2016). The CMHWG published a final report and recommendations in December 2016. Recommendations relating to paperwork reduction were included in the body of the report and the appendices.

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.

The Behavioral and Primary Health Regulatory Alignment Task Force (Task Force) is a taskforce that convened in 2016 pursuant to E3SHB 1713 (2016). The Task Force created a report dated November 8, 2016, which included recommendations related to paperwork reduction. The report of the Task Force was incorporated by reference in the CMHWG report recommendations.

Summary of Bill: DSHS must immediately perform a review of its rules, policies, and procedures relating to the documentation requirements for initial client assessments for behavioral health treatment providers. The review must identify duplicative or inefficient documentation requirements that can be eliminated or streamlined for providers. DSHS must complete the review by November 1, 2017, and take immediate steps to amend its rules after the review.

If bills are passed transferring regulatory oversight of behavioral health providers from DSHS to HCA, then HCA must perform the review instead of DSHS.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This bill came from the Workforce Committee of the Children's Mental Health Work Group. For two hours spent with a client, the clinician might spend four to six hours doing paperwork. We can increase our workforce by decreasing their paperwork load. This is the best way to get more mileage out of existing funds. We have to be efficient and effective with the money we are spending. Please add components from the Senate bill. Please add a new provision exempting manualized models with their own documentation requirements from redundant state paperwork requirements. Paperwork kills, and creates burnout. We prefer the Senate version which is more robust. Three workgroups over the interim made this same recommendation.

Persons Testifying: PRO: Representative Dent, Prime Sponsor; Laurie Lippold, Partners for Our Children; Kathryn Kolan, WA State Medical Assn.; Andrea Davis, Coordinated Care; Joan Miller, WA Council for Behavioral Health; Alicia Ferris, Community Youth Services; Gary Romjue, Catholic Community Services.

Persons Signed In To Testify But Not Testifying: No one.