# FINAL BILL REPORT SHB 2728

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Synopsis as Enacted

**Brief Description**: Implementing a sustainable funding model for the services provided through the children's mental health services consultation program and the telebehavioral health video call center.

**Sponsors**: House Committee on Appropriations (originally sponsored by Representatives Slatter, Davis, Senn, Bergquist, Frame, Fey and Pollet).

House Committee on Appropriations Senate Committee on Health & Long Term Care Senate Committee on Ways & Means

#### **Background:**

### Partnership Access Line.

The Partnership Access Line (PAL) is a phone consultation service for primary care providers to consult with a pediatric psychiatrist. Seattle Children's Hospital delivers the PAL consultation services in affiliation with the University of Washington Department of Psychiatry and Behavioral Sciences (UW) through a contract with the Health Care Authority (HCA).

# <u>Partnership Access Line and Partnership Access Line for Kids Referral and Assistance Service.</u>

The PAL for Moms pilot program provides consultation for health care professionals to assess and treat depression in pregnant women and new mothers. The PAL for Kids Referral and Assistance Service pilot program facilitates referrals to children's mental health services and other resources for parents and guardians. The pilot programs will conclude January 1, 2021.

#### <u>Telebehavioral Health Call Center/UW Psychiatry Consultation Line.</u>

The pilot Telebehavioral Health Call Center/Psychiatry Consultation Line (PCL) is a telephone and video-based call center that offers consultation services to emergency department providers, primary care providers, and municipal correctional facility providers. Funding for the PCL was provided in the 2019-2021 Omnibus Operating Budget for the program to operate from 8 a.m. to 5 p.m. Monday through Friday during fiscal year 2020; and 24 hours a day, seven days a week during fiscal year 2021. The psychiatric consultation

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team provides psychiatric and substance use disorder clinical consultation on the same day or within 24 hours of the next business day.

# Children's Mental Health Work Group.

The Children's Mental Health Work Group (CMHWG) was established to identify barriers to accessing mental health services for children and families and to advise the Legislature on statewide mental health services for this population. The CMHWG expires in December 2020.

The HCA convened a CMHWG advisory group consisting of representatives from the UW, Seattle Children's Hospital, Managed Care Organizations (MCOs), organizations connecting families to children's mental health services and providers, health insurance carriers, and the Office of the Insurance Commissioner (OIC). In 2019 the advisory group recommended an alternative funding model for the behavioral health consultation and referral services: PAL, PAL for Moms, PAL for Kids Referral and Assistance Service, and the PCL. The funding model builds upon work completed by the HCA in 2018 and creates a mechanism to:

- determine the annual cost of operating the PAL;
- collect a proportional share of program costs from each health insurance carrier; and
- differentiate between PAL activities eligible for Medicaid funding and activities that are non-Medicaid eligible.

#### **Summary:**

#### Psychiatry Consultation Line.

The HCA, in collaboration with the UW, must continue implementing the PCL to provide emergency department providers, primary care providers, and county and municipal correctional facility providers with on-demand access to psychiatric and substance use disorder clinical consultation for adult patients. The clinical consultation may occur via telemedicine.

#### Data and Reporting.

The UW and participating hospitals are responsible for collecting the following information for the PAL, PCL, and PAL for Moms programs:

- the number of individuals served;
- demographic information regarding the individuals served, as available, including the individual's age, gender, and city and county of residence;
- demographic information regarding the providers placing the calls, including the type and location of practice;
- insurance information, including health plan and carrier, as available;
- a description of the resources provided; and
- provider satisfaction.

For the PAL for Kids Referral and Assistance Service program, the UW, in coordination with any participating hospital, will also collect the:

- the number of individuals served;
- demographic information regarding the individuals served, as available, including the individual's age, gender, and city and county of residence. Demographic information may not include any personally identifiable information;

- demographic information regarding the parents or guardians placing the calls, including family location;
- insurance information, including health plan and carrier, as available;
- a description of the resources provided;
- average time frames from receipt of the call to referral for services or resources provided;
- the most frequently requested issues that parents and guardians are asking for assistance with;
- most frequently requested issues that families are asking for referral assistance with;
- the number of individuals that receive an appointment based on referral assistance; and
- parent or guardian satisfaction.

## Partnership Access Line Funding Model.

Beginning July 1, 2021, the funding model for the PAL and PCL programs will be as follows:

- The HCA will consult with the UW and the Seattle Children's Hospital to determine the annual operating costs of each program, including administrative costs.
- For each program, the HCA must calculate the proportion of clients that are covered by Medicaid or state medical assistance programs based on data collected by the UW and participating hospitals. The state must cover the cost for clients covered under Medicaid or state medical assistance programs.
- The HCA must collect a proportional share of program costs, excluding administrative costs, from each of the following entities that are not for covered lives under contract with the HCA as Medicaid managed care organizations:
  - health carriers:
  - self-funded multiple employer welfare arrangements; and
  - employers or other entities that provide health care in this state, including selffunding entities or employee welfare benefit plans.
- The Washington Vaccine Association must provide the HCA, upon request, any available information needed to calculate the proportional share of program costs.

The HCA may contract with a third-party administrator to calculate and administer the assessments, which will be deposited into the newly created Telebehavioral Health Access Account to support telebehavioral health programs. The HCA must develop separate performance measures for the PAL and the PCL.

The UW, in coordination with participating hospitals, must provide quarterly reports to the HCA on the demographic data collected by each program, any performance measures specified by the HCA, and systemic barriers to services. Data from the reports must inform the Legislature's decision of whether to make the PAL for Moms and PAL for Kids Referral and Assistance programs permanent. The funding model must also be used for the PAL for Moms and PAL for Kids Referral and Assistance Service programs beginning July 1, 2021, if the Legislature decides to continue the programs.

#### Joint Legislative Audit and Review Committee Review.

The Joint Legislative Audit and Review Committee (JLARC) must review the PAL for Moms and the PAL for Kids Referral and Assistance Service programs. The review will cover the period from January 1, 2019, through December 30, 2021, and evaluate the programs'

success at addressing patients' issues related to access to mental health and substance use disorder services. The review is due to the Legislature by December 1, 2022.

# **Votes on Final Passage:**

House 56 40

Senate 49 0 (Senate amended) House 90 7 (House concurred)

Effective: June 11, 2020