
SUBSTITUTE SENATE BILL 5483

State of Washington

66th Legislature

2019 Regular Session

By Senate Health & Long Term Care (originally sponsored by Senators Braun, Keiser, Palumbo, Sheldon, Becker, Short, Wilson, C., Hunt, Kuderer, and Darneille)

READ FIRST TIME 02/20/19.

1 AN ACT Relating to improving services for individuals with
2 developmental disabilities; adding a new section to chapter 71A.12
3 RCW; creating a new section; and declaring an emergency.

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

5 NEW SECTION. **Sec. 1.** The legislature finds that:

6 (1) The office of the developmental disabilities ombuds is a
7 private, independent office focused on improving the lives of persons
8 with developmental disabilities in Washington state. It is the duty
9 of the developmental disabilities ombuds to monitor procedures and
10 services provided to people with developmental disabilities; review
11 facilities and residences where services are provided; resolve
12 complaints about services; and issue reports on the services
13 provided.

14 (2) The office of the developmental disabilities ombuds has
15 identified a systemic issue of adults with developmental disabilities
16 being stuck in hospitals without any medical need because there is no
17 alternative setting available to discharge the individual.

18 (3) Many of the individuals that are unable to discharge from the
19 hospital are clients of the developmental disabilities administration
20 of the department of social and health services. In some cases, these
21 clients were receiving residential services and went to the hospital

1 for a medical condition, but when the client was ready for discharge,
2 their residential services provider had terminated services. Other
3 clients were dropped off at the hospital by their residential service
4 provider because the residential service provider could no longer
5 manage the client's care.

6 (4) It is not in the public or the client's interest for
7 hospitals to be used for clients that do not have medical needs.
8 Further, changes must be made to the developmental disabilities
9 administration's service delivery system to ensure clients have
10 access to services that keep them in the community and prevent
11 inappropriate hospital stays.

12 NEW SECTION. **Sec. 2.** A new section is added to chapter 71A.12
13 RCW to read as follows:

14 (1) The department shall track and monitor the following items
15 and make the deidentified information available to the office of the
16 developmental disabilities ombuds created in RCW 43.382.005, the
17 legislature, the Washington state hospital association, and the
18 public upon request:

19 (a) Information about clients receiving services from a provider
20 that are taken to a hospital. This includes:

21 (i) The number of clients that are taken to a hospital without a
22 medical need;

23 (ii) The number of clients that are taken to a hospital with a
24 medical need, but are unable to discharge once the medical need is
25 met;

26 (iii) Each client's length of hospital stay for nonmedical
27 purposes;

28 (iv) The reason each client was unable to be discharged from a
29 hospital once the client's medical need was met;

30 (v) The location, including the type of provider, where each
31 client was before being taken to a hospital; and

32 (vi) The location where each client is discharged.

33 (b) Information about clients that are taken to a hospital once
34 their provider terminates services. This includes:

35 (i) The number of clients that are taken to a hospital without a
36 medical need;

37 (ii) The number of clients that are taken to a hospital with a
38 medical need, but are unable to discharge once the medical need is
39 met;

1 (iii) Each client's length of hospital stay for nonmedical
2 purposes;

3 (iv) The reason each client was unable to be discharged from a
4 hospital once the client's medical need was met;

5 (v) For each client, the reason the provider terminated services;

6 (vi) The location, including the type of provider, where each
7 client was before being taken to a hospital; and

8 (vii) The location where each client is discharged.

9 (2) A provider must notify the department when a client is taken
10 to a hospital so that the department may track and collect data as
11 required under subsection (1) of this section.

12 (3) A provider must notify the department before terminating
13 services on the basis that the provider is unable to manage the
14 client's care. Prior to a provider terminating services to a client
15 because the provider is unable to manage the client's care, the
16 department shall provide, to the extent available, crisis
17 stabilization services to support the provider and the client in the
18 client's current setting. These services may include:

19 (a) Psychological assessments, such as full scale intelligence
20 quotient and risk assessments;

21 (b) Technical assistance and consultation on behavior supports
22 for family caregivers, staff, and medical providers; and

23 (c) Therapeutic mental and behavioral health services.

24 (4) In the event that the provider is unable to manage the
25 client's care after crisis stabilization services are provided, the
26 provider may terminate services and the department shall:

27 (a) Transition the client to another provider that meets the
28 client's needs and preferences; or

29 (b) Transition the client to a residential habilitation center
30 for crisis stabilization services until an alternative provider is
31 determined.

32 (5)(a) The department shall be responsible for frequently and
33 appropriately communicating with a hospital that is caring for a
34 client without a medical need, and providing frequent updates on
35 transitioning the client to a more appropriate setting.

36 (b) The department shall coordinate providing psychological and
37 habilitative services to clients who are being cared for at a
38 hospital without a medical need.

1 (c) The department shall provide reimbursement at the daily
2 residential habilitation center rate to any hospital that provides
3 care for:

4 (i) A client without a medical need that is receiving services
5 from a provider; or

6 (ii) A client without a medical need that is taken to the
7 hospital once their provider terminated services.

8 (6) This section may not be construed to create a private right
9 of action.

10 (7) The definitions in this subsection apply throughout this
11 section unless the context clearly requires otherwise:

12 (a) "Administration" means the developmental disabilities
13 administration of the department of social and health services.

14 (b) "Crisis stabilization services" has the same meaning as
15 defined in RCW 71A.10.020.

16 (c) "Hospital" means a facility licensed under chapter 70.41 or
17 71.12 RCW.

18 (d) "Provider" means an individual, a facility, or an agency that
19 is one or more of the following: Licensed, certified, contracted by
20 the department, or state operated to provide residential or supported
21 living services to administration clients.

22 NEW SECTION. **Sec. 3.** This act is necessary for the immediate
23 preservation of the public peace, health, or safety, or support of
24 the state government and its existing public institutions, and takes
25 effect immediately.

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