

# FINAL BILL REPORT

## 2SHB 1168

---

---

C 288 L 23  
Synopsis as Enacted

**Brief Description:** Providing prevention services, diagnoses, treatment, and support for prenatal substance exposure.

**Sponsors:** House Committee on Appropriations (originally sponsored by Representatives Simmons, Ramel, Callan, Wylie, Davis and Ormsby).

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

### **Background:**

#### Fetal Alcohol Spectrum Disorders.

Fetal alcohol spectrum disorders (FASD) are a group of conditions that can occur in a person who was exposed to alcohol before birth. These effects can include physical problems and problems with behavior and learning. Conditions can range from mild to severe and can affect each person differently. According to the Centers for Disease Control and Prevention, FASD manifests in a variety of ways, including but not limited to: low body weight, poor coordination, hyperactive behavior, difficulty with attention, poor memory, speech and language delays, vision or hearing problems, problems with the heart, kidneys, or bones, shorter-than-average height, and abnormal facial features.

Fetal alcohol spectrum disorder diagnoses are based on particular symptoms and include fetal alcohol syndrome, alcohol-related neurodevelopmental disorder, alcohol-related birth defects, and neurobehavioral disorder associated with prenatal alcohol exposure.

#### Fetal Alcohol Exposure Interagency Agreement.

The Health Care Authority (HCA), the Department of Social and Health Services, the Department of Health, the Department of Corrections, and the Office of the Superintendent of Public Instruction execute a Fetal Alcohol Exposure Interagency Agreement (Interagency

---

*This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.*

Agreement) to ensure the coordination of identification, prevention, and intervention programs for children who have fetal alcohol exposure, and for women at high risk of having children with fetal alcohol exposure.

**Summary:**

The HCA, on behalf of clients or potential clients of the Department of Children, Youth, and Families (DCYF), must contract with a provider with expertise in comprehensive prenatal exposure treatment and family supports (initial contractor) to offer services to children over the age of three and families who are or have been involved in the child welfare system or who are at risk of involvement in the system by January 1, 2024. The contract must maximize the number of families served through the HCA and community referrals, reduce the number of placements, and prevent adverse outcomes for impacted children.

By January 1, 2025, the HCA must contract with up to three providers across the state to offer comprehensive treatment services for prenatal substance exposure and family supports for children both currently and formerly involved with the child welfare system who were exposed to substances before birth. The HCA must also contract with the initial contractor to support these providers. Support includes creating education and training programs and offering ongoing coaching and support.

Comprehensive treatment services and family supports must be trauma-informed and may include the following:

- occupational, speech, and language therapy;
- behavioral health counseling and caregiver counseling;
- sensory processing support;
- educational advocacy, psychoeducation, social skills support, and groups;
- linkages to community resources; and
- family supports and education.

The HCA, in collaboration with the DCYF, must work with contracted providers and families to collect outcome data. The HCA must submit a report to the Legislature by June 1, 2028, addressing the expansion of services under the contracts, outcome data and ways to improve outcomes, and recommendations related to improving the availability of and access to services.

The HCA must submit recommendations to the Legislature on ways to increase access to diagnoses, treatment, services, and supports for children who were exposed to substances before birth and their families and caregivers by June 1, 2024.

Subject to the availability of amounts appropriated, the HCA must contract with a statewide nonprofit entity with expertise in both FASD and family and caregiver support to offer free support groups for individuals with FASD and their parents and caregivers.

Fetal Alcohol Exposure Interagency Agreement.

The DCYF is added to the agencies participating in the Interagency Agreement, and the scope of the Interagency Agreement is expanded to include exposure to prenatal substances other than alcohol.

**Votes on Final Passage:**

House	95	0	
Senate	47	0	(Senate amended)
House	97	0	(House concurred)

**Effective:** July 23, 2023